

## **Guidelines for the Identification and Referral of School Placed Children and Young People In Neath Port Talbot County Borough Council with suspected Autism Spectrum Disorders (ASD)**

An Autism Spectrum Disorder (ASD) is a developmental disorder which affects the way in which an individual is able to communicate with and relate to other people and the world around them in a meaningful way. It is very common for children and young people with ASD to have profound sensory issues combined with the triad of impairments in the areas of social interaction, social communication, rigidity of thinking and difficulties with social imagination.

These impairments are a pervasive feature of the individuals functioning in all situations, although children and young people may be affected in a variety of ways and to very different degrees and result in the children and young people experiencing the world very differently. It is now generally recognised that there is a spectrum of Autism Disorders that includes individuals across the range of severity and intellectual ability – from severely impaired to high functioning.

Over recent years, there has been a significant increase in the demand for assessments for children and young people with suspected ASD in the Neath Port Talbot area. In addition, there has been a need for a more effective, coordinated, multidisciplinary and interagency approach to the assessment process.

Guidelines for the identification, referral and assessment of children and young people with suspected Attention Deficit Hyperactivity Disorder (ADHD) have already been successfully introduced into the area, with schools taking the lead role in collating the information and referring on to more specialist services for further assessment. Therefore a similar approach was used when developing this guidance.

The guidelines offer a framework for the identification, referral and assessment for school placed children and young people suspected of having an ASD and outline an ASD pathway, consisting of ten steps. The pathway is initiated by school and incorporates recommendations set out in the National Autism Plan for Children (NIASA, 2003) and the National Institute for Health and Clinical Excellence (NICE) guidelines on Autism: Recognition, referral and diagnosis of children and young people on the autism spectrum.

These guidelines have been developed in consultation with a multidisciplinary group of professionals from a variety of agencies including Child and Adolescent Mental Health, Community Paediatrics, Speech and Language Therapy and Education. In developing the guidance, the group adopted the definition of Autism Spectrum Disorders (ASD) used in the National Autism Plan for Children (NIASA 2003, P15-16):

“The term Autism Spectrum Disorders (ASD) will be used to mean the group of pervasive developmental disorders (PDD) characterised by qualitative abnormalities in reciprocal social interactions and in patterns of communication and by a restricted, stereotyped repetitive repertoire of interests and activities”

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## **Abbreviations used in document**

ASD	=	Autism Spectrum Disorder
CAMHS	=	Child and Adolescent Mental Health Service
EP	=	Educational Psychologist
GP	=	General Practitioner
IEP	=	Individual Education Plan
LEA	=	Local Education Authority
SENCO =		Special Educational Needs Coordinator

## **The Autism Spectrum Disorder (ASD) Pathway – The Ten Steps**

The Autism Spectrum Disorder (ASD) Pathway consists of a series of ten steps and provides a graduated response for the identification, referral and assessment of children and young people suspected of having ASD.

The pathway is initiated by the child and young persons class teacher. Information is gathered about the child and young person by the class teacher and Special Educational Needs Coordinator (SENCO) as they progress along the pathway. Strategies designed to help the child and young person in school will also be put in place using resources supplied by the Local Education Authority (LEA). If concerns persist, the SENCO will then consult with the Local Education Authority (LEA) Support Services for advice regarding

the necessity for further assessments and interventions. The first five steps of the pathway involve the school.

Following consultation with the LEA Support Services, if ASD is suspected, a referral is then made by the SENCO to the Communication and Support Forum for discussion with the ASD Diagnostic team. This is step six of the pathway.

Where there is sufficient evidence to suggest that further assessment for ASD is required, the ASD Diagnostic Team will invite the child or young person to opt in for further assessment at the Children's Centre or Child and Family Clinic at Neath Port Talbot Hospital. An ASD Coordinator will then be appointed. The ASD Coordinator will be responsible for coordinating further assessments by the ASD Diagnostic Team and discussing the outcome of the assessments with the parent/carer. Steps seven to ten involve the ASD Diagnostic Team.

### **The ASD Pathway: The Ten Steps**

#### **Step 1- Discussion with Class Teacher**

- Parents/carers should be encouraged to discuss their concerns regarding possible social communication difficulties / ASD with the child's class teacher.
- If parents/carers consult their GP, Social Worker, Paediatrician or other professional regarding possible social communication difficulties/ ASD, they should still be advised to discuss their concerns with the child's class teacher.

**NB: Where there is a loss of language skills in children above the age of 3 years and / or any loss of motor skills at any age, the parent/carer should be advised to seek further advice from their General Practitioner (GP) as the child or young person will require an urgent referral to a Paediatrician or Paediatric Neurologist for further assessment.**

#### **Step 2- Classroom Strategies**

- The class teacher will then keep a careful note of any behaviours that cause concern and use Local Education Authority (LEA) supplied resources to devise general classroom strategies to manage such behaviours.
- These strategies will then be reviewed.

#### **Step 3- Discussion with SENCO and Individual Education Plan (IEP) implementation**

- If the class teacher continues to have concerns, they should be discussed with the SENCO and, if necessary, an IEP should be implemented. Resources provided by the LEA will support this process.

