

The assessment and diagnosis of **Autism Spectrum Disorder (ASD)** in children and young people

Information for GPs

This leaflet provides information about what you can do if you have concerns that a child or young person you know may have Autism Spectrum Disorder (ASD).

What is the process of assessment?

In Lothian we have developed a multi-disciplinary pathway for the assessment and diagnosis of Autism Spectrum Disorder (ASD) in children and young people. This pathway has been developed using national guidelines and aims to provide timely assessment and, where appropriate, diagnosis close to home, if possible.

The process is usually initiated by a referral to the most appropriate members of the multi-disciplinary team. Surveillance tools such as, e.g. mCHAT or SIGN guidance “Red flags for autism spectrum disorder” can be helpful to ensure relevant observations are collected.

The assessment process involves gathering information about the child and young person in the form of a developmental assessment, as well as clinical and contextual observations. The local staged assessment process should be implemented as soon as possible. GIRFEC child planning meetings will ensure families are supported, regardless of diagnostic labels, as well as ensuring a joined up approach between agencies for assessment and support.

Who should I contact to make a request for assistance?

Your local team contacts are provided at the end of this information sheet. For young children up to the age of seven years, this would involve making a request to community child health and speech and language therapy. With children and young people aged seven years and above, the initial concern may have been raised because of anxiety, over-activity or significant behaviour issues. These children may be more suitably supported by the Child and Adolescent Mental Health Service.

What type of difficulties might I see?

Surveillance checklist from SIGN 98 - General developmental warnings of possible ASD in pre-school children:

- Delay or absence of spoken language
- Looks through people; not aware of others
- Not responsive to other people's facial expression / feelings
- Lack of pretend play; little or no imagination
- Does not show typical interest in or play near peers purposefully
- Lack of turn-taking
- Unable to share pleasure
- Qualitative impairment in non-verbal communication
- Does not point at an object to direct another person to look at it
- Lack of gaze monitoring
- Lack of initiation of activity or social play
- Unusual or repetitive hand and finger mannerisms
- Unusual reactions, or lack of reaction, to sensory stimuli.

What types of difficulties might a primary school-aged child have?

(SIGN 98)

Communication impairments:

- Abnormalities in language development, including muteness
- Odd or inappropriate prosody
- Persistent echolalia
- Reference to self as 'you', 'she' or 'he' beyond three years
- Unusual vocabulary for child's age/social group
- Limited use of language for communication and/or tendency to talk freely only about specific topics.

Social impairments

- Inability to join in play of other children or inappropriate attempts at joint play (may manifest as aggressive or disruptive behaviour)
- Lack of awareness of classroom 'norms' (criticising teachers, overt unwillingness to cooperate in classroom activities, inability to appreciate or follow current trends)
- Easily overwhelmed by social and other stimulation
- Failure to relate normally to adults (too intense / no relationship)
- Showing extreme reactions to invasion of personal space and resistance to being hurried.

Impairments of interests, activities and/or behaviours

- Lack of flexible cooperative imaginative play / creativity
- Difficulty in organising self in relation to unstructured space (e.g. hugging the perimeter of playgrounds, halls)
- Inability to cope with change or unstructured situations, even ones that other children enjoy (school trips, teachers being away, etc).

Other factors

- Unusual profile of skills / deficits
- Any other evidence of odd behaviours, including unusual responses to sensory stimuli.

What types of difficulties might an adolescent have?

- Long-standing difficulties in social behaviours, communication and coping with change, which are more obvious at times of transition (e.g. change of school, leaving school)
- Significant discrepancy between academic ability and 'social' intelligence; most difficulties in unstructured social situations, e.g. in school or work breaks
- Socially 'naïve', lack common sense, not as independent as peers.

Language and communication

- Problems with communication, even if wide vocabulary and normal use of grammar.
- May be unduly quiet, may talk at others rather than hold a 'to and fro' conversation, or may provide excessive information on topics of own interest
- Unable to adapt style of communication to social situations, e.g. may sound like 'a little professor' (overly formal), or be inappropriately familiar
- May have speech peculiarities, including 'flat' unmodulated speech, repetitiveness, use of stereotyped phrases
- May take things literally and fail to understand sarcasm or metaphor
- Unusual use and timing of non-verbal interaction (e.g. eye contact, gesture and facial expression).

Social problems

- Difficulty making and maintaining peer friendships, though may find it easier with adults or younger children
- Can appear unaware or uninterested in peer group 'norms', may alienate by behaviours which transgress 'unwritten rules'
- May lack awareness of personal space, or be intolerant of intrusions on own space.

Rigidity in thinking and behaviour

- Preference for highly specific, narrow interests or hobbies, or may enjoy collecting, numbering or listing
- Strong preferences for familiar routines; may have repetitive behaviours or intrusive rituals
- Problems using imagination, e.g. in writing, future planning
- May have unusual reactions to sensory stimuli, e.g. sounds, tastes, smell, touch, hot or cold.

Request for assistance (Local Teams):

Edinburgh: Tel:

Community Child Health:

CCH Dept, 10 Chalmers Crescent: (0131 536 0461)

Speech and Language Therapy:

Sighthill Health Centre: (0131 537 7119)

Gracemount Medical Centre: (0131 672 9456)

Leith Community Treatment Centre: (0131 536 6467)

CAMHS North: Royal Victoria Hospital: (0131 537 5228)

CAMHS South: 3 Rillbank Terrace: (0131 536 0534)

West Lothian: Tel:

Community Child Health:

St John's Hospital, Livingston: (01506 524 403)

Speech and Language Therapy:

St John's Hospital, Livingston: (01506 524 191)

CAMHS:

St John's Hospital, Livingston, OPD5: (01506 434 274)

East Lothian: Tel:

Community Child Health:

Musselburgh Primary Care Centre: (0131 446 4123 / 4129)

Speech and Language Therapy:

Musselburgh Primary Care Centre: (0131 446 4009)

CAMHS:

The Esk Centre, Musselburgh: (0131 446 4880)

Midlothian: Tel:

Community Child Health:

Musselburgh Primary Care Centre: (0131 446 4131)

Speech and Language Therapy:

Newbattle Medical Centre: for assistance, phone 0131 454 9544 on a Tuesday afternoon (parents and professionals)

CAMHS:

Eastfield Medical Centre (01968 671678 / 671356).

For further information on ASD see:

www.asd.nes.scot.nhs.uk - a learning resource on ASD for General Practitioners and Primary Care Practitioners

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in accordance with SIGN, NICE, and the Autism Achieve Alliance.