

Neurodiversity and the Criminal Justice System: Focus on Autism

Feedback Report

June 2025



1 Background

Shropshire Council launched a survey on 3rd March 2025 to gather the views of local representatives from organisations within the local Criminal Justice System. The survey was designed to learn more about how Neurodiversity is addressed within the Criminal Justice System, with a focus on Autism.

The survey was aimed at contributors to the autism strategy sub-group representing all areas across the Criminal Justice System in Shropshire. This includes West Mercia Police, Criminal Courts, Probation, Youth Justice and HMP Stoke Heath. The aim was to clearly establish the current methods for recording autism, review existing data and consider training opportunities for staff members and individuals being supported through the system.

The survey results provide an overview of current practice and reflect the knowledge of the sub-group members. The survey was left open online until each organisation had had the opportunity to feedback and present their summary of how those with Neurodiversity, in particular Autism, are supported through the different services within Criminal Justice System and how organisations assess and record skills and health needs. There were 6 responses in total.

This report anonymizes the responses where possible. The purpose of the survey was not to compare practice between organisations but to generate a more collaborative approach including sharing of good practice.

The findings from this survey will inform future service provision and help Shropshire Council and its partner organisations develop clear priority areas and goals for the local all-age autism strategy. This collaborative effort involves working closely with stakeholders to ensure that the approach taken is both inclusive and effective.

ND is used as the acronym/shorthand for neurodiversity within the report.

This report describes the survey findings within 5 main sections:

- **Section 1: Background** (this section) provides an overview of the survey and how it was promoted.
- **Section 2: Data** presents the numbers of people with ND supported through the Criminal Justice System in Shropshire and how this is recorded, and data captured.
- **Section 3: Training and Resources** explores how organisations support their staff to access training on ND and other resources available within the system to ensure the needs of people within the Criminal Justice System are understood and met.
- **Section 4: Health** considers the different stages of support from diagnosis to assessment and access to services/ referral. This section also considers the additional support put in place when ND is identified.
- **Section 5: Summary and Conclusion** provides a brief summary and conclusion based on the overall analysis of the feedback received.

2 Data

The survey, designed to explore ND within the Criminal Justice System, covered three main themes. The first theme was data. This topic covered how Autism, ADHD and other conditions are recorded within systems; the requirements for recording; and how many people are recorded within systems to better understand numbers supported.

Figure 1 below shows a breakdown to show which forms of ND are recorded by organisations within the Criminal Justice System. One of the 6 organisations records all these forms of ND within their systems. One organisation did not complete the question. Of the remaining 4, 2 do not record this information, one records neurodiversity generally (without a breakdown of type) and one partly records this information (5 of the 10 featured).