- Procedures for School Action, including reviewing the IEP's, would then be implemented in close liaison with parents/carers.

#### **Step 4- Consultation with Local Education Authority (LEA) Support Services / IEP review**

- Where concerns persist, following reviews of IEP's at School Action, the SENCO may consult with the LEA Support Services.
- The LEA Support Services include the school's Educational Psychologist (EP), Advisory Teacher for Autism, Behavioural Support Team and the Speech and Language Advisory Teacher.
- The LEA Support Service Staff can discuss the concerns with the SENCO and give advice on the necessity for further assessments and interventions to implement a more detailed IEP.
- Procedures for School Action Plus, including reviewing the IEP's, would be implemented in close liaison with parents/carers and LEA Support Service Staff.

#### **Step 5- Detailed Information Gathering**

- Where there are ongoing concerns regarding possible ASD, more detailed information will be gathered by the class teacher and SENCO. This information should include;
  - i. Copies of child or young persons IEP and reviewed IEP's.
  - ii. Reports from the LEA Support Services that have been involved e.g. EP, Advisory Teacher for Autism, Behavioural Support Team and Speech and Language Advisory Teacher.
  - iii. Completion of Social and Communication Disorders Checklist by parent.
  - iv. Completion of Neath Port Talbot Social Communication Questionnaire by school.
  - v. Completion of Children's Communication Checklist (CCC2) by parent and school.
  - vi. Any other relevant information.

The checklists and questionnaires can be obtained via the Communication and Support Forum.

#### **Step 6- Referral to the Communication and Support Forum**

- Once this information has been collated, the SENCO will submit this information with the Consultation Referral Form to the Communication and Support Forum.
- The Consultation Referral Form includes a box labelled the "Autism Diagnostic Team" which should be completed.

#### **Step 7- Discussion at the Communication and Support Forum with the ASD Diagnostic Team**

- The information provided by the SENCO will then be discussed at the Communication and Support Forum with members of the ASD Diagnostic Team.
- The ASD Diagnostic Team is multidisciplinary group of professionals who have a key role in the assessment of children and young people with suspected ASD and includes professionals from the following agencies:

Child and Adolescent Mental Health Service (CAMHS)  
Community Paediatrics  
Speech and Language Therapy  
Education (Educational Psychology, Advisory Teacher for Autism)

- Where there is insufficient evidence to suggest that further assessment for ASD is required, the SENCO will be contacted by a member of the Communication and Support Forum and further advice given. The SENCO will share this information with the parent / carer.

#### **Step 8- Appointment of ASD Coordinator**

- Where there is sufficient evidence to suggest that further assessment for ASD is required, the SENCO will be contacted by a member of the Communication and Support Forum. The SENCO will share this information with the parent / carer.
- The child or young person will be invited to “opt in” for further assessment at the Children’s Centre or Child and Family Clinic at Neath Port Talbot Hospital.
- An ASD Coordinator will be appointed. The ASD coordinator may be any member of the ASD Diagnostic team but is likely to be a member of the Child and Adolescent Mental Health Service (CAMHS) Team if the child is in Year 1 and above or a member of the Community Paediatric Team if the child is in nursery or reception.
- The ASD coordinator will identify and coordinate further assessments by the ASD Diagnostic Team.

#### **Step 9- ASD Diagnostic Team Meeting**

- Once the assessments have been completed, the ASD coordinator and members of the ASD Diagnostic Team will meet to discuss the assessments, review all the available information and make a decision regarding a diagnosis of ASD.

#### **Step 10- ASD Coordinator Feedback**

- The ASD coordinator will then meet with the parents / carers to discuss the outcome of the assessments and agree a management plan for the child and young person.

- With parental consent, written confirmation of the outcome of the assessment and management plan will be sent to the referrer (SENCO) with copies to other relevant professionals.

### **Referrals for children and young people suspected of having ASD but not placed in school.**

This pathway only applies to children and young people who are in school. However there are some children and young people who are educated outside of school who may also present with difficulties suggestive of ASD.

For those children and young people who are educated outside of school by the LEA, the pathway can still be followed with the involvement of the LEA Support Services and information gathered by the tutors.

For those children and young people who are educated at home by a parent, a referral will need to be made by the GP to the relevant ASD Diagnostic Team. The referral will then be discussed at the Communication and Support Forum. If there is sufficient evidence, further assessments will be undertaken by the ASD Diagnostic Team.

Where there are significant and persistent concerns raised by a parent / carer but the child or young person does not present with similar concerns at school, further advice can be sought from the Advisory Teacher for Autism.

Where there are concerns about younger children, under the age of 3 years and not yet in nursery, referrals can be made directly to the ASD Diagnostic Team (Community Paediatrics) by the Health Visitor or GP.

For those young people aged 16 years and above but no longer in education, referrals can be made directly to the ASD Diagnostic Team (CAMHS).

### **References**

1. National Institute for Health and Clinical Excellence (NICE) 2011. Autism: Recognition, referral and diagnosis of children and young people on the autism spectrum.
2. The National Autism Plan for Children (NIASA, 2003).

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WITH SUSPECTED AUTISM SPECTRUM DISORDER – THE TEN STEP PATHWAY**

