



Autism (Wales) Bill
Health, Social Care and Sport Committee Inquiry
Response from the Association of Educational Psychologists

1. Summary

1.1 The Association of Educational Psychologists (AEP) is the professional association and trade union for the 3,200 Educational Psychologists across the UK. In Wales the AEP has around 200 members.

1.2 The educational psychology (EP) profession is a highly skilled and essential element in the nation's workforce, expert in responding to the SEND and mental health issues of children and young people (CYP) and supporting their emotional well-being.

1.3 EPs work to provide support to pupils with special educational needs across multiple levels in both mainstream and alternative provision (AP). In Wales EPs have duties to contribute to statements of SEN in Wales.

1.4 The AEP recognises the difficulties faced by individuals with autism, and the problems that arise when they cannot access services.

1.5 However, the AEP believes that it is vital to recognise potential pitfalls of singling out one group of people with different needs.

1.6 The AEP is concerned that new legislation focused on autism alone could undermine the new additional learning needs (ALN) reforms in Wales. Any new legislation must focus on co-ordination and co-operation, better training on understanding autism and other needs, and effective information-sharing.

1.7 EPs and other professionals are facing significant workload pressures, reducing their ability to provide wider support. We urgently need a well-funded, upskilled workforce who can support individuals whatever their needs. This means that further legislation must be matched by increased funding in order to deliver this.

2. The general principles of the Autism (Wales) Bill and the extent to which it will make provision for meeting the needs of children and adults with Autism Spectrum Disorder (ASD) in Wales and achieve the aim of protecting and promoting their rights

2.1 The AEP recognises the difficulties faced by individuals with autism, and the problems that arise when they cannot access services.

2.2 AEP members have identified a number of difficulties with the current system in Wales:

- The effectiveness of the current arrangements for improving autism services in Wales is inconsistent.
- Many services are not operating in a joined-up manner.



- Despite the newly established Neuro-Developmental Services in each Health Board, long waiting lists have remained consistent. Delays in diagnosis and the post-diagnosis process should be addressed as a priority.
- There is a postcode lottery when it comes to services currently provided to meet the needs of people with autism spectrum conditions in Wales.
- There are concerns about the sufficiency of provision in schools, as well as the provision of appropriate out-of-school activities that CYP with autism can join in.

2.3 Clarity is also required on pathways to diagnosis.

2.4 The diagnostic process should be multi-disciplinary, not only involving medical professionals. It is crucial that EPs are involved closely in this process, in order to help to advise parents, schools and local authorities when planning appropriate educational provision.

2.5 For the multi-disciplinary diagnostic process to be effective and timely there is an urgent need for enough specialist professionals, including educational psychologists, to be available to support the process.

2.6 Any legislation and guidance must be flexible enough to accommodate changes and advancements in, for example, diagnostic criteria. It is also important that it complies with legislative reforms, and the ALN Code of Practice.

2.7 Provision to support the inclusion of children with autism or emerging diagnoses in pre-school settings is essential.

2.8 The AEP supports proposals for Local Health Boards and Local Authorities in Wales to be required to publish information on the pathway to diagnosis for children and adults living in their areas.

3. Any potential barriers to implementation

3.1 EPs and other professionals are facing significant workload pressures, reducing their ability to provide wider support. We urgently need a well-funded, upskilled workforce who can support individuals whatever their needs. Further legislation must be matched by increased funding in order to deliver this.

3.2 A lack of training may create problems in implementation:

- AEP members report that delays in diagnoses are linked to a lack of training on Autism Diagnostic Observation Scheduled (ADOS) assessments.
- Diagnosis should be multi-disciplinary, and it is crucial that EPs are involved closely in this process, alongside the professionals mentioned on the face of the Bill. Better training for school staff on autism and the difficulties that CYP with autism face would help to combat these inconsistencies reported. EPs are well-placed to provide this.
- The AEP recommends that EPs should be trained to carry out ADOS assessments and contribute to the multi-disciplinary and multi-professional assessment processes (along with CYP and their families) which are recognised



as the best practice in order to make diagnoses and recommend appropriate interventions, support and provision for CYP with autism.

- More broadly, members highlight that there is a significant amount of effective training currently being supported. It is important to understand what this is and how best to build on it, rather than developing something entirely new.

4. Whether there are any unintended consequences arising from the Bill

4.1 The AEP does not believe that a definition of an autistic spectrum disorder should be included on the face of the legislation. This would contradict the spirit of the new ALN legislation.

4.2 To single out a definition in any legislation would be very difficult and could exclude people who show signs of autism but do not fully meet the criteria. We share the views of our members on the importance of addressing types of need, rather than focusing on a rigid definition. It should be noted that there is already more than one diagnostic manual for autism, each stating different definitions.

4.3 The AEP recognises that receiving a diagnosis of autism provides many individuals and their families with a measure of certainty, greater insight into the difficulties they experience, and access to services.

4.4 However, it is very important to consider that this is not the experience of all individuals and their families, who may not wish to pursue a diagnosis of autism.

4.5 Additionally, there is a risk that individuals who do not receive a diagnosis but still show signs of autism, do not receive the same level of support, leading to unequal treatment.

4.6 It is vital that support is also provided for those who do not have a specific diagnosis of autism but who demonstrate a similar profile of behaviour to those CYP who have autism.

4.7 Statutory guidance and data collection practices must be linked back to wider ALN reforms, and children who do not meet diagnostic criteria but still demonstrate a similar profile of behaviour to those CYP who have autism must also be supported.

4.8 It is essential that support is based on need, and not a diagnosis alone. If the latter is the case, the AEP is concerned that there could be a rise in the number of individuals and families exploring a diagnosis to receive support, leading to more challenges when that support is not forthcoming.

4.9 The AEP is concerned that an increased demand for diagnosis, if met with a failure to increase resources, will result in poor assessments and more false positives.

5. The financial implications of the Bill

5.1 When developing and implementing a national autism strategy the AEP anticipates extra costs, particularly for: additional duties for local authorities and NHS bodies;



improving the timeliness of the diagnostic process; providing support for families; the training of staff.

5.2 Overall, we would anticipate that improving the way in which mental health needs are met, not just meeting the needs of those diagnoses with autism, would represent a significant saving.

5.3 Long term benefits and savings could include: reduced absences from work, reducing offending; increasing employment rates.

6. The appropriateness of the powers in the Bill for Welsh Ministers to make subordinate legislation

6.1 Any powers in the Bill for Welsh Ministers to make subordinate legislation must not supersede existing ALN legislation and practice.