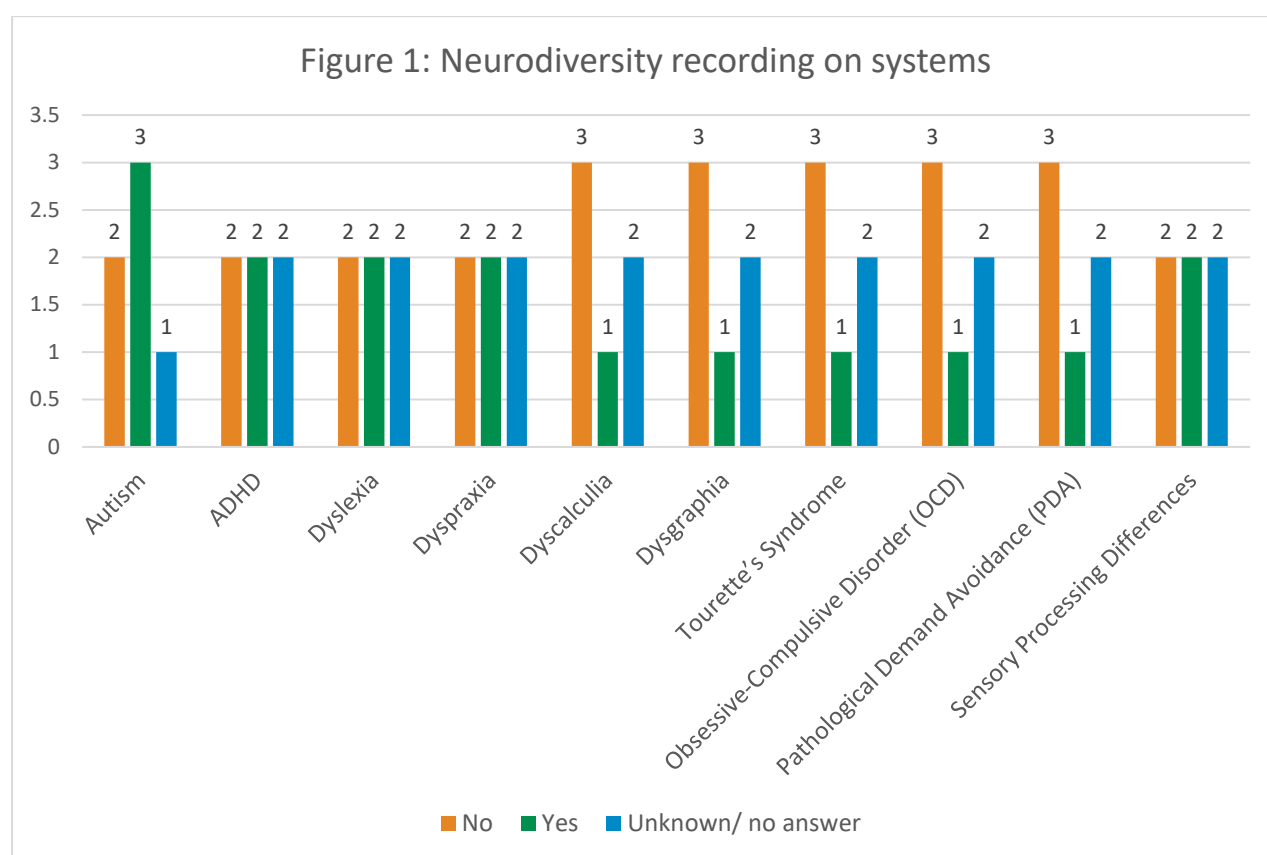
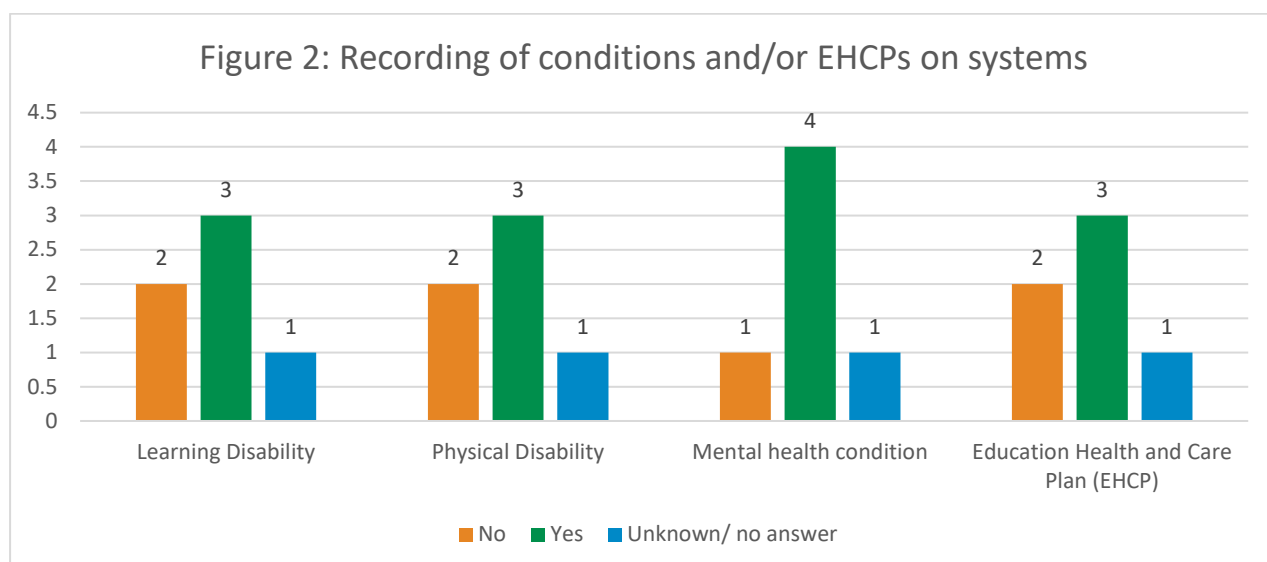


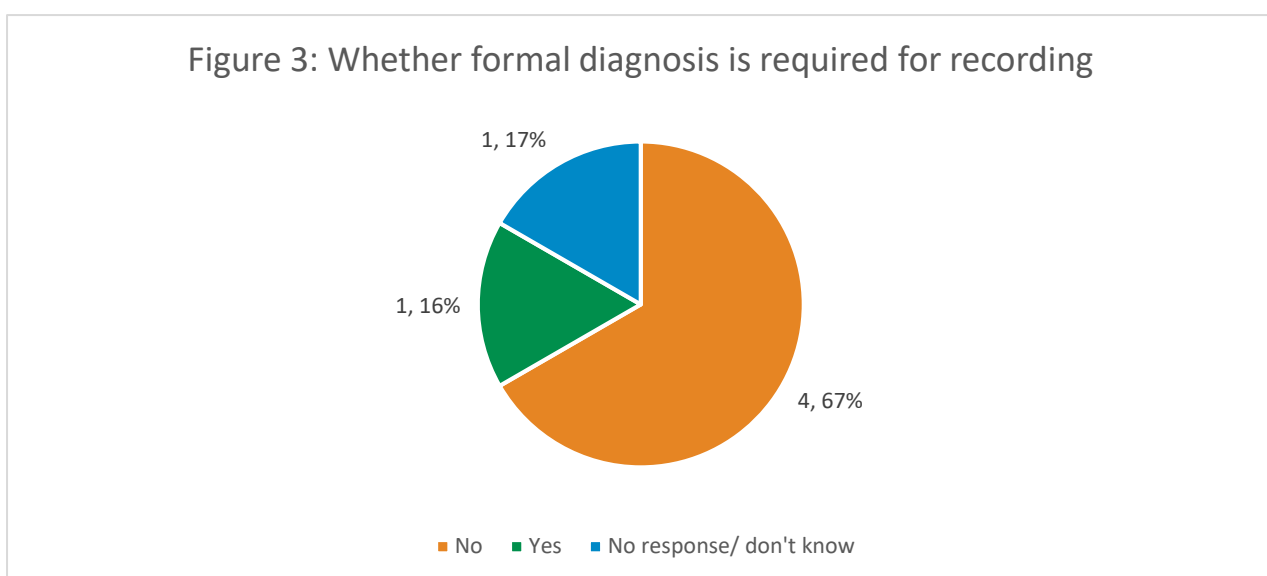
Figure 2 displays the results to a question designed to understand more about the recording of conditions and Education Health and Care Plans (EHCPs). The chart shows that 4 of the 6 organisations record mental health conditions (one does not and one didn't know/ didn't answer), 3 record Learning Disability, Physical Disability and EHCPs the remaining 2 do not and one of the survey respondents did not know which information was recorded.



