# ASC assessment pathway Seaside View Child Development Centre

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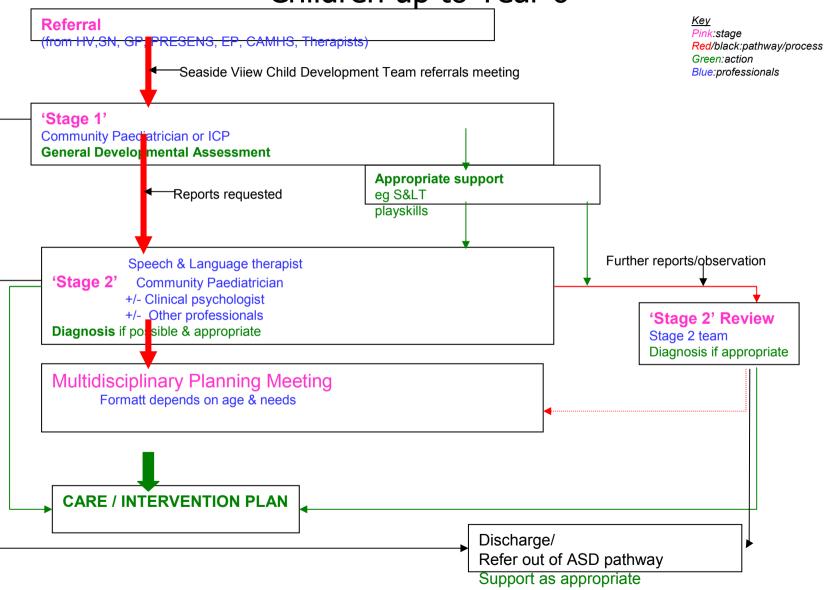
## Brighton & Hove ASC assessment service

- Children 0-11 based at Seaside View
- Children & Young People 11+ CAMHS

### Seaside View

- Current service based on NAPC (2003)
- For most children a two stage process
- In most respects compliant with NICE guidelines 2011

### ASC Assessment Pathway Children up to Year 6



### Referral

- All referrals to SVCDC go through single referrals system
- Referrals panel meet fortnightly
- Outcome
  - Concern mainly/specifically ASC: paediatric appt
  - Concern broader &/or child younger multidisciplinary assessment eg paediatrician, S&LT, specialist HV, OT, PT, nursery nurse, PRESENS (ICP assessment)

## Initial assessment 'Stage 1'

- Single/multiple professional
- General developmental/medical assessment
  - Standard paediatric & developmental history
  - Risk factors for developmental conditions
  - Family (genetic & social) history
  - Vision & hearing
  - Direct developmental assessment of child
  - Physical examination

### Outcome of Initial assessment

- Reassurance and discharge
- ASC unlikely but other developmental condition identified/suspected; appropriate support
- ASC unlikely but other psychiatric/behavioural condition identified/suspected; referral on as appropriate
- ASC likely &/or needs further assessment

## Needs further assessment for ASC

• Most referred on to autism specific assessment 'Stage 2'

• Some young children have 'Stage 2' as part of their ICP assessment ie if already seeing appropriate paediatrician & S&LT

## Core members of Autism Specific Team SVCDC

- Paediatrician
- Specialist Speech and Language Therapist
- Clinical Psychologist (most children)

## Between Stage 1 & 2

- Referrer (paediatrician) requests
  - written report from school/nursery
  - EP report if available
  - Other information eg Community S&LT reports
- Specific checklist completed by referrer
- Referral discussed at weekly ASC meeting & details of assessment agreed
- If inadequate information to justify Stage 2 further liaison with referrer takes place

## Autism specific assessment

- Paediatrician
- Specialist Speech and Language Therapist
- Clinical Psychologist (children age 4+ unless specific request for younger child)

## Autism Specific Assessment approx 3 hours

- Detailed autism specific developmental history (paediatrician)
- Direct assessment/observations of child
  - Communication, social interaction & play
  - Cognition (not routine)
  - Behaviour
- Feedback & discussion with parent/s/carer

## Autism Specific assessment Aims

- To make a diagnosis of ASC if appropriate
- To reassure child does not have ASC if appropriate
- To identify profile of child's strengths difficulties and needs & family needs
- To identify possible co-existent or alternative diagnoses
- To identify any underlying medical conditions
- To formulate action plan

## Diagnosis of ASC

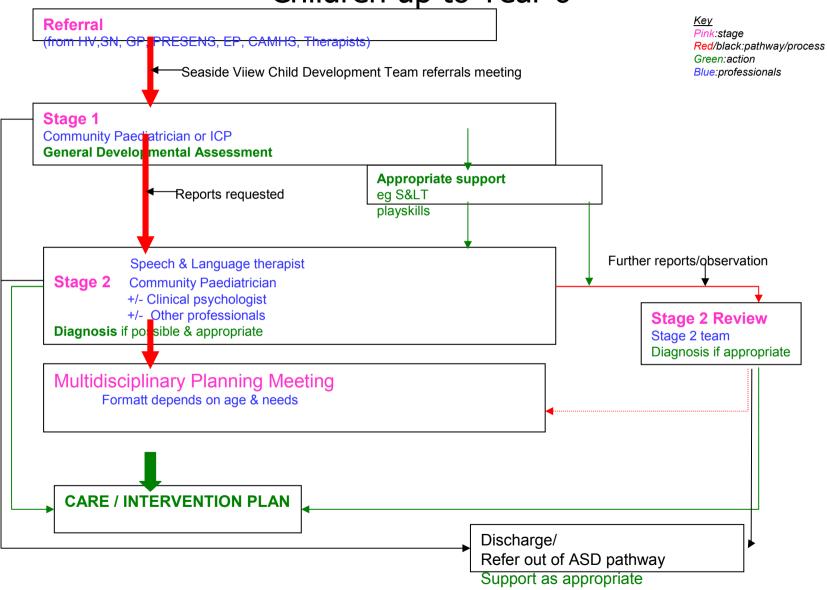
Based on team discussion as to whether the child's profile is consistent with ICD/DSM diagnostic criteria

