

Hampshire Autism Partnership Board

MINUTES

16th June 2026 - 10.00 - 12.30pm (in person)

Present:

Chairing meeting today - **Michael White** – Co-Chair and Hampshire Autism Voice (HAV)

Cllr Fran Carpenter - County councillor and HAPB Co-Chair

Jason Norum - Head of Commissioning young adults, Learning Disability, Mental Health and Physical Disability, Hampshire County Council (HCC) Adults Autism Lead

Zoë Beasley – Hampshire Autism Partnership coordinator & minute taker, HCC

Cecilia Agbaje – Commissioning Manager, Deputy Autism Lead, HCC

Simon Lloyd – Hampshire Autism Voice member

Rachel Carter – Hampshire Autism Voice member

Katie Board – Service Delivery manager, Autism Hampshire

Alyson Miller – Hampshire Autism Voice member

Vanessa Cosby – Hampshire Autism Voice and Autism Ambassadors Coordinator

David Carter – National Autistic Society South Hampshire Branch Chair

Michelle Broughton – Senior Delivery Manager for Children and Young People's Neurodiversity, NHS Hampshire and Isle of Wight Integrated Care Board (ICB)

Pip Williams – Service Lead, Neurodiversity and Wellbeing Service, CSD, HCC

Paul Richardson – Hampshire Parent Carer Network (HPCN) Chair

Helen Toomer-Jones - Autism Specialist Lead, Hampshire Hospitals (HHFT)

Nikhyta Patel – Learning Disability Specialist, South Central Ambulance Service (SCAS)

Donna Love - Hampshire Autism Voice member

Cerys Williams - Hampshire Autism Voice member

Su Seymour - Hampshire Autism Voice member

Nick Bentley – Department for Work and Pensions (DWP)

Annie Foot – Co-CEO, Havant and East Hants Mind

Apologies:

Mark Kingswood County Education Manager, CSD, HCC

Katy Curtis – Deputy Head of Service - All Age Learning Disability and Autism Programme (LDAP), HIOW ICB

Tom Horan - Older Adults Head of Service, HCC

Diana Taphouse - Senior Delivery Manager (All-age Mental Health, Learning Disabilities, Neurodivergence), HIOW ICB

Gemma Langman – GP and LeDeR lead, HIOW ICB

Maria Morrell - Co-CEO, Havant and East Hants Mind

Mark Hewer - District Manager (Children and Families) CSD, HCC

Cheryl Claxton - Head of Community Services, Autism Hampshire

Agenda items:

Hampshire Autism Voice Briefing Paper
Current matters arising
Follow up items from March
Partner strategy updates
SEND reforms
Any other Business

Agenda Item	Subject	Action
1.	<u>Welcome and chairing today</u> Members introduced themselves and outlined their roles and any relevant personal lived experience.	
2.	<u>Introductions/ Minutes of last meeting and any matters arising/ HAPB actions</u> Previous minutes accepted with no amendments raised. No matters arising Updates were provided on outstanding actions: • Neurodiversity and Wellbeing Service – now established and receiving contact requests; a future update will be brought to the Board in September 2026. • Mental Health Charter – work continues ahead of relaunch. • Hampshire Neurodiversity Profiling Tool – development progressing, with pilot activity being planned and name of tool being looked at to ensure it is neuroinclusive. • Autism Strategy Review – initial discussions underway regarding the most proportionate approach to updating the strategy and will be discussed in more detail within steering group (ASG) meetings.	<i>1. Pip to present with Leigh on MDT progress next meeting.</i>
3.	<u>Hampshire Autism Voice Briefing Paper</u> HAV Briefing paper for the HAPB June 20; Simon Lloyd presented the Hampshire Autism Voice (HAV) report and highlighted key developments since the previous Board meeting. Details provided regarding increasing demand across autism and neurodiversity services, particularly the newly established HCC (Hampshire County Council) Neurodiversity and Wellbeing Service. Discussion highlighted the impact of recent changes to local support provision for children and young people. Members noted the value of local knowledge and community-based support alongside such as the Autism Hampshire Information, Advice and Guidance (IAG) service and national programmes such as Autism Central (England's Peer Education Programme). Members also discussed the future financial sustainability of the Autism Ambassadors programme and recognised its significant contribution to autism understanding and acceptance across Hampshire. There was further discussion about the importance of effective information sharing between services and reducing the need for autistic	

	people and families to repeatedly provide the same information when seeking support.	
4.	<u>Current matters arising</u> • Jason Norum provided an update regarding the forthcoming HCC SEND (Special Educational Needs and Disabilities) Area Inspection by the Office for Standards in Education, Children's Services and Skills (Ofsted) and the Care Quality Commission (CQC). • DoLS (Deprivation of Liberty Safeguards) – Jason outlined the significant implications of a recent Supreme Court judgment which has changed how DoLS assessments are considered. The previous "acid test" approach has been replaced by a "multifactorial test", requiring assessors to now consider: ○ The individual's circumstances. ○ Their wishes and preferences. ○ Their feelings and lived experience. ○ Their response to restrictions placed upon them. Members discussed the implications across adult social care, hospitals, mental health services and supported living settings. <i>Zoë Beasley advised that Jem Mason attended the Hampshire Learning Disability Complex Needs working group recently and provided an update, so willing to share slides for awareness and ask Jem to attend a future meeting if required.</i> • Jason Norum confirmed that from September 2026 he will move permanently into a Children's Services commissioning role and so will no longer be the adult autism lead for HAPB. Stephen White will assume responsibility for the Younger Adults commissioning portfolio. Discussions continue about future adult social care representation on the Board. Questions/comments: • Helen Toomer-Jones highlighted the need for increased awareness across healthcare settings to ensure clinicians understand when deprivation of liberty considerations may apply and how new requirements should be interpreted. Michael formally thanked Jason on behalf of the HAPB for his longstanding support, leadership and contribution to improving the autism partnership work across Hampshire.	2. Ask Jem to attend Sept meeting re DoLS 3. Arrange meet Helen with Lisa Hatcher – on LRP tool sheet.
5.	<u>Follow up items from March</u> - <u>Chairing for HAPB</u> The Board reaffirmed its shared chairing model, consisting of: • A Hampshire County Councillor representative. • A representative with lived experience living in the HCC footprint. Members discussed the history of the arrangement and recognised the importance of ensuring that lived experience remains central to the	4. ASG to look at proforma for updated ToR.

