SUPPORTING PEOPLE WITH AUTISM TO LIVE THEIR LIVES

Criminal Justice:
Risk of vulnerability and drug abuse

Background before support

im and his family lived in a small rural village. He never fitted in at primary school; he preferred to spend lunch break in the library and not with the other kids. As a teenager, he began to socialise with an older year group, started smoking and then using cannabis. His parents discovered he was stealing cash from them and challenged him. He said he had made new friends and they were always asking him to help pay for their cannabis supply. Whilst Jim had never had friends before, his parents were shocked by his behaviour and expressed their concerns about his new friends. This made Jim upset and angry resulting in him leaving his house to find his mates! His parents felt at a loss about what to do and couldn't find any support in the local market town, so just persevered, having regular arguments with Jim and hoping he would grow out of it.

After leaving school at 16 Jim didn't want to go to college and wanted money. He managed to get a couple of jobs at local supermarkets arranged by his parents but they lasted no longer than a few weeks. Jim drifted back to his friends and his relationship with his parents continued to break down as he felt frustrated at not being able to get out and about, living in a small village with limited transport.

One evening, his parents were called to a local police station where he was held in custody following a breakin to an elderly villager's home. Jim was alleged to have been involved as the 'look out' whilst his mates broke in. He was let off as he had no previous offences, however he continued to steal from his family home and his parents excluded him, resulting in Jim staying with the group leader and his dad.

Around his 18th birthday and after a series of arrests, he was charged with aggravated burglary and assault. The Court remanded Jim to prison, followed by a community probation order. During the court process, he was seen by a Mental Health Liaison Nurse team who expressed some concern about his potential 'vulnerability' but because he didn't have mental health issues or a learning disability he didn't fall within her remit. However she made arrangements for an outreach worker for a charity that works with local prisons on substance abuse issues to make contact as she was aware of his staying at a suspected local "dealer's house."

The skills, competences and knowledge to make a positive change

Police

Living in a small community meant that the local police got to know Jim quite well. The regional police department was aware of the need to know about mental health and had started to learn more about autism but not in a lot of detail. One of the constables had undergone a basic awareness session as part of his induction and upon meeting Jim felt something wasn't quite right and wondered if he may have such problems. He recognised that Jim appeared vulnerable to being exploited, was concerned who he lived with and recognised that Jim was not socially-aware enough to recognise when he was being take advantage of.

The officer also found it very difficult to engage with Jim. He tried to give him ideas about providing reassurances that he would go back to his parents and move out of where he was staying but he didn't recognise this. He also recognised that Jim became distressed when handled and remembered in such situations he needed to explain what he was doing and if possible limit the use of touch. On taking him to the custody suite he advised the desk sergeant of his concerns and asked if there could be someone that could see him and provide some support.

Custody Desk Sergeant

On booking him in, the Custody Desk Sergeant asked Jim if he had any concerns, if Jim had any questions and finally if he needed anyone to support him in the interview such as his mother, father or social worker (an Appropriate Adult). Jim said no in each case. It was clear from the records on Jim's file however that his

mother had frequently acted as Appropriate Adult to Jim in the past. Although Jim had declined, the Sergeant again asked if he could call his parents to support him in the interview as was his right, explaining his concerns that Jim may be vulnerable. Jim said they had thrown him out and didn't want to ever see him again so they would not come but agreed to them being called. The Sergeant called the parents who attended the station as soon as they heard.

The Sergeant also advised Jim that he would arrange for the on-call solicitor to attend. He asked if he had any mental health problems, a learning disability or autism and Jim said: "No, I don't think so." Although these questions were all answered in the negative, stopping the Sergeant from officially "flagging" the file, he did include in his report the suspicions of the arresting officer that Jim might have autism and may be vulnerable to exploitation by others. In order to check these concerns, the Sergeant referred the case for assessment by the Mental Health Liaison Nurse on duty at the station.

Prison Liaison Mental Health Nurse

The nurse advised the Desk Sergeant that in her opinion Jim had no immediate mental health concerns but that an in-depth assessment for Autism Spectrum Disorder would appear appropriate. She also suggested that Jim should only be interviewed with the support of an Appropriate Adult. The Sergeant updated his report accordingly and this information was shared with the solicitor on call.

