Freedom of Information Request

Reference Number: EPUT.FOI.18.815
Date Received: 30/10/2018

Information Requested:

1. What care pathway(s) exist locally for diagnosing children, young people, and adults with autism. Please include in this information, the age ranges that apply to each of these groups.

   **MH Services:**
   Within EPUT services there is only a specific pathway for adults and young people age 18 and above and this is for the South of Essex only. For this group of individuals the referral route is through the First Response Team. So GP’s for example would refer an individual to the First Response Team where they were exploring the possibility of an ASD and seeking a diagnostic assessment. The other routes into the service would be a psychiatrist or another mental health professional working with an individual referred them in, on occasion child mental health services may suspect an individual who is approaching 18 has an ASD and so again will make a referral.

   This question does not explicitly cover individuals aged 18 and above who have a learning disability and where there may be a query around an ASD. Clinical Psychology services in the South of Essex within the Essex LD Partnership currently provide this diagnostic assessment service; this is not though a specifically commissioned service. The route into this service is either through the LD team itself if they are working with an individual where this becomes a question; or GP services and at times possibly social care will refer an individual in with this query.

   Whilst we do not provide diagnostic services for children we do have a psychologist who works into a local under 5’s ASD assessment service which is part of a community paediatric service. Within other services such as adolescent inpatient services within EPUT the MDT will look at completing diagnostic assessments for individuals in the care of their services if this arises as a clinical question.

   **Community Services**
   For children under 5, if the Health Visitor identifies concerns the Trust would refer to Multi Agency Core Referral Team (MARCT) meeting at the acute hospital. Child would be referred to general paediatrics which sits within the acute Trust.

2. How long does it take for an autism diagnosis to be made. Please provide the indicative diagnostic timescales for each of the following groups: children, young people, and adults.

   **MH Services:**
   It is not clear whether this question is about the waiting time from referral to diagnostic assessment and outcome or if instead it is asking how long the assessment itself might take.

   As noted above EPUT does not provide a specific pathway for children and young people. Diagnostic assessments are completed at times within the adolescent unit where there is a clinical need/query. The community paediatric under 5’s ASD service is not an EPUT service but there a Psychologist from the Trust working into this team.
In terms of the adult pathway, waiting time from referral in to the Aspergers Service to
diagnostic assessment is reducing and is currently at 10-12 months with the average waiting
time being 23 weeks. There has though been an increase in referrals over the last 18
months. If the question was around the long the assessment itself might take this varies
depending on the individual. The usual length of time for the diagnostic assessment itself is
approximately 5 ½ - 6 hours but this does not take into account the time taken prior to this in
notes review, screening and scoring of screening measures. The assessment process itself
may take longer if for example an individual will struggle with long periods of time in an
appointment, if we need to complete further assessments such as cognitive assessments,
executive functioning and sensory sensitivities.

**Community Services:**
Diagnosis is made by the Hospital Paediatricians for young persons this is not an EPUT
service.

3. **Is the autism assessment process always conducted on a multidisciplinary basis, or are there
any times when a single professional might be able to make a unilateral diagnosis? If so,
please provide details of when this may occur.**

**MH Services:**
The under 5’s ASD assessment we contribute to is a multidisciplinary team. Within the
adolescent units there is a multidisciplinary team.

In the adult pathway as a result of the nature of the process into the service, individuals are
seen by mental health professionals and/or psychiatry through the First Response Team.
Should an individual be referred in by the children’s mental health services again they would
have been seen by other teams and professionals prior to being seen by the Aspergers
Service. The assessments within the team are generally completed by a psychologist who is
experienced in ASD and has received additional training in a range of different ASD tools.
There is also an Occupational Therapist (OT) within the service who is able to contribute to
the assessment process where appropriate and who has also had additional training in ASD
specific assessment so will complete some assessments independently for individuals where
there is a clearer presentation and will discuss these assessments with the team before the
final outcome/diagnosis is feedback to the individual and their family.

**Community Services:**
Hospital responsibility

4. **What support is offered to individuals and their families after an autism diagnosis?**

**MH Services:**
In the adult pathway the outcome of the diagnostic assessment is feedback to the individual
and their family. At this point discussion takes place about any additional support the
individual may need. This may come from the Aspergers Service itself, may be through
mainstream mental health services or may be through signposting to services outside the
trust. Within the Aspergers Service we offer :- some psychoeducation groups around social
skills and anxiety, a social group; occupational therapy input in a range of different forms
which include support with daily living skills, sensory issues, work related activities and
preparation, accessing the community, work around travel training; we also offer some
individual support which is tailored to individual’s needs. Treatment is not specifically
commissioned by our CCGs.

**Community Services:**
Hospital responsibility
5. Are people given access to a specialist sensory processing assessment following an autism diagnosis?

**MH Services:**
Within the adult pathway there is an Occupational Therapist in the team who is able to support around sensory issues where needed.

**Community Services:**
Hospital responsibility

6. When an autism diagnosis is made, is the Local Authority education department automatically notified that a child or young person may have special educational needs?

**MH Services**
The under 5’s ASD assessment services within community paediatrics will notify education where an ASD assessment has been completed and a diagnosis given. This service though is not an EPUT service it is only the psychology input which is part of the Trust. The adolescent inpatient units would provide information about the outcome of a diagnostic assessment to other services involved with the child or young person.

This question is not relevant to the Adult pathway.

**Community Services:**
Hospital responsibility

7. When an autism diagnosis is made, is the Local Authority social care department made aware of the possibility that an individual may require social care assessment?

**MH Services**
In the adult pathway individuals are provided with information about how to access a social care assessment. This though will have been considered within the initial assessment that has been completed by the referrer if this has come through the First Response Team. Where a specific social care assessment is needed, advice around the best process for this will be sought from MH team colleagues and a referral made.

**Community Services:**
Hospital responsibility

8. What reasonable adjustments are made by the trust for people diagnosed with autism?

**MH Services:**
The mainstream mental health teams are able to offer some flexibility in terms of the timings and venues for appointments.

Within the Aspergers Service – we will offer flexibility around appointments in terms of breaking longer appointments into shorter ones, visits to home for those people who struggle to come to clinic settings, where possible we will alter timing of appointments, we make individuals aware of noises and noise levels during appointments.

9. Please provide details of any contracts that exist, or have existed during the past five years (2013-2018) for autism related services, including the names of the agencies involved, the time length of the contacts, and the financial details involved.

**MH Services**
The only contracts are those with the CCG that commission the service delivery from the Trust, which currently run 1st April 2017 to 31st March 2019.
10. Please confirm the process for tender.
N/A