	leadership of the Board. It was noted that Hampshire Autism Voice has traditionally fulfilled this role; however, the principle of lived experience representation is the key requirement rather than representation from a specific organisation. Further discussions to be had within ASG on this matter. - <u>Local Government Reorganisation (LGR) considerations</u> The Board noted that Autism Partnership Boards remain a statutory requirement. Future local authority structures may alter how autism partnership arrangements operate across Hampshire, Portsmouth, Southampton and neighbouring areas. Discussion included the possibility of: • Greater collaboration across HIOW partnership boards. • A strategic Hampshire-wide approach supported by local delivery structures. • Future engagement with emerging shadow authorities and governance arrangements. Shadow authorities are expected to be in place next year alongside elections but no further details currently. - <u>Minutes accessibility</u> The Board considered how minutes could be made more accessible. There was strong support for retaining detailed minutes, alongside a one-page overview highlighting key discussion points and decisions. <i>Zoë agreed to trial this for current meetings minutes and then decision to be made at September meeting based on feedback.</i> - <u>Terms of reference</u> It was agreed that governance arrangements should be reviewed as future local government structures become clearer.	
	Break, refreshment and network	
6.	<u>Partner updates</u>  HAPB partner updates - June 2026.p Zoë Beasley provided a summary of updates received from partner organisations. Key Themes detailed: • Growing demand across health, education, social care and voluntary sector services. • Increasing partnership working to improve joined-up support for autistic and neurodivergent people. • Assessment pathway pressures, including ongoing challenges relating to autism and ADHD waiting lists and Right to Choose provision. • System changes and reform, including SEND Reform, pathway developments and preparations for Local Government Reorganisation.	5. ASG to consider strategy review options for next HAPB meeting.

	• Paul Richardson (HPCN) discussed the development of a co-production ladder designed to help organisations clearly differentiate between consultation, engagement and co-production. Members agreed that being transparent about the level of involvement being offered helps manage expectations and supports meaningful co-production. • Michelle Broughton (ICB) provided a brief verbal overview of her slides, including continuing work to understand waiting list data, and the significant pressures across assessment services. Members discussed concerns about the inconsistent and inflated tone in communication from some providers and the impact this can have on autistic people and their families. Autism Strategy Review The Board considered how best to review the Hampshire Autism Strategy considering significant recent developments across health, education and local government. Members discussed possible options for reviewing and updating the strategy varying in scope and level of detail. It was recognised that establishing multiple task and finish groups may create additional pressures for already stretched partner organisations. Instead, there was support for partners reviewing their relevant sections of the strategy and providing concise updates reflecting significant changes since publication.	
7.	<u>Special Educational Needs and Disabilities (SEND) reform</u> Paul Richardson provided an update on national SEND Reform developments. Local authorities and Integrated Care Boards have been required to develop implementation plans outlining how reforms could be delivered locally. The draft plan has been completed and consists of about 150 pages. The draft plan is currently being reviewed by Hampshire County Council's Chief Executive and Chief Financial Officer and will then be considered by an independent Department for Education (DfE) adviser. Once approved, the plan is expected to become publicly available. Key Objectives of the reforms aim to: • Improve outcomes for neurodivergent children and young people through earlier identification of support needs and timely access to support. • Increase the confidence of individuals with SEND, families and carers in the SEND system. • Improve value for money and long-term sustainability of services. Regarding funding – • Hampshire's High Needs Block deficit is expected to be significantly reduced through government support, writing off 90% of the deficit. • Hampshire is projected to receive approximately £9.9 million to support implementation activity of the reforms.	

- Funding will contribute towards school inclusion developments and the introduction of "Experts at Hand" approaches.

Members acknowledged the pressure currently experienced by children and families and the need for significant improvements in support and outcomes.

Discussion took place regarding the significant amount of work required to develop the plan within a very short timeframe and noted that detailed national guidance is still emerging which is a concern. There was recognition that further work will be required once plans have been approved, particularly around workforce development, delivery arrangements and building confidence amongst autistic people, families' professionals and the wider system.

Questions and Comments:

- Zoë asked if the timeframe that the DfE gave is usual? Concerning given the impact that the reforms will have and the short time frame does seem surprising.

Paul explained the reforms in 2012 had a much longer consultation period so these timescales are substantially shorter than previous reforms. He noted that the Children and Families Act 2014 reforms involved several years of development and consultation. For example, Hampshire was involved as a Pathfinder local authority for two years at that time. He said that there is recognition that urgent change is needed due to pressures within the current system and that there is a political imperative to progress these reforms quickly.

Pip Williams commented that successful implementation would require effective integrated use of existing expertise across services, including therapists already working within the NHS, for example Speech and Language Therapy (SALT), and that greater clarity was needed regarding the role of the proposed "Experts at Hand" model.

Paul agreed, noting that workforce availability remains a key challenge and that many aspects of delivery will depend on future guidance and local implementation planning.

- Cllr Fran Carpenter asked how the 9.9 million in funding could best be used to support schools to meet the needs of neurodivergent children and young people.

Paul explained that an authority ultimately has limited influence, as it cannot control maintained schools, and will need close partnership with schools. He highlighted the potential benefits of cluster approaches, where schools develop specialist expertise and support one another, whilst ensuring schools that are already delivering good practice are not disadvantaged.

The members reflected on the importance of language and communication in building confidence in the reforms for those within the system. Many families had experienced prolonged challenges in accessing support, so confidence will need to be built through visible improvements in support and outcomes, rather than through policy changes alone.