The next question asked for comments to explain current processes for recording neurodiversity. 5 responses were provided. The responses highlighted the following methods:

- System recording: examples included EMIS (Electronic Medical Information System), Common Platform and Childview.
- Alerts.
- Court register recording (neurodiversity related needs recorded as a special measure).
- Use of Care Plans to record support needs and conditions.
- Notes within personal details record, equality information records or other notes taken by case managers.

The next question sought to determine whether formal diagnosis is required to record Autism. Figure 3 displays the results. 4 of the 6 organisations do not require formal diagnosis, 1 does and one respondent didn't answer/didn't know.



The survey included a question to find out how many people with ND and/or Autism

specifically, are currently supported by the organisations within the sub-group (Criminal Justice System). **None of the respondents were able to access that data easily to allow the information to be included within their survey response.**

A supplementary question was included which read 'Do you have data since 2020 showing the numbers of autistic people supported?' and 'If yes, where is this data recorded/reported? Please describe.' The results show that one of the organisations working within the sub-group has this data and can access it through the system, Childview (the Youth Justice Management Information System).

Overall, the questions on the theme of data have highlighted varied approaches to recording neurodiversity; only one recorded all forms of neurodiversity, some recorded general neurodiversity without specifics, and others did not record such data. Most recorded mental health conditions, but fewer recorded learning disabilities or Education Health and Care Plans (EHCPs). Formal autism diagnosis was not always required for recording.

Common methods for recording this information is use of systems like EMIS (Electronic Medical Information System) and Childview, alerts, court registers noting special measures, care plans, and notes within personal or equality records managed by case managers. The feedback highlights data availability challenges. Most organisations could not easily provide data on the number of neurodiverse or autistic individuals supported, with only one organisation able to access such data through the Childview system since 2020.

The results suggest inconsistent data recording methods contributes to a lack of clarity on the prevalence of autism across the criminal justice system as a whole and the impact this has on individual support needs and operational changes needed to deliver the support needed.

The next section of the report looks more closely at the next theme covered within the survey: training and resources.



3 Training and Resources

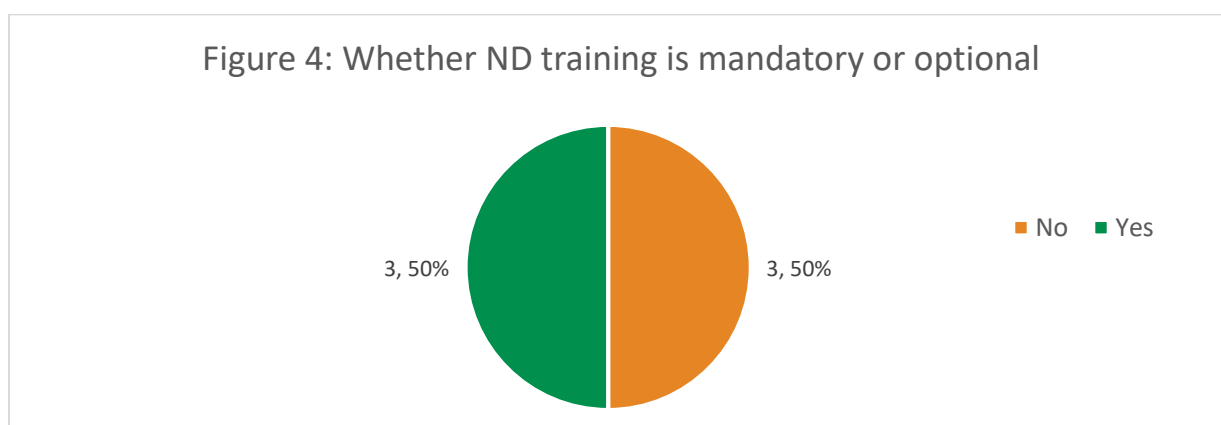
The second main theme covered within the survey was designed to better understand how staff members within the local criminal justice system are trained and supported to deliver support for Neurodiversity, with a focus on Autism. Questions covered training, access to resources, support for people within the Criminal Justice system and organisational strategy.

The first question within this section read 'Please describe the current Autism or ADHD training available to staff.' The 6 respondents listed the following training opportunities available:

- Oliver McGowan Training on Learning Disabilities and Autism
- Neurodiversity Awareness Training
- In house training provided by Midlands Partnership University NHS Foundation Trust (MPFT)
- ADOS (Autism Diagnostic Observation Schedule) and ADI-R (Autism Diagnostic Interview – Revised) training for assessment clinicians
- Judicial College Training for Magistrates and HMCTS staff
- Police awareness sessions for Tutors, Sergeant and Inspectors
- CPD information for call handlers with input from Custody Sergeants (Police).

The answers suggest that there is a robust training offer locally but different organisations provide different types of training depending on type and role. To explore this further the organisations were asked about which roles within the organisation receive training. The roles listed were all staff, managers, volunteers and particular staff depending on role. The response demonstrated that 5 of the organisations ensure all staff receive training. One organisation didn't comment. It doesn't appear that this type of training is extended to volunteers, if they are used. It is positive to see that the partner organisations seek to make training available to all staff rather than limit opportunities to managers or certain roles.

