

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

Information for Secondary Schools

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 ASD?

Autism is a lifelong developmental condition that affects how a person communicates with, and relates to, other people and the world around them. It is thought to affect at least one per cent of the population. It is a spectrum condition, which means that, while all people with autism share certain areas of difficulty, their condition will affect them in different ways.

What types of difficulties might an adolescent have?

(Information from SIGN guidance)

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' un-modulated 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
- 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

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.

How should I raise concerns?

Families may approach the school with a specific concern that their child may have ASD. Alternately, concerns may be raised by a professional following developmental review or observations in class.

It can be difficult for professionals to raise concerns with families. Rather than talking in terms of diagnostic labels, it may be more appropriate to give descriptions of behaviours or developmental concerns. If they do not share your concerns, you may need to make this a gradual process.

Who should I contact to make a request for assistance?

In Lothian we have developed a multidisciplinary 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 multidisciplinary team.

If not already known to outside agencies, this would usually involve making a request to the Child and Adolescent Mental Health Service (CAMHS). If CAMHS already have involvement, please contact the team in the first instance to discuss your concerns. Your local team contacts are provided at the end of this information sheet.

For secondary pupils with language and communication difficulties or learning difficulties it may be appropriate to contact CCH with a request for assistance

What information do I need to gather?

Surveillance tools such as SIGN guidance 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.

Request for assistance (Local Teams):

Edinburgh:

Tel:

Community Child Health:

Community Child Health Department,
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)

Request for assistance (Local Teams) continued:

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).

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

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