STRATEGIC POLICY AND RESOURCES COMMITTEE



Subject:		Motion: Waiting Lists for Diagnosing Autism in Children – Response from Minister of Health				
Date:		18th June, 2021				
Reporting Officer:		John Walsh, City Solicitor/Director of Legal and Civic Services				
Contact Officer:		Jim Hanna, Senior Democratic Services Officer				
Restricted Reports						
Is this	report restricted?		Yes		No	X
If Yes, when will the report become unrestricted?						
After Committee Decision						
	After Council D					
	Sometime in th	e future				
	140 401					
Call-in						
Is the decision eligible for Call-in?						
1.0	Purpose of Repor	t/Summary of Main Issues				
1.1	To consider a response to a motion calling for action to be taken to tackle waiting lists for diagnosing autism in children, which was passed by the Council at its meeting on 4th May.					
2.0	Recommendation					
2.1	The Members of the Committee are requested to consider the response and, in line with the Council's decision of 4th May, to delegate authority to the Chief Executive to take such action thereon as may be determined.					
3.0	Main Report					
3.1	At the Council meeting on 4th May, the following motion, which was proposed by Councillor McAteer and seconded by Councillor Magennis, was passed:					ouncillor
	The number o	cause significant social, communication and f school age children with autism has soared ren were diagnosed as on the autistic spectrom. Five years previously the figure was 1,47	d in rece rum last	nt years year ac	s. A to	otal the

and economically disadvantaged backgrounds are more likely to have autism - with boys three times more likely to be diagnosed than girls.

However, in Belfast thousands of children with suspected autism are waiting up to two years to get a diagnosis from the Belfast Trust. Early diagnosis and intervention is key to the future of these children and parents are distressed that valuable time is being lost while their children remain on waiting lists.

Many parents have had no option but to pay for private assessments which cost circa £1,400. All 5 of the norths health trusts now accept private referrals and this is leading to concerns about a two-tier health system that will see children from disadvantaged backgrounds left further down the waiting lists.

This Council asserts that, whilst the pandemic has affected autism services, all children with autism deserve to have timely assessments and the vital support they need at the earliest possible stage in their development. This Council will write to the Minister for Health to ask him to take all steps necessary to immediately tackle the unacceptable waiting lists for diagnosis of autism in children and to provide the necessary supports and interventions for their development.

Furthermore, the Council also commits to doing everything it can to ensure that we play our role in providing safe, appropriate and inclusive services and facilities for children with autism".

- A response to the motion has been received from Mr. Robin Swann, Minister of Health, a copy of which is attached.
- 3.3 The Minister begins by stating that he is acutely aware of the extensive waiting lists for autism assessments and the challenging circumstances which this presents for children, their families and carers. He recognises that this can have an impact upon their emotional health and wellbeing and on their personal development and education and acknowledges that this is unacceptable.
- He points out that he has publicly expressed concern that, in light of these waiting lists, families have felt the need to seek private assessment. Whilst this is a personal decision for some families, it is a prohibitive solution for many and he does not want systems and services where families feel that they must take this route. However, this is not a situation which is unique to autism assessment and there is much work to be done to improve waiting lists to access services across Northern Ireland generally.
- The Minister explains that he has, in recent months, taken a number of steps to address the need for early intervention and greater support, in response to the challenges being experienced by individuals and families who have an autism diagnosis, or who may be waiting for an assessment. On 8th March, he published a cross-departmental Autism Interim Strategy, which sets out the key priorities to be addressed in 2021 and 2022, with a focus on early intervention and improving pathways of care. The interim strategy will be supported by a range of outcome-based actions across Government departments and the health and social care sector and aligned to the Programme for Government.

3.6	As part of this interim Strategy, the Minister is committed to listening to those who matter, particularly autistic people, their families and carers. In support of this, the Department of Health has established an Autism Forum, comprised of people with lived experience, as well as representatives from the community and voluntary sector organisations who represent them. The Forum will be tasked with informing and co-producing a longer-term autism strategy and work on this will commence later this year.			
3.7	However, improving support for autistic people and those waiting for an assessment is, he points out, a collective responsibility for everyone involved.			
3.8	The Minister goes on to state that he is aware that, in each Trust area, multi-agency autism forums work in partnership to enhance understanding of autism within communities and wider society, to enable social inclusion for all. He is also aware that Mid and East Antrim Council and Armagh City, Banbridge and Craigavon Borough Council have been working closely with representatives from autism services within their Trust areas to create autism-friendly services within their boroughs. He understands that an invitation has been extended by the Belfast Health and Social Care Trust to the Council to participate in its multi-agency autism forum and encourages the Council to avail of this opportunity to determine how, through partnership working, services and support can be improved for all. Financial and Resource Implications			
3.9	None associated with this report.			
	Equality or Good Relations Implications/Rural Needs Assessment			
3.10	None			
4.0	Document Attached			
	Response from Minister of Health			