The survey included a question to determine whether ND training is mandatory or optional. As Figure 4 shows, the response to this question was split in half with 3 organisations providing mandatory training and 3 optional training.



Each of the survey respondents was asked to rate the quality of the ND training available within their organisation. Figure 5 displays the response.

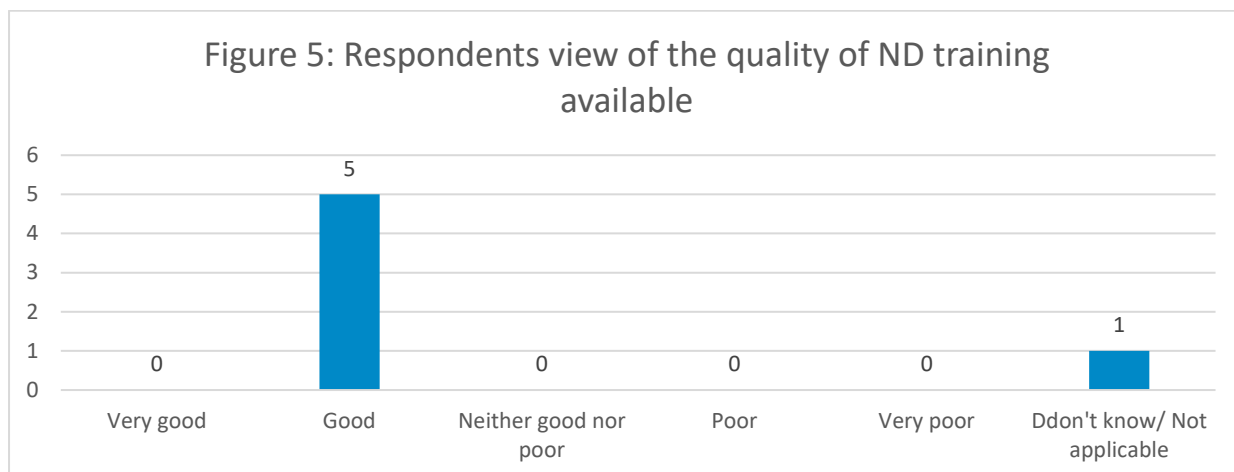


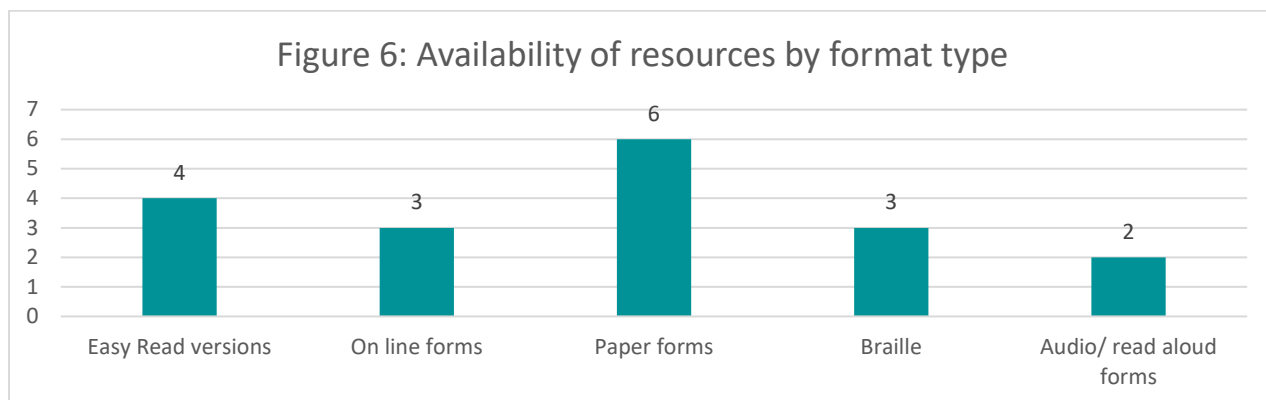
Figure 5 shows that the ND training available within the Criminal Justice System locally is considered to be good. One respondent didn't express an opinion but added a comment to suggest they had not received training within their service. The comments related to the training included:

- *"It could be more in-depth but abstractions from the front line do not allow longer sessions."*
- *"It delivers a thorough understanding of neurodiversity."*
- *"The training is a general awareness training. an introduction, identifying neurodiverse conditions, individual strengths, adjustments and strategies for practioners."*
- *"The training is online which does not suit all staff members.... i.e. those who prefer face to face training. The online training is otherwise is detailed and well explained."*

The survey respondents were then asked more about the resources made available to staff members within their organisations to support those individuals with ND/ Autism. The response to the questions shows a wide range of resources are made available:

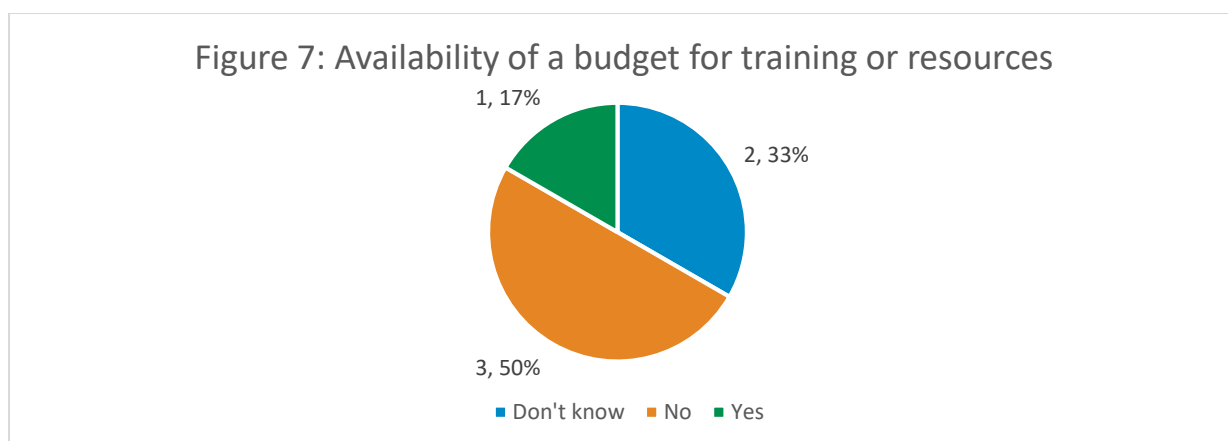
- *"Fidget toys in custody suites."*
- *"Intermediary services available for defendants and witnesses subject to an application being made."*
- *"Mixed, there is a database of intervention. Visual cues/timetables, transition tactics and some sensory diet practices encouraged. Staff follow EHCP guidance if applicable."*
- *"Self-help booklets, easy read, reading on prescription."*
- *"We have commissioned a partnership organisation to assist and support practitioners in managing autistic people."*
- *"We link closely to the Autism Hubs in Shropshire and Telford. We provide reasonable adjustments around location, time, staff."*

A further question was included to determine the format of any resources available. Figure 6 displays the range of options made available. All 6 organisations offer paper forms, 4 provide Easy Read versions of documents. 3 offer Braille and online forms and 2 offer audio/read aloud forms.



A question was included within the survey to determine whether the sub-group partners within the Criminal Justice System would be interested in working together to produce training videos designed to better support autistic people. 3 of the organisations expressed an interest, 2 were not sure//didn't know. One declined the offer.

To further identify opportunities to develop new resources or training in partnership, the 6 organisations were asked whether they have a training or resources budget available. Figure 7 displays the response. The response suggests that availability of funding is currently very limited (with only one of the organisations having any available budget) and this could prove an obstacle to the work of the sub-group in finding the budget to deliver new training or resources for mutual benefit.



The last question within the section on training and resources sought to find out whether organisations working within the Criminal Justice System locally have autism strategies in place. The question read 'Does your organisation have an autism strategy?'. The responses are shown within Figure 8.

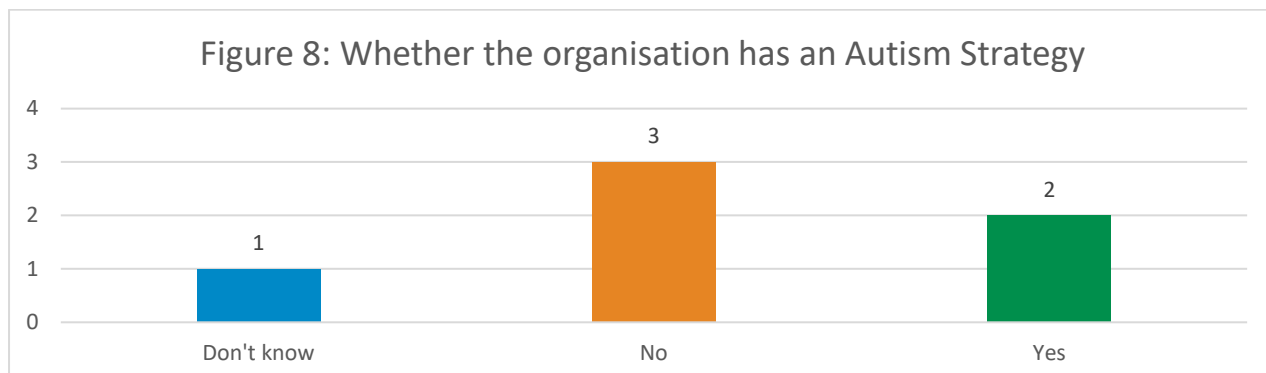


Figure 8 shows that 2 of the organisations have an Autism Strategy in place, 3 do not and one representative wasn't sure. Further work will be taking place through the sub-group and partnership working to understand this further and work together where possible.

This theme within the survey has highlighted that there is good provision of general awareness training in ND and some more specialist training available. This training can help provide an introduction to identifying neurodiverse conditions, individual strengths, adjustments, and strategies for practitioners. Where training is available it is usually available to all members of staff but this is only mandatory within some organisations. In addition to training for staff, organisations also provide resources to meet a range of needs. These range from fidget toys available in custody suites to help manage sensory needs to leaflets/booklets and the provision of forms within a range of formats. The responses also highlight the importance of drawing on local experts and sources of support including the Autism Hubs in Shropshire and Telford.

The section highlights the varied approaches to training and resources, emphasizing the importance of tailored support to meet the needs of neurodiverse individuals within the Criminal Justice System. Within the feedback there was no mention or consideration of the individuals understanding of their autism, why it impacts their behaviours and the consequences that this can cause. It may be necessary to develop wider understanding of the fact that if autism is not understood and has not been picked up during early and school years (meaning access to assessment or support hasn't been available) this can culminate, in some cases, people being more at risk to vulnerabilities such as poor mental health & well-being and/or involvement within the criminal justice system, and a cycle of re-offending. Some offenders will not know what "reasonable adjustments" are and therefore won't understand which reasonable adjustments they need.