	Although there is a risk of focussing on the negative features, there are many positive features in the proposed legislation.	
8.	AOB – Hampshire Neurodiversity Profiling Tool Pip Williams provided an update that a Hampshire-wide tool is close to sign-off following extensive collaboration with partners. A pilot programme involving schools and families is expected before wider rollout. <i>The Board welcomed the update and agreed that a further presentation would be beneficial once testing has been completed.</i>  Update Email June 2026.msg NHSE LDA June update - Connect to Support Hampshire June newsletter - CTSH Newsletter Gosport Leisure Centre is inviting SEN and neurodivergent individuals, families, carers and supporters to share their views on how its facilities, activities and customer experience can be made more inclusive and accessible. Complete the survey at by clicking here. Free Behaviour Change Training Free, evidence-based Behaviour Change Training is available to help staff build confidence in having everyday conversations that support residents' health and wellbeing, using practical techniques aligned with the NHS Behaviour Change Development Framework. Fully funded by Hampshire County Council, the programme includes a core training session with optional monthly practice sessions; for more information, contact info@smglearning.com or book via the Eventbrite page here. Neuro-inclusion Toolkit Everway UK – This guide brings organisation leaders insights on practical ways to support and empower neurodivergent employees. Words Matter June newsletter - Words Matter News June 2026	6. <i>Pip to provide a formal update on the ND Profiling Tool at next meeting</i>
	Next meeting: September 22nd (via Teams)	

Hampshire Autism Voice (HAV) Update Brief to Hampshire Autism Partnership Board (HAPB)

Tuesday 16 June 2026

The following update from HAV covers their activities since 17 March 2026.

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1 Autism Ambassadors

HAV is a partner in this scheme along with Hampshire County Council (HCC), Southampton City Council, Portsmouth City Council, Isle of Wight Council, Autism Hampshire, and NAS South Hampshire branch.

- One online training session has been delivered since the March HAPB meeting adding a further 15 people appointed as Ambassadors, bringing the total to 1401 since the scheme started. A further in-person training in September is being arranged.
- Membership renewal started at the beginning of April; 157 Ambassadors have renewed so far bringing in £1017 for the scheme.
- A networking meeting took place on 24th March 2026. 29 Ambassadors attended an afternoon in person and an evening online session.
- The annual conference will be held online on 24th September 2026. Two speakers have been arranged who will record videos about their topics for Ambassadors to view beforehand and send in questions. The speakers will answer questions during the online conference.

2 Royal College of Psychiatrists Neurodevelopmental Psychiatry Special Interest Group (NDPSIG) Conference

One of our members attended this national conference in January. There were several keynote presentations, including:

- "Past and future of neurodevelopment and psychiatry" by Dr Adrian James, National Medical Director for Mental Health and Neurodiversity at NHS England and
- "ADHD: Perceptions from the Ground" by Henry Shelford, CEO and Co-Founder, ADHD UK.

There are many key points and recommendations which HAV would like to share with Board Members, as these are likely to be significant during the next few years.

1. Culture

- a. Autism and ADHD should be assessed, treated, and managed with the same rigour as hypertension, diabetes mellitus, statins, smoking prevention, etc.
- b. All psychiatrists should be confident and able to diagnose uncomplicated ADHD and autism, and this should be included in commissioning of mental health services, even if not yet enforceable

- c. Recognising and diagnosing neurodivergence is not a niche task but a core responsibility of every psychiatrist. This is essential for delivering personalised, effective, and economically sustainable care.
- d. Government responses to recent reports are very disappointing

2. Autism and ADHD assessments

- a. Both autism and ADHD assessments should be undertaken promptly as the benefits are:
 - i. The individual patient has a better quality of life
 - ii. The public health benefits of fewer accidents and reduction of adverse incidents both for autistic and ADHD individuals and others
 - iii. Significant health economic benefits including increased financial savings, fewer lost opportunity costs (Autism estimate (LSE) £32 billion per annum and untreated ADHD is £17 billion per annum)
 - iv. ADHD treatment and autism management reduces health inequalities including premature mortality
- b. Assessments and measures of outcome should include social as well as purely clinical outcomes
- c. Commissioners must understand and implement effective policies based on the above findings relating to health inequalities and health economics studies
- d. Documentation of these assessments is time consuming. Quality assurance has an important role in assessing the quality of assessment reports. Such reports have a significant role during patients' subsequent progress, for example, if ADHD medication will be initiated and prescribed by another mental health practitioner. Artificial Intelligence (AI) Ambient Voice Technologies (AVM) can be timesaving and remarkably effective if interpreted and edited correctly.
- e. It should be unnecessary for subsequent services, such as CAMHS, to have to repeat an individual's assessment because the previous assessment was inadequate.

3. Right to Choose (RTC)

- a. RTC is a major issue for ADHD and autism
- b. Current government and ICB approach seems unworkable and would be difficult to defend if a legal challenge were to be raised such as a judicial review
- c. Not all money spent on ADHD and autism Right to Choose (RTC) is spent wisely
- d. If organised properly, then should not really be necessary to use RTC if local services are adequate, e.g. proposed Sussex GP Federation ("not for profit", "cost neutral")
- e. The Care Quality Commission (CQC) should oversee all Autism and ADHD assessment services, both NHS and non-NHS, including quality assurance of the assessment report process.

4. Epidemiology

- a. 2.5 million people have a neurodiverse condition which is similar to diabetes mellitus
- b. Data not particularly good in this area
- c. Screening should be considered or even mandatory for certain populations including people in the criminal justice system such as prisoners
- d. Use of outcome measurement is not good, except IAPT (Improving Access to Psychological Therapy) which has benefit of making a case to the Treasury, and more work is necessary in this area

5. Co-occurring substance use and mental health disorders (CoSUM)

- a. Includes people with autism and ADHD who are at increased risk
- b. Challenges apply locally in Hampshire as the HCC Public Health Department commissions and funds Alcohol and Substance Abuse Clinics, while the NHS commissions and funds Mental Health Services

c. Encourage integrated care

3 Neurodivergent and Wellbeing Multi-Disciplinary Team Update

We appreciate the value of this new programme and its rigorous development including partnership working between HCC, HIOW ICB, HPCN and many others.

