



WOLVERHAMPTON MULTI-AGENCY ASC ASSESSMENT PATHWAY INFORMATION FOR PARENTS + CARERS

We are writing to confirm that your child/ young person has been referred to the Wolverhampton Autism Spectrum Condition (ASC) Multi-Agency Assessment Pathway (for children aged 5 - 18). We've put together some information here for parents and carers based on some commonly asked questions that we are asked. We hope that you find it helpful.

What is the ASC Pathway?

The Multi-Agency ASC Pathway is supported (in line with NICE Guidelines) by professionals from different services, including CAMHS, Educational Psychology, Occupational Therapy, Paediatrics and Speech and Language Therapy. The purpose of the pathway is to determine whether a young person's presentation is best explained with a diagnosis of an ASC, or whether other factors offer a better understanding, such as early trauma, sensory needs, social factors, relational factors, learning needs or aspects of mental health.

Who can refer to the pathway?

There are many different professional groups who can refer a child to the pathway including, primary referrers being; Paediatrician, CAMHS, Psychiatry, Base 25, Educational Psychology, Occupational Therapy, Speech and Language Therapy and Outreach. A second supporting referrer is also required which is most commonly school but can be a second professional from the professions named above, GP, social care or third party agencies/ care providers.

Why might my child/ young person have been referred?

Young people referred into the ASC pathway may:

- struggle with social interaction (e.g. finding people unpredictable, preferring objects rather than people, only tolerating familiar people, may not understand social rules)
- struggle with social communication (e.g. may be slow to develop speech, use words or phrases out of context, echo words, struggle to hold eye contact, use little gesture when speaking, have a literal understanding of speech)
- have high expressed emotion
- have sensory needs (heightened or dulled)
- rely on strict routines to feel comfortable or relieve anxiety
- be quite rigid in how they think about different situations
- have abnormal or impaired development before the age of 3 in receptive or expressive language
- have difficulties with functional or symbolic play or prefer to play alone





The Pathway Process

Referral to the ASC Pathway accepted

Both you and the professional that referred your child will receive a confirmation letter. Waiting times are, unfortunately, currently >30 months.

Information already held by other teams that may help with the assessment, will be gathered e.g. school, Paediatrician, CAMHS, Educational Psychology, Occupational Therapy, Speech and Language Therapy.

If you have any concerns about your child whilst on our waiting list, please contact your referrer. We also have a large resource pack of support available whilst waiting

When allocated, your family will be assigned a Key Worker who will remain with you throughout the assessment process. You can ask any questions you have about the ASC Pathway.

Your Key Worker will complete any additional assessments and refer to other teams within the ASC Pathway if their input is necessary.

Once your assessment is complete, this information is presented to the Multi-Agency ASC Panel by the Key Worker.

The Panel meets twice a month to discuss cases. You and your child do not attend the Panel presentation.

The Panel will discuss the case and a final diagnostic decision or alternative formulation for presentation will be agreed.

We diagnose in line with ICD11 criteria, meaning the formal diagnosis is Autism Spectrum Disorder (ASC is used in line with service user linguistic preference).

After the panel presentation, your Key Worker will be in contact to discuss the outcome and recommendations/next steps.





What will my Key Worker do?

You and your child/ young person will come to the Gem Centre and meet your Key Worker. Your child/ young person will be asked about what they like to do, as well as what they find difficult, both at home and at school. They will be asked about friendships, how they like to spend their time and how they get on with people at home. They will ask you as parents/ carers about your young person's strengths and difficulties, milestones and what support they currently receive. Key Workers may arrange to see the young person on their own (either at the Gem Centre or at school), and/or might ask to speak to you on your own. Any additional assessments will be explained before they are completed. The Pathway process gathers information from different professionals and teams that support your child. If you have any existing reports or letters about your child, it is always helpful to bring them to your Key Worker appointment.

How long will it take?

The Autism Assessment Pathway covers the whole of Wolverhampton and therefore does have a waiting list. The current wait to be allocated a Key Worker is around 48 months. Schools and other agencies will be contacted immediately from the point of referral to start gathering information and a compulsory appointment will be arranged with the Paediatrician during this time. Once you have a Key Worker, we estimate two-three months until your case will be discussed at the Panel.