The next section turns to explore health needs and processes.



4 Health

The third and final theme included within the survey was on the topic of health. This section covered signposting to support services, provision of reasonable adjustments, access to advocacy and support, Mental Capacity Act (MCA) assessment and access to formal Autism/ADHD assessments. Understanding how support and referrals work within the Criminal Justice System will assist the sub-group in its work and contribute to the evidence base that will form the Shropshire Autism Strategy.

The first question within this section read 'Do you signpost to other services for Autism or ADHD support? If yes, please list the organisations used.' 5 of the 6 organisations signpost to other services and one does not. The services that were listed include:

- Autism West Midlands
- BEEU
- Liaison and Diversion
- NAS (National Autistic Society)
- 3SC (Neurodiversity coaching programme)
- Genius Within CIC
- Autism Hubs (Shropshire and Telford & Wrekin)

The next question asked 'What do you see as the benefits or drawbacks of autism/ADHD diagnosis in your area?' All of the 6 survey respondents were able to provide helpful information from the perspectives of their different services/organisations:

- *"Waiting times are a drawback. Lack of 'in process' resources shared for people with suspected autism/ADHD. The process is not Autism friendly; forms are given to people to fill out which can sometimes act as a barrier to young people being able to access or receive support...."*
- *"Benefits gain access to some accommodations although we prefer to go on a needs based assessment."*
- *"Lack of understanding and support."*
- *"We only screen for ASD but can diagnose for ADHD."*
- *"Waiting lists are long but new service. Too many missed children."*
- *"Early diagnosis prior to first hearing would ensure intermediary applications could be made at the first hearing and cases managed appropriately. This reduces the risk of unnecessary adjournments and associated stress. A formal diagnosis may however introduce delay if, for example, greater time or more input is needed prior to concluding a case e.g. at the sentencing stage."*

In response to 'What differences do formal assessment for autism or ADHD make to your processes?' all 6 representatives provided an answer:

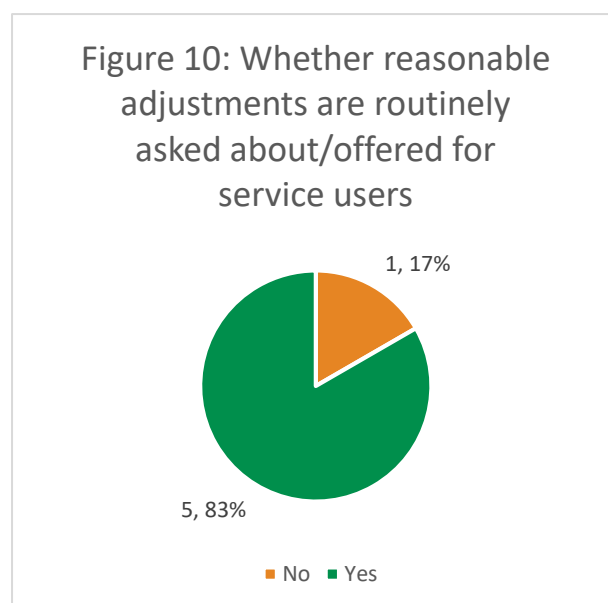
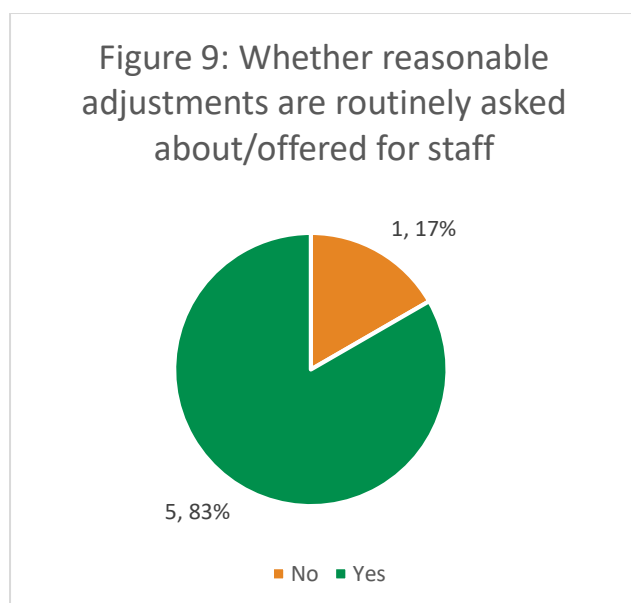
- *"The young person would receive specific support and would highlight areas of need for young people working with them. Can also provide guidance to those working with the service when a YP has a formal assessment being undertaken. Formal processes sometimes make young people feel heard and valued and more likely to engage with*

services.”