HAV has discussed this programme in some depth. Our comments:

- It is positive that the voice and views of young people are considered important, including that 76% said that getting a diagnosis was important for them.
- During an individual's involvement with this service, the service will learn and record a huge amount of information and insights about that individual.
- This information or "intelligence" needs to be recorded in a structure or framework that can be shared with an autism or ADHD service. If there is sufficient appropriate information, it may be possible to make a diagnosis without having to go through the full autism or ADHD assessment process.
- It would be helpful to have each individual's informed consent to share their data via Care and Health Information Exchange (CHIE). If that individual attends another service such as CAMHS or an Out of Hours Mental Health Service, then such valuable information may help prevent repetition or improve the quality of triage processes
- One member, who has worked for CAMHS, has expressed concerns that there are several different record systems that are unable to communicate with each other including Southampton Hospitals, Hampshire Community Services (RiO), and general practice systems. Will this service be able to access these other systems, for example, via CHIE?
- Another member, who works as a school teacher, described how students would be absent from school to attend a CAMHS appointment, yet the school and selected teachers would not be informed of the outcome, even though this could be beneficial for the student
- Our impression is that this programme's uptake will be high, and we wonder if there is contingency in case the demand proves overwhelming at times.
- Support for families and schools needs to be timely if at possible
- Signposting, especially to support groups, will be important
- Will this help reduce the pressure on CAMHS?
- It would be helpful to clarify how this programme fits in or overlaps with the Portsmouth Neurodiversity (ND) Profiling Tool

In summary, this programme has huge potential, and we look forward to hearing how it progresses.

4 Autism and ADHD Single Point of Access (SPoA) Triage Hub (HIOW ICB)

HAV members are delighted that HAV and the ICB Autism leads both simultaneously proposed the similar idea of a central neurodivergent waiting list register (HAV) or autism and ADHD Single Point of Access (SPoA) Triage Hub (ICB).

A few further thoughts:

- Single Points of Access (SPoA) are used in many services. It is important to ensure that the processes are streamlined, transparent and effective.
- There is a risk that each organisation will lose the equivalent of one member of staff per week in order to attend SPoA meetings.
- How will relevant clinical oversight be incorporated?
- How will the information and "soft intelligence" be incorporated for individuals who have been involved with Hampshire's recently launched Neurodivergent and Wellbeing Multi-Disciplinary Team or the Portsmouth Neurodiversity (ND) Profiling Tool?
- As mentioned elsewhere, it would be helpful to have each individual's informed consent to share or access their data, for example, via Care and Health Information Exchange (CHIE). If that individual attends another service such as CAMHS or an Out of Hours Mental Health Service, then such valuable information may help prevent repetition or improve the quality of triage processes, and be utilised by the autism or ADHD assessment provider

5 Information and data sharing integration theme overview

The two new programmes, Neurodivergent and Wellbeing Multi-Disciplinary Team and Autism and ADHD Single Point of Access (SPoA) Triage Hub, both raise issues around information sharing.

Individuals may well be known to both these services and others including Community Paediatric Services, CAMHS, Children's and Adult social service departments and the schools or colleges which they attend.

The 7th Caldicott Principle states that the duty to share information for individual care is as important as the duty to protect patient confidentiality. Added in 2013, it ensures health and social care professionals feel confident sharing information in the best interests of patients, balancing security with necessary care. A frequent complaint is that patients attend a health or social service and do not understand why they yet again must repeat their entire medical and relevant social history.

Moving forwards, there will be the single HIOW ICB, several Foundation Trusts, the five new local authority areas and numerous educational establishments such as primary and secondary schools.

In this new era of "integration", these bodies should ideally "integrate" information about an individual in that individual's context. This contrasts with "integration" in a strategic or public health context.

Would this be a suitable time to update data sharing arrangements so that:

- Individuals know and consent to sharing of their information
- There is an updated agreed framework or structure for recording information about individuals with actual or potential neurodiverse issues
- Individuals agree what information can or should be shared across the system including the Care and Health Information Exchange (CHIE)
- Any Special Educational Needs and EHCPs are included and available

6 SEND Reform White Paper

Paul Richardson of HPCN joined HAV to explain the changes to SEND in the recent white paper and the consultation that followed.

Support in schools will be organised into layers.

- Targeted layer – Support at this level will be delivered in mainstream schools, in consultation with parents, and through new Individual Support Plans (ISPs), rather than Education, Health and Care Plans (EHCPs). There will be no accountability to enforce provision. Complaints procedures will go through a local panel, which may include the SENCO. The HPCN view is that there should be an independent consultant on the panel, not a SENCO. There is no new SEND Code of practice yet and there is a lot of detail that we don't know yet.
- Targeted Plus layer – when provision doesn't meet need, but the child won't be eligible for an EHCP. The child will be referred to the experts-at-hand team. Funding for this is £1.8bn, which HPCN have estimated will equate to 40-120 hours per school. Not clear yet whether this will be enough, although HPCN view is that this is better than no expert help. It is also not clear if this funding will be ring-fenced.
- Specialist layer – most complex children. There is no definition of "most complex" as yet.

Children who currently have EHCPs because their provision could not meet need will be scaled to Individual Support Plans (ISPs) if possible.

Digital online system is not created and we don't know what it will look like.

Nationalised teacher training will be rolled out with £200m of funding. This will require standardised SEND training across England.

Schools cannot continue to say that they can't meet need. If they are forced to have children in their school, it will take time for them to come on board.

Tribunals were going to be abolished, but instead they will be retained and have their powers stripped back.

Tribunal will not have the power to name a specific school any more, as they currently don't consider the availability of a place. Instead, they will instruct the LA to reconsider the list of schools shortlisted for the child's parents.

Tribunals will not be able to redirect the LA about the content of the ECHP. They will only be able to ask them to reconsider. The Government hope that if all goes to plan, there will not be so many tribunals needed.

If an LA is not performing satisfactorily over SEND, the DofE will strip it of SEND funding entirely. If the LAs' SEND proposals are approved, they will get 90% of their special needs overspend written off (HCC £400 million).