Attendance

The Autism Assessment Pathway relies on families attending all arranged appointments with different professionals. These include Speech and Language Therapy, Occupational Therapy, Paediatric and Educational Psychology appointments, as well as those with your Key Worker. Failing to attend an appointment with any of these professionals can delay the assessment, and not attending two appointments without cancelling will result in discharge from the assessment process.

Will my child be comfortable?

We understand that young people being referred to our Pathway may be anxious. All information will be gathered in a child-friendly way. At no point will your child be expected to do anything that makes them uncomfortable. We will do our best to accommodate the needs of any young people referred, for example sending out a letter with a picture of their Key Worker, meeting them with a professional they already work with, or speaking with you as family members first to know how best to engage with them. Please contact the Gem Centre on 01901 444 021 should you have any concerns about your child attending their appointments, your Key Worker will always help to try and find a solution.

After Panel Presentation

After a diagnostic decision about ASC has been agreed at Panel, you will be contacted by your Key Worker within two weeks of that decision being made. This is normally an initial phone call, but you can also choose to meet to discuss the outcome and next steps. Your Key Worker will be able to talk you through the decision and answer any questions that you may have. For many people, this will mark the end of the ASC Pathway journey. We will ensure that any referrals for additional support have been made, such as Wolverhampton Outreach, Teen Life, Early Birds, Sensory Group, Occupational Therapy, Speech and Language Therapy and other health-based referrals. You will receive a letter confirming the outcome of the Panel, as will the primary referrer and schools, GPs etc. where appropriate.

Appeals

We aim to offer a transparent service that listens to families and teams supporting a young person, recognises their concerns, and offers a formulation that best accounts for the information we receive. If someone (parent, care giver or professional) feels that the formulation does not best account for the needs of a young person, our pathway has an appeals process:





- An appeal can be made at any point between 28 days and 12 months following the Panel date to allow families time to process the outcome. After this period, a new referral would need to be made.
- To submit an appeal, please send a letter either via post or via email (details) outlining your concerns.
- When considering an appeal, we would be looking for indication that 1) At least one professional supporting a young person feels strongly that the outcome is not representative of their presentation/ does not best account for their difficulties; 2) Some information or evidence was missing from the assessment process that may change the perception of the Panel; 3) The interventions recommended by the Panel have not had the outcome expected; 4) There is significant new information or change.
- The appeal will then be discussed with the Panel team and the individual appealing will be notified of the Panel decision - whether to accept the appeal or not.
- If an appeal is accepted, the young person will be placed at the top of the waiting list to be allocated to the next appropriate key worker. They will not be given the same key worker as previously, to ensure a fresh perspective.
- The appeal process will involve the new Key Worker reviewing the information already held, then meeting with the young person and gathering additional information where suitable.
- The case will then be re-presented to the Panel.

Due to the long and extensive nature of our assessment process and the effect it can have on families, as well as us as a service needing to be conscious and realistic of our use of limited resources and the high number of patients on our waiting list, we are only able to consider an appeal once within the course of a referral.

If an appeal has been made previously and the diagnosis of ASD was still not reached, we would advise exploring the advice provided by the professionals involved in the assessment. If in the future more evidence is uncovered that supports a re-assessment, a new referral can be submitted to our service for consideration.

Private Diagnosis

Please note that, as part of the NHS, the ASC pathway will never request families to pursue private assessments. In order to be compliant with NICE Guidelines, a diagnosis of Autism Spectrum Disorder requires an assessment and/or discussion of presenting difficulties to be held within a multi-disciplinary team. This team must consist of a paediatrician and/or a child and adolescent psychiatrist, a speech and language therapist, and a clinical and/or educational psychologist. This means that many private assessments result in clinical recommendations that a young person presents in line with an autism spectrum disorder, rather than being able to offer a full diagnosis. In these cases, the ASC pathway will complete an assessment as usual, however will utilise the private report as additional evidence in the assessment.

In cases where a private diagnosis has been obtained from a multi-disciplinary team, it is the choice of the family and young person whether they are happy with that diagnosis, and no longer wish to pursue an NHS assessment, or whether they would still like to be seen through an NHS pathway.

If you are unsure about private diagnoses or assessments, please contact the ASC Pathway and we will be happy to discuss.