Solicitor or Barrister

Jims solicitor suggested to the court that Jim receives support for his drug use and have an assessment of his needs. The barrister recommended instructing the psychiatrist to examine Jim and consider the possibility of autism and/or attention deficit hyperactivity disorder, as he appeared to be vulnerable to the suggestions of others and his offending pattern could be linked. The judge agreed and a referral to an in-reach substance support charity to see a drugs worker was made in addition for a request for an assessment of his autism. Jim was remanded to prison pending the reports.

Prison Officer

A prison officer who had attended a half day training on Autism and adult ADHD noticed that Jim liked to be on his own particularly during the exercise period. She had read the information on Jim and spoke to the prison doctor to share her concerns that Jim could be vulnerable in prison. The prison doctor agreed and Jim was placed in a different part and observed. The prison doctor made the links with the substance in reach worker and followed up on the assessment of autism.

Substance Worker

Once in custody the worker saw Jim and advised him of the substance support he could offer whilst in the custody. The worker was surprised that Jim had given up using cannabis and smoking so easily - he had some awareness of autism and so began to observe how Jim interacted with the group. It was becoming clear that Jim was struggling to retain his concentration in group sessions appearing disinterested and disruptive, whilst on a one-to-one he was engaged and proactively took on board any suggestions he made. The worker asked if he could share his observations with the person undertaking his assessment and Jim agreed.

Specialist assessment and advice to the courts

A history was obtained from Jim's parents which fitted more closely with an autistic pattern of early childhood development. On undertaking the assessment of Jim, the psychiatrist spoke to others involved with Jim and confirmed the diagnosis of autism and raised the possibility of co-existing unrecognised ADHD, advising the court that due to his social passivity he had been vulnerable to exploitation of others. Also, a prolonged stay in custody could contribute to his vulnerability to other forms of abuse and recommending a community option.

Magistrate or Judge

The judge and magistrates have received targeted training on vulnerable groups that included autism. She had recently had more experience of this in court with many people with autism and a learning disability amongst the alleged offenders brought before her. Having reviewed the psychiatrist's report, the judge requested that a community order be put into place led by probation with the support from local services including an assessment by social services under the Care Act in order to determine his current needs.

Probation Officer

The probation officer spoke with Jim about the next steps leaving prison. Jim said he got on well with the drugs worker and wanted to see him, wanted to stay away from the group and the leader's father.

The probation officer explained that he felt Jim was very vulnerable to being be led back into crime if he went to a hostel, Jim agreed to speak to his parents.

The probation officer spoke to them and explained his concerns about Jim living in the hostel. They wanted to help and welcomed him back home, with the knowledge of Jim's autism and worked with him to identify things he enjoys to occupy his time.

A plan was developed that included substance outreach that arranged regular contact for Jim to prevent him returning to drugs and finding alternative routes to making friends.

Local Health and Social Care Services

An assessment of need was undertaken by local social care services. They identified that Jim did not have significant direct care needs. He didn't really know what needs meant so the social worker who had been trained in autism and the undertaking of assessments explained and between them identified that his biggest need and risk to his well-being was being isolated.

The social worker arranged for Jim make links to his local community and groups to develop local friendship groups through shared interests including exploring further studies and employment.

In addition, a community nurse from a local integrated health and social care team that are trained in autism started to work with Jim and his family following his recent diagnosis about what autism means to him and get the right support for his health needs in the future. Working with Jim and the social worker they also explored any support or advise the family may need to support Jim. On the advice of the psychiatrist who saw Jim in custody a referral for an assessment of possible ADHD was followed through, which included ensuring that Jim did not forget to attend his appointments due to inattentiveness.

Outcome achieved for Jim

Jim was noticed, received an assessment of his autism and support throughout the custody and transition back into the community.

Supporting outcomes

- People that came into contact with Jim noticed he had some needs or vulnerability.
- The professionals passed on their thoughts and information, so it didn't get lost.
- The professionals worked in partnership and kept Jim at the centre, spoke honestly with him and took the time to explain things, including involving his family where appropriate.
- Jim received some constancy during his transition through the substance worker and had a plan in place for when he was released.
- Jim had targeted support that helped Jim meet the outcomes and needs that had been identified but not too much that he felt overwhelmed and wanted to disengage.
- The focus by everyone involved was on enabling Jim to have a positive and independent life considerate of his autism.