No legislation has been passed yet.

They are not consulting on whether or not these proposals are right, they are consulting on how to do it. All consultation responses will be read by Artificial Intelligence (AI). The consultation is now closed.

Top concern - schools will be legally required to provide Individual Support Plans (ISPs) to all pupils identified with SEND. However, if parents feel the plan is inadequate or the support in the plan is not being provided, the paper does not outline any legal route to challenge this. Instead, disputes must be resolved directly with the school through their complaints process.

Independent schools will be capped to £75,000 per individual per annum. Some independent schools charge £150-200,000 per annum. Alternative proposals suggest that profits should be capped, rather than the total annual cost.

HAV concerns:

- Legal rights are being eroded or diluted. There are still many question marks about this.
- This reform is putting high focus on provision in mainstream settings rather than specialist settings where children may thrive better. One HAV member's son will not even qualify for the first layer of support as he will not set foot inside a school.
- Will this increase the bureaucratic burden of teachers which is causing many to leave the profession
- SEND reform will not change the fact that individual children need individual provision.
- Setting up accommodations for children takes time and are not always implemented consistently. Forcing children to attend school while their needs are unmet causes trauma which can be long lasting.

7 Children's and families Information Advice and Guidance (IAG) service contract change

The ICB has changed the funding arrangements for this service.

The contract for children's IAG has been withdrawn from Autism Hampshire (AH) since 1st April 2026 and reallocated to HCC's newly established Neurodivergent and Wellbeing Multi-Disciplinary Team.

The HCC Neurodivergent and Wellbeing Multi-Disciplinary Team were unaware that Autism Hampshire's funding has been withdrawn.

AH still provide limited support to Children and their families via telephone and e-mail.

AH should have attended the March Southampton Parent Carer Forum SEND Family Fun Day but were not present. They said they couldn't attend because they can't offer the advice about children any more.

The ICB appears to have made no arrangements about the communication of these new arrangements to all interested parties, including those on waiting lists for autism and ADHD assessments.

There needs to be clarity on:

- How this relates with CAMHS?
- What service exists now?
- How is it publicised?
- How does it fit in with people on the waitlist for autism assessments?
- What quality assurance is in place?

8 Independent review into mental health conditions, ADHD and autism: interim report

The Department for Health and Social Care are concerned about increasing numbers of people with diagnoses of mental health (MH) conditions, ADHD and Autism. They set up a commission to investigate underlying reasons. They have published an interim report of the review (85 pages). HAV members have found it difficult to interpret what has been achieved in the report's executive summary. There is an emerging narrative about over-diagnosis concerns. We look forward to reading and reviewing the final report.

9 Local Government Reform

There was a discussion about the plans for the reorganisation from 15 local councils to 5 in Hampshire and the Isle of Wight. It is unknown what the implications will be for HAPB, HAV and Autism Ambassadors, and for issuing of EHCPs by the SEN EHC team. The reorganisation will take place in 2028, so there are two years to prepare.

10 Mental Health Charter

Michelle Broughton (Lead for children and neurodiversity at HIOW ICB) is keen to get the charter relaunched but has been delayed due to ICB reorganisation. When first launched there were two versions, one for service providers and one for service commissioners. Jason Norum, Michelle and Jason Brandon (former AHC Mental Health lead when the charter was first created) have met and agreed that only one version for both service providers and commissioners is necessary. They are now looking for suitable venue for the launch event.

11 Hampshire Carers Partnership (HCP) & Board

Three HAV members represent us on this Partnership, including its Partnership Board. Since the last HAPB meeting, the following was discussed:

- Continuing Health Care Plans and Personal Health Budgets. The operation of these programmes raises many queries. HIOW ICB has commissioned a private company, Liaison Group, to reassess patients' NHS Continuing Healthcare (CHC) funding. A recent Telegraph investigation stated that Liaison Group was earning a 33% commission on the savings it generated by removing or reducing patients' NHS Continuing Healthcare (CHC) funding. This understandably raises several concerns.
- There was a presentation about the Adult Social Care Framework (ASCOF) Carers Survey 2025/26.

11.1 Carers Partnership Learning Disability (LD) Complex Needs Working Group

- HCC information on LGR (Local Government Reorganisation). They are developing a Day Opportunities Service Framework.
- A representative from Argenti gave a talk about the equipment they offer.
- A parent advised us that several banks are closing trust funds and not opening new ones.
- It is hoped that a decision will be made at the next HLDP about merging the Carers LD and complex needs working groups due to a lot of duplication across the two groups and that all the carers were representing family members with complex needs.

12 Personalisation Expert Panel (PEP)

Our HAV representatives regularly attend the monthly PEP meetings. During recent meetings, the following topics were discussed:

Neighbourhood Health Framework programme

Jason Brandon, Principal Social Worker, and Jenny Bowers, Public Health Department, gave a presentation about the recently announced national Neighbourhood Health Framework programme:

- Care closer to home
- Better joined-up support - organize services around the person
- Earlier help and prevention
- Fairer health outcomes - reduce inequalities and help them stay at home
- Services shaped around real neighbourhoods

The setup of neighbourhood health will be different for each community. The success of neighbourhood health hinges on the NHS, local authorities and partners transforming how they work together. They need to work collaboratively to agree a joint vision and re-design commissioning and delivery of services at neighbourhood level, including through integrated neighbourhood teams (INTs).

HAV's comments are that issues relevant to HAV and HAPB include not just geographical considerations, but condition specific such as autism and ADHD. There is a distinct lack of data at local level relating to autistic people and those with ADHD. GP disease registers could be effective in understanding some of the challenges and inequalities that neurodiverse people experience at a neighbourhood level.

13 SEND Local Offer Discovery Days

HAV members attended three of these events. We appreciate the time and energy that Paul Richardson, Zoë, Pip Williams, and the many other representatives have committed to these events, which perform a valuable role.

There were stands from Independent Futures, BRAIN, School Nursing, HPCN, HAPB, Community Buddies and the newly established Neurodivergent and Wellbeing Multi-Disciplinary Team (MDT) among others. HPCN led workshops about the SEND reform white paper and consultation. A Post-16 Opportunities workshop took place although was not available at all venues. Overall we found the event to be very useful for finding out about support available. Working parents may have found it difficult to attend.