- Over time (parental history/previous observations)
- Pervasive (information from different settings)

## Autism Specific assessment outcome: depends on

- Diagnosis of ASC confirmed
- Child does not have ASC
- Need for more information
  - observation by team in educational setting
  - Observation over time with therapist
  - 'Stage 2 review' appt in specified time period

#### ASC Assessment Pathway Children up to Year 6



## Discussion with family

- At point of diagnosis
- And/or at follow-up appointment

### If not ASC

- Explanation of why not
- Alternative explanation of child's presentation & profile
- Referral on/further assessment/support plan

### If ASC

Nature of ASC

Strengths difficulties and needs

Co-existent medical/developmental conditions

- ? further assessment
  - Physical examination
  - OT referral
  - CAMHS referral

Genetic advice

? medical investigation: underlying medical conditions

## ASC: discussion with family

#### Plan of support for child

- Appropriate educational and behavioural support
- S&LT

#### Needs of family

- Information (child & services)
- Emotional support
- Financial support

#### Specific advice

- Eating, sleep, bowels

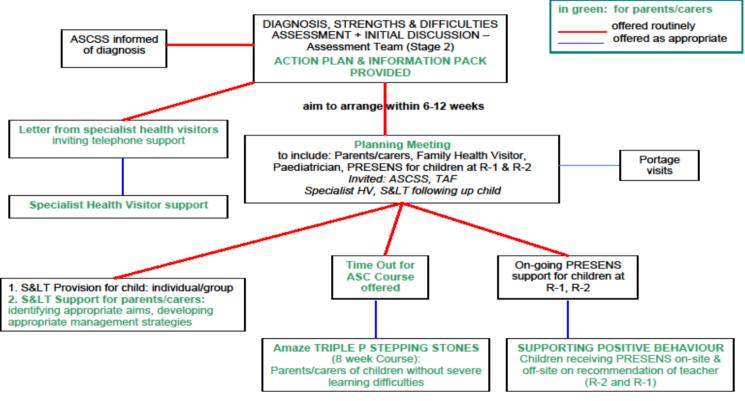
## Family leaves appointment (ASC)

- Offer of phone call to professional family see as primary support/sp HV
- Handwritten action plan
- Written information pack including
  - Information about ASC
  - Information about local and national services

## After appointment (ASC/Non ASC)

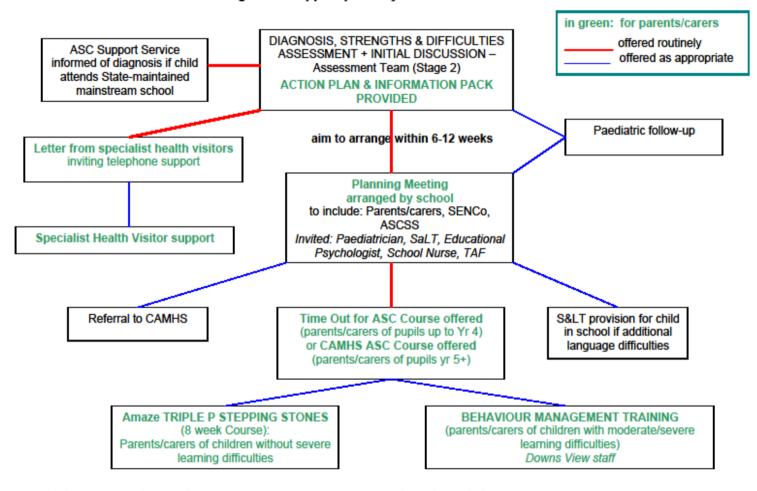
- Typed reports to
  - family
  - Referrer
  - Health, Educational and Social care professionals (consent)
- Referrals as appropriate eg
  - ASC Support Service
  - Time Out Course
  - Genetics, OT, CAMHS etc

#### ASC Post diagnostic support pathway: PRESCHOOL children



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#### ASC Post diagnostic support pathway: PRIMARY SCHOOL AGE children



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## Information available: for parents/carers

- Generic information about service at SV
- Information about autism specific assessments: what to expect
- Information pack given at point of diagnosis (SV + CAMHS)
- NAS information booklet
- Local leaflet re services available for 3 different ages
- Information about national database

## Information available: for professionals

- SV diagnostic pathway
- Post-diagnostic support pathways (multiagency)
- 'Information for referrers' (sv)
- Guidelines/checklists for professionals involved at various stages of ASC assessment (sv)

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## Audits/evaluation (SV)

- Process audit
- Parent questionnaire (MPOC)
- Focus group
- Current parent survey

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## Service planning

- ASC peer review
  - Ad hoc eg intervention planning
- CDDS Quality & Standards
- Disability Partnership board

### Numbers

- 2 sessions per week excluding BHs for autism specific assessment
- Most on Mondays: some lost through BHs and AL
- 2 S&LTs, 1 psychologist, 6 paediatricians

### Numbers: ESTIMATE

- 63 (48 –74) pa seen through standard pathway
- 86 last calendar year (July 2012-June 2013)
- Additional children seen through ICP or special school process
- 64% diagnosis of ASC made (standard pathway only)