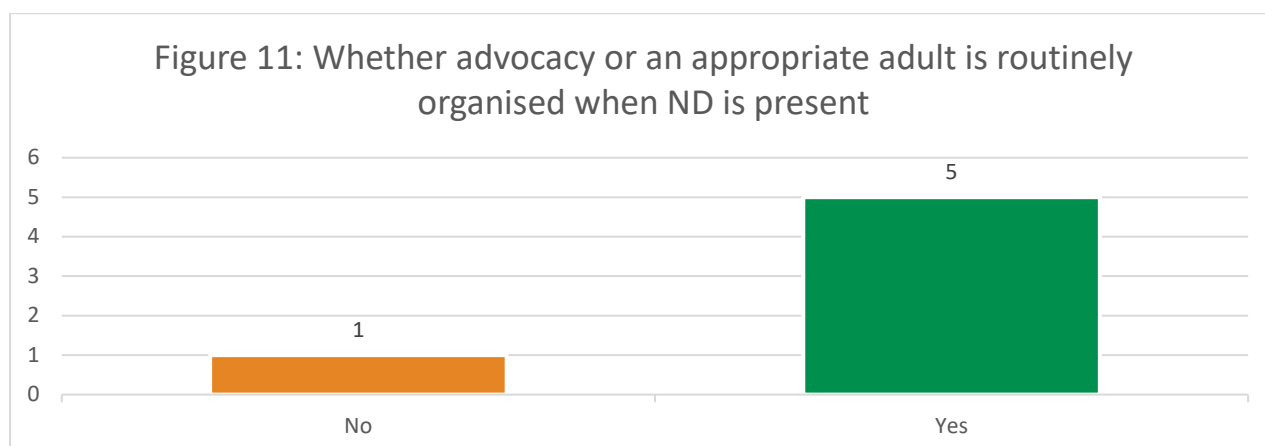
- “We provide reasonable adjustments without the need for a diagnosis.”
- “This helps in understanding behaviour and being responsive in the type of support or treatment required to aid desistance from offending.”
- “Informs all staff and provides personalised support.”
- “Allow access to DSR.” [Dynamic Support Register]
- “If identified in respect of a defendant either by the L&D team or Probation service this will ensure any sentence, if needed, is suitably tailored to the needs of the defendant. It also ensures all special measures are dealt with at the point a trial is fixed assuming that is required.”

It should be noted that formal assessment for ASD is not available in HMP Stoke Heath.

The next few questions were on the issue of reasonable adjustments. The survey results show that 5 of the 6 organisations routinely ask about and/or offer reasonable adjustments for staff (see Figure 9). The same results is provided when asked about reasonable adjustments for service users (see Figure 10).



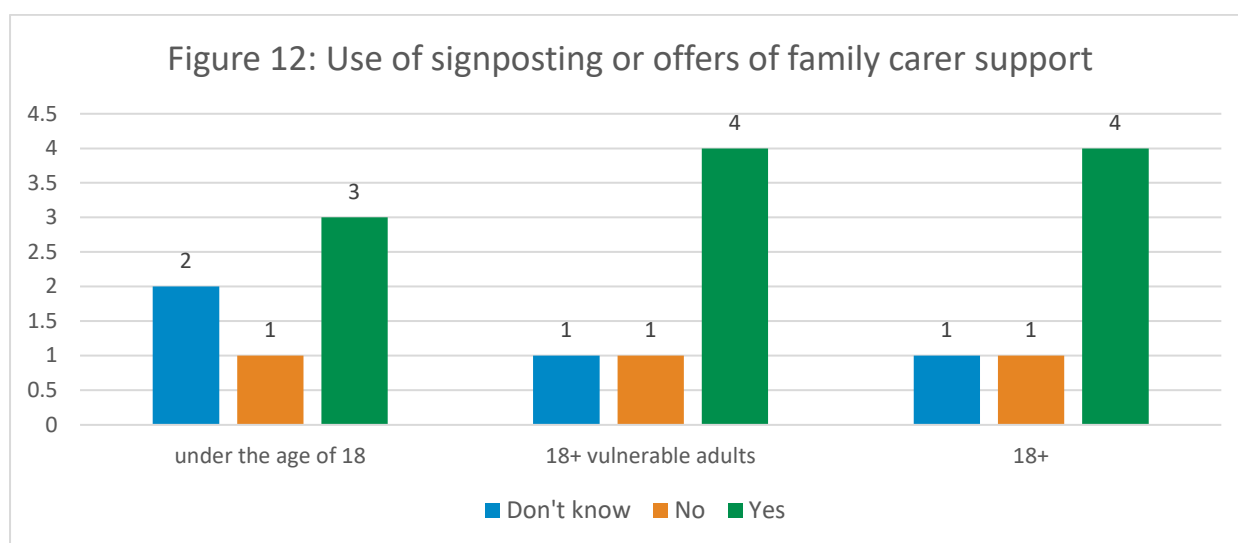
The next question within the survey sought to understand use of advocates or appropriate adults for people with ND. The result is shown in Figure 11 and highlights that 5 of the 6 organisations do routinely offer to organise support when ND is identified.



A set of questions was included within the survey to understand more about signposting or offering family carer support. The questions were:

- Do you signpost or offer family carer support for those under the age of 18?
- Do you signpost or offer family carer support for those 18+ considered a vulnerable adult?
- Do you signpost or offer family carer support for those 18+?

The responses are shown in Figure 12. 4 organisations offer this additional support for those over the age of 18+, including vulnerable adults. 3 organisations offer this support to those under the age of 18.



The next part of the survey included two questions linked to working with families. The first asked 'What action do you take on behalf of family if they may be the victim?' and the second 'Are any checks undertaken by your organisation to establish if any involved family members are known to Criminal Justice System?'. The response to the first question highlighted that Safeguarding, MASH (Multi-Agency Safeguarding Hub) and MARAC (Multi-Agency Risk Assessment Conferences) are used when working with offenders. Signposting to relevant agencies is in place and special measures are used when appropriate. Victim Liaison Officers can also be introduced to families when the appropriate criteria for that support is met. The second question resulted in feedback to highlight the following checks:

- Police checks;
- Childview check;
- Approaches to Children's services to request information;
- Attendance at strategy meetings; and
- PITSTOP.