14 ASG (Autism Steering Group)

Alice Madden-Curtis has stepped down from her role as Chair as she is leaving HCC. We would like to thank Alice for her work with HCC, the HAPB and the ASG. We wish her well in her new post in Dorset.

Cecilia Agbaje replaces Alice as the new ASG Chair.

At recent meetings, the following topics were discussed:

- Leigh Drury gave a very interesting Early Years presentation, about a Transition Support Service pilot project in the Havant area for Yr R to Yr 1 transition.
KPI – 90% of children now transitioned. The pilot is working well. It uses a strength-based approach, including working with child minders with a link with Portage models. It has created a support network. There has been a lot of work around environments. They aim to delay initiating EHCP applications and to make all educational settings successful. Formal diagnosis is not needed. A support worker looks after 18 people for 6 months.
Benefits are:
 - o child centred
 - o empowers families
 - o Encourages access to other services.
- Michelle Broughton spoke about the recent ICB survey
 - o Support is fragmented.
 - o They want to pull in more young people as experts by experience, and they want to capture what the patient is telling them.
 - o They should be able to access support while waiting.
 - o They are cleansing the waiting list by removing duplicates.
- HAPB Co-production work

15 Local Groups feedback

HAV members continue to be involved or in touch with many autism support groups across the county. The latest information includes:

National Autistic Society South Hampshire Branch (www.shantsnas.org.uk)

Support group numbers have dropped off a little recently. There is an increase in adults and few parents of school age children. Youth Clubs had 25 children plus parents, so has picked up again after they were in danger of closing. The Lego club continues. Activities for branch members – relaxed Mayflower pantomime

tickets are all sold out. Seven Wet Wheels trips are planned, and Watercress Line train trip happened in May.

The AGM was in May when ACoRNS (Autism Community Research Network @ Southampton) from Southampton University attended as speakers.

New volunteer group leaders are required for three groups. If no new leaders are found, the groups may have to close:

- Southampton Social Groups
- Autism Support Group
- Lego Club and Family Youth Club

Autism Support Group in Totton

This group, run by Youth and Families Matter (YFM), a community project of Testwood Baptist Church, is being well attended.

Friends of In Touch (www.friendsofintouch.org.uk)

Continue to support children and young people in their weekly youth clubs, and a young adults' social group. This is the organisation's 20th year and currently has funding from the National Lottery for another 4 years.

SCARF (Supporting Children with Additional Needs, Relatives and Friends)

Based in the New Forest. Their AGM was in March. They now have 117 members. They are planning on getting speakers in for parents. Fundraising is going well. They have provided over 100 holiday activities in the past year. Feedback has been very good.

The Zone, Farnborough

Zone In sessions for children and their families, once per month and in the school holidays. Teen Zone once per month for Teenagers.

Supportive Parents of Asperger Children Everywhere (SPACE) (Havant)

Monthly group continues to meet at the Heron pub in Leigh Park.

June 2026

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – 1/6/26

Reporting person – Zoë Beasley

HAPB lead for organisation – Jason Norum

Organisation – AHC HCC

Key relevant service/personnel updates

- Direct HAPB personnel updates:
 - Alice Madden-Curtis has now left HCC – Ce Agbaje will be taking over chairing ASG going forward.
 - Jason Norum will be moving to CSD – date tbc but most likely start of September. It has not been decided who Autism Lead will be currently.
- [Hampshire County Council Announces Leader and Cabinet Team](#) - At the County Council's Annual General Meeting held 21 May 2026, Councillor Nick Adams-King was elected as Leader, continuing his role in heading up the Authority.
- The [Hampshire and the Solent Combined County Authority](#) (HSCCA) has been formally established following parliamentary approval of the statutory instrument, marking a major milestone in the creation of a new authority to lead strategic decision-making across the region
- LGR – judicial review has been put forward by lead of HCC – we await details of if and how this may impact LGR moving forward.
- DoLS change - [recent Supreme Court judgment relating to Deprivation of Liberty](#)
- Connect to Work – We have successfully procured [Shaw Trust](#) to deliver the dedicated Social Care pathway. This will sit alongside the Community Access, Domestic Abuse and Healthcare pathways, all of which may be accessed by autistic people.

Current autism strategy action plan updates

- **Supported internships:** [Supported internships: a step towards work for young people with SEND in Hampshire](#) : Hampshire County Council is highlighting supported internships as a practical way to help young people 16-24 years old with special educational needs and disabilities (SEND) move from education into paid employment – with the right support in place. To help create more opportunities for their current cohort, Hampshire Achieves is running a series of **reverse jobs fairs**, turning traditional recruitment on its head. Instead of employers hosting stands, interns who are nearing the end of their course take the lead – showcasing their skills, experiences and career interests in a relaxed setting.
- DSR – better awareness and understanding regarding out area placings etc. Key issues identified.
- SEND inspection oversight – better joint AHC/CSD working and recognition of need to improve shared understanding
- There is now a dedicated s117 Board with representatives from AHC, CSD, ICB and The Trust. We are currently considering a dedicated s117 commissioning Framework for people with complex needs to provide better outcomes to that cohort. This is alongside a continuous improvement programme in relation to other areas such as data, funding pathways, assessment and review of s117 needs.

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date –

Reporting person –

HAPB lead for organisation – Mark Kingswood

Organisation – CSD HCC

Key relevant service/personnel updates

- Emma Steele will be remaining at HCC to assist with the SEN reform but stepping away from the County Education Manage (CEM) SEN Access and Resources role.
- Laura Hamson has taken on this role from April 2026.
- **The roll-out of [Best Start Family Hubs](#) has begun** - The Department for Education's Best Start in Life programme aims to ensure every child in England can thrive by improving support for families from pregnancy through early childhood. It focuses on early education, joined up family services, and reducing inequalities so that more children are school ready by age five.
 - Hampshire's first Best Start Family Hub is now operational at Leigh Park Library with c.200 residents attending to find out about services. We are pleased to confirm that Best Start Family Hubs will be opening in Alton, Andover and Gosport, expanding access to joined-up support for families with babies and young children. .
- Free school meals eligibility will change from September 2026 to increase it's reach to those on Universal Credit, removing the maximum income threshold.

Current autism strategy action plan updates

- **Elective Home Education (EHE) Careers Project**
 - Over the Easter period (30 March–10 April 2026), HCC Careers Team delivered a targeted project to support Year 11 young people who are Electively Home Educated, providing impartial careers information, advice and guidance to support post 16 transitions - *Feedback highlighted that engagement was largely positive, while also reinforcing the importance of earlier intervention.*
- The Children's Wellbeing and Schools Bill became law on 29th April 2026 so is now an Act - It aims to raise educational standards, protect vulnerable children, and reduce financial costs for families.
- **SEND reform**
 - Hampshire County Council and the Local Area Partnership have sent a response to the consultation which closed on 18th May.
 - There is a vast amount of work still happening in this space at pace including a reform plan which will be submitted by 19th June.

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date –

Reporting person – Zoë Beasley

HAPB lead for organisation – Andrew Lund

Organisation – Children and Families, CSD, HCC

Key relevant service/personnel updates

- Kavitha Maxy has been appointed interim deputy director of CSD
- **Crisis support | Hampshire County Council** - The Crisis and Resilience Fund (CRF) has been launched by the Government and provides assistance for low-income households who are experiencing a financial shock, or at risk of falling into crisis. From April to June 2026, Hampshire County Council, will work in partnership with Citizens Advice to deliver the scheme and enable individuals, if eligible, to be able to access support. A longer-term scheme is being developed and will be launched over the Summer 2026.
- **New role- Voice Empowerment Worker has been created** The Voice Empowerment Worker leads on ensuring that the views, wishes and experiences of children in care and care leavers are placed at the centre of everything we do. Nick Glover has begun working for the council and is keen to ensure young people's voices are at the centre of both operational and strategic levels.
- **Include any examples of current joint working:**
 - For co-production week AHD and CSD will be holding a joint lunch and learn which will help staff understand why co-production is important, how to do it well and ensure accessibility and communication needs are thought about from the outset.

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – 2/6/26

Reporting person – Michelle Broughton and Diana Taphouse

HAPB lead for organisation – Michelle Broughton and Diana Taphouse

Organisation – HIOW ICB

Current autism strategy action plan updates

Right to Choice and system impact:

We remain committed to improving access to neurodevelopmental services while ensuring people receive meaningful support during long waits for assessment. As part of this, new needs-led services are being introduced for both children and adults, providing earlier practical support without requiring a formal diagnosis.

Demand through the Right to Choose pathway has increased significantly, with spend rising by 446% over the past three years, placing substantial pressure on system capacity and finances. As commissioners, we are required to ensure equitable access and prioritisation across all pathways, including RTC, NHS, and independent providers.

Funding for 2026/27 will sustain medication and reviews for those with existing ADHD diagnoses and enable additional patients to begin treatment; however, only a limited number of new referrals can be assessed due to current capacity constraints. Prioritisation is being applied based on clinical need across all pathways, including Right to Choose, where demand and spend have risen significantly.

Addressing the impact of increasing RTC demand is a key focus for the Board, alongside wider work to improve pathway consistency, manage demand, and move towards a more sustainable and equitable model of care. Further information is available via the Hampshire and Isle of Wight ICB website:

<https://www.hantsiow.icb.nhs.uk/your-health/mental-health-services/autism-and-adhd-assessment-services>

Current autism strategy action plan updates

Development of the Autism and ADHD Single Point of Access (SPoA) and Triage Hub:

Work is progressing to establish an all-age Autism and ADHD Single Point of Access (SPoA) across Hampshire and the Isle of Wight, providing a single, consistent and equitable entry point into services. A clinically led triage function will ensure individuals are directed to the most appropriate support based on need, including access to advice, guidance and community-based support while waiting for a full assessment, alongside referral to diagnostic pathways where appropriate.

The service specification has now been completed, and the programme is moving into procurement to secure delivery of a coordinated, responsive and neuro-affirming model. This approach will strengthen equity of access, improve clinical oversight, and enhance communication and transparency across the pathway for individuals, families and professionals.

Current autism strategy action plan updates

Hampshire & Isle of Wight Autism and ADHD IAG Service and Community Hubs:

As from April 2026, the new Adult Autism and ADHD Information, Advice and Guidance (IAG) Service and Community Hubs are in mobilisation across Hampshire and the Isle of Wight. The service is delivered through a partnership led by Autism Hampshire, in collaboration with local Mind organisations, with AIM delivering the community hub model on the Isle of Wight.

The service will provide accessible, neuro-affirming information, advice and guidance, alongside peer-led, community-based support. It is available to all neurodivergent adults, including those with a diagnosis, those who self-identify, and those awaiting assessment. This strengthens the consistency and reach of support across the system, with a focus on earlier, needs-led intervention and reducing reliance on diagnosis as the primary route to accessing help.

Further information on the service and its development is available here:

<https://www.autismhampshire.org.uk/news-events/autism-hampshire-awarded-hampshire-and-isle-of-wight-autism-and-adhd-support-contract>

Current autism strategy action plan updates

What to expect:

Through this partnership model, a network of Autism and ADHD Community Hubs will be established for adults (18+) across Hampshire and the Isle of Wight, including provision on the Isle of Wight delivered by AIM. This will be complemented by a Hampshire and Isle of Wight-wide digital and telephone Information, Advice and Guidance (IAG) service, ensuring consistent access to support across the system.

The model is designed to provide timely, identity-affirming and neuro-affirming support, accessible to individuals regardless of diagnostic status. It brings together local expertise, community-based provision and peer support, ensuring services are informed by, and responsive to, the experiences of neurodivergent people.

Further detail on service delivery, peer support development and ongoing co-production will be shared as mobilisation progresses.