Use of Mental Capacity Act (MCA) assessment was the next theme explored within the research. The response highlights that there are different roles and responsibilities within the Criminal Justice System. Some organisations such as Court would not be expected to be involved in this area. Others may refer to mental health services to complete assessment and others will work in partnership (e.g. with health care professionals). This type of work will be limited to those trained to deliver MCA assessments which will

usually include medical professionals, social workers, occupational therapists, independent social workers and some psychologists.

Survey respondents were asked 'How would your organisation support access to formal autism/ADHD assessment?'. Most of the organisations represented refer to the appropriate organisations locally with professionals trained to carry out the assessments (this includes the Midlands Partnership University NHS Foundation Trust (MPFT) represented within the partnership working to develop and deliver the Autism Strategy). The survey feedback also highlighted the Right to Choose which sits under the NHS Choice Framework. This means that if a GP refers someone for specialist treatment such as an autism or ADHD assessment, ADHD medication services etc. people have the right to choose an appropriate provider.

All survey respondents were given the opportunity within the survey to add anything else they wished to share or comment on regarding their organisation's practices in relation to neurodiversity, autistic people and/or people with ADHD. There were some comments included that will help the sub-group partners work together going forwards. One of the comments highlighted a lack of access to all information within their role, a helpful explanation but not included as an example in the overall suggestions below:

- *"I do think more can be done to improve understanding and access to resources."*
- *"Our service are 'try-ers' and will do what they can to support young people in any area. However, lack of training and skills acts as a barrier to potential support."*
- *"We have a number of projects and plans which we are seeking to implement to better support people in custody and in interviews."*
- [There is a need for access] *"diagnostic assessments for possible autistic prisoners"*.

The last question sought to bring together some of the wider partnership work and the sub-group members were asked to list the other organisations, teams or agencies they work with to support neurodivergent people. These include:

- Autism Hubs
- Autism West Midlands
- Local authorities
- BEEU
- National Police Autism Association (NPAA)
- DPA (Disabled Police Alliance)
- Largely limited to L&D & Probation teams in the court room.
- MPFT team
- 3SC (provide training to staff).
- Youth workers (to support young people when there are barriers to education or any offending behaviour has occurred).
- CLIMB
- DIAG
- ADHD alliance

This section has highlighted the work that takes place within organisations to offer reasonable adjustments for staff and service users to meet sensory needs, communication methods, and other individual requirements. Many organisations use advocates when neurodiversity or vulnerabilities are identified or access other support as appropriate e.g. Victim Liaison Officers. This section highlights the importance of support to meet the needs of neurodiverse individuals within the Criminal Justice System and how that support is secured internally and through referrals to, and collaboration with external support services.

5 Summary and Conclusion

Shropshire Council's Neurodiversity Survey results provide learning of how neurodiversity, particularly Autism, is addressed within the Criminal Justice System in Shropshire. The survey gathered insights from local representatives across various organisations, including West Mercia Police, Criminal Courts, Probation, Youth Justice, and HMP Stoke Heath.

The survey aimed to understand current practices, identify gaps, and explore opportunities for improvement in supporting neurodiverse individuals within the system.

The results covered three main themes:

Data

This section presents the methods used by organisations to record neurodiversity, including Autism and ADHD. The survey focusses on the collation of data across the criminal justice system but does not include the recording of "outcomes" of the intervention, providing data and reassurance that the intervention has been effective. The feedback highlights the varied approaches to data recording and the challenges faced in accessing comprehensive data on neurodiverse individuals supported by the system. The information gathered suggests **a need for some standardised methods to record neurodiversity across organisations to ensure comprehensive data collection and better support for neurodiverse individuals.**

Training and Resources

This section explores the training opportunities available to staff members within the Criminal Justice System, focusing on Autism and ADHD. Overall there appears to be a relatively comprehensive training offer with professionals within all organisations having access to training, whether mandatory or optional. The evidence gathered also highlights the resources provided to support neurodiverse individuals, such as fidget toys, intermediary services, self-help booklets and the provision of alternative versions of documents/forms. Whilst this doesn't appear to be an area in need of particular attention, the feedback suggests that opportunities for development are limited through lack of access to training and resource budgets. Experience of those with neurodiversity within the Criminal Justice System could be improved through **consistency across all contributors, a joined-up approach and the importance of lived experience in delivering meaningful training.** As with all training, gaining knowledge is important but this is only effective if it can lead to changes in practice and improved outcomes for offenders.

Health

This section examines the health aspect of supporting neurodiverse individuals, including signposting to support services, the benefits and drawbacks of diagnosis, the impact of formal assessments, and the provision of reasonable adjustments and advocacy. Reasonable adjustments appear to be offered widely by most organisations. **There appear to be good partnership arrangements in place to signpost to specialist services where needed but the feedback suggests room for improvement and some gaps in support or service offers.**

The findings from the survey highlight the importance of a collaborative and inclusive approach to supporting neurodiverse individuals within the Criminal Justice System.

The insights gained from this survey will be used by those working within the Autism Strategy sub-groups. The results will inform future service provision and help develop clear priority areas and goals for the local All-age Autism Strategy. The strategy will be made public for wider engagement and feedback and the findings reported to Shropshire Council's Cabinet later in 2025.



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