Current autism strategy action plan updates

Co-Production of an All-Age Autism and ADHD (Neurodevelopmental) Pathway: Assessment, Diagnosis and Support:

Co-production remains central to the development of the all-age Autism and ADHD pathway. We have recently worked in partnership with Portsmouth Seekers, alongside professionals and people with lived experience, to inform improvements to the assessment and diagnostic pathway within the wider neurodevelopmental offer. The session provided a neuro-affirming space to explore how current processes are experienced, identify strengths, and consider opportunities to improve support throughout the assessment journey.

This was a valuable and constructive session, generating meaningful insights and clear priorities for future development. We recognise the importance of continuing to capture a broad range of perspectives, and further engagement is ongoing to ensure this work reflects diverse lived experience. This remains an active programme of development, grounded in collaboration and co-production, with a summary of key themes and insights to be shared to support transparency and ongoing system improvement.

Current obstacles in meeting actions

Programme Capacity Update Following ICB Organisational Restructure:

Following the recent ICB organisational restructure, some workforce changes are expected over the coming months. Capacity across parts of the work will continue to be kept under review to ensure priorities are appropriately managed.

Delivery of core responsibilities will continue, with key actions, day-to-day priorities, and governance requirements progressing as planned. Work will be carefully prioritised to support continuity and maintain progress across the programme.

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – June 2026

Reporting person – Katy Curtis

HAPB lead for organisation –

Organisation – LDAP (Learning Disability and Autism Programme)

Key relevant service/personnel updates- LDAP

Admission Avoidance (across Hampshire, IOW, Southampton & Portsmouth):

- 19 LAEPs (Local Area Emergency Protocol) held in May, preventing 16 admissions.
- 4 Community CTRs (Care and Treatment Reviews) in May, resulting in 0 admissions.

Number of adults + CYP at risk of admission and known to the ICB last month: **167**

Only **1** of which were admitted last month!

= DSR JOINT WORKING WAS **99.4%** EFFECTIVE

Current HAMPSHIRE inpatient numbers (LD/ASC) as of 12/06:

Adults: **26 + 13** in secure = **39** total

CYP: **3** in T4 (*ward which deals with severe, specialised psychiatric inpatient care*) and **1** detained in general hospital for physical health treatment = **4** total

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – 10/6/26

HAPB lead for organisation – Catherine Robson

Organisation – CAMHS

Key relevant service/personnel updates

- The Owl Centre has been commissioned (since April 2024) to deliver autism assessments across Hampshire (excluding specific complex cases)
- Transition underway:
 - Taking over legacy waiting lists from Psicon and now Hampshire CAMHS
 - 144 cases transferred; 118 currently in process
- The move aims to create a single, equitable assessment pathway across Hampshire
- **Service developments**
 - Integration under HIOW NHS Trust now complete
 - Joint working with Southampton and Portsmouth ND teams
 - Leadership oversight: Head of Clinical Services (Tania Emery) is coordinating these developments
- **Include any examples of current joint working:**
 - Continued delivery of autism training and engagement, including parent/carer events, professional training, and awareness days which has had various partners join to provide support and guidance.

Current autism strategy action plan updates

- **Waiting list transformation:**
 - CAMHS autism assessment backlog being merged into Owl Centre system
 - Prioritisation based on original referral date to ensure fairness
 - Improving consistency of access and experience across services
- **Partnership working:**
 - Strengthened collaboration across neurodevelopmental services (Hampshire, Southampton, Portsmouth)
 - Alignment with ICB-led system redesign discussions
- **Community engagement** with regular autism-focused events (e.g., “Embracing Autism”, ND awareness days)

Current obstacles in meeting actions

- No additional funding provided for transfer of CAMHS waiting list → added pressure on existing resources
- Historic backlog: Over 400 CAMHS cases created significant delays and inequity
- LDA team capacity constraints:
 - Not fully funded → reduced multidisciplinary offer
 - Tight eligibility criteria impacting access
- System complexity:
 - Need for coordination across multiple providers and pathways
 - Ongoing reliance on commissioning decisions from ICB

- **How are these challenges being addressed/taken forward:**

Waiting list inequity being addressed through transfer and merging into The Owl Centre using original referral dates

System fragmentation being addressed through integration across Hampshire, Southampton, and Portsmouth ND services

Workforce knowledge gaps being addressed via ongoing autism training and parent/carer programmes

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – 9/6/26

Reporting person –

HAPB lead for organisation – Jeanette Mansbridge

Organisation - DWP

Current autism strategy action plan updates

- New initiatives in various Jobcentres when working with partners and customers: These job centres include:
 - Eastleigh looking to set up Arts project similar to that running in Southampton.
 - Gosport working with local college to deliver an Autism specific employability course
 - Havant working with another local college to build on Gosport's achievements
 - Portsmouth delivering workshops to colleagues to better equip them in meeting customer needs.

- **What outcomes have been observed so far:**

Both ventures with local colleges in Gosport and Havant have positive engagement and customer feedback recognising the person centre approach

Hampshire **Autism** Partnership Board

PARTNER UPDATES

Reporting date – 9/6/26

Reporting person – Katie Board

HAPB lead for organisation – Cheryl Claxton

Organisation – Autism Hampshire

Key relevant service/personnel updates

- Andrea Wiggins has joined us as Chief Growth and Service Development Officer.
- Cheryl Claxton is now Head of Service Development across the Avenues Trust Group.
- Katie Board continues to manage the IAG and External Training Team as well as Serendipity and the Community Hubs Project.
- Kathryn Evans has been appointed as Community Services Assistant Service Manager.
- Sam Booth and Sarah Rees have joined Autism Hampshire as Neurodivergent Wellbeing Advisors in the Southampton and Andover Hub.

Current autism strategy action plan updates

- Hubs and IAG (Information and Guidance) service across Hampshire and the IOW went live on the 1st April.
- Launch Events have taken place in Havant, Southampton and Andover.
- Isle of Wight date still to be announced.
- The new service supports adults with ADHD as well as autistic people.
- Co-production sessions will be used to support the IAG and Hubs service.