

# Autism Assessment

## Referral criteria



Our **Autism Assessment team** works with parents and carers to assess a child or young person.

The team only makes assessments. Once an assessment is complete, parents and carers are given information about support available at home and at school. This includes information on autism-specific parenting workshops and groups in their area, and access to specialist advisory teachers where possible. Parents will also be invited to join an online support network.

### How to access our service

We accept referrals from professionals who know the child or young person, including health visitors, nursery nurses, teachers, GPs, special educational needs coordinators (SENCO) and educational psychologists.

### Pre-referral assessment

There are many conditions that can cause social communication difficulties for children and young people, including conditions such as hearing, speech and language difficulties, learning difficulties, dyspraxia, depression and anxiety, bullying and emotional worries about the home.

It's important, therefore, to rule out all possibilities before making a referral to the Autism Assessment team.

Before referring a child for an assessment to the Autism Assessment team, please make sure the checks outlined below have been taken.

### Pre-referral checklist for under 5s

We only accept referrals for autism assessments in Under 5s in West Berkshire. Referrals in East Berkshire need to be made to the Community Paediatricians using our referral form.

- ✓ Confirm that the child has had a developmental check within the past 12 months
- ✓ Make sure there has been a hearing test to rule out hearing difficulties
- ✓ Check if the child has been referred to Speech and Language Services, and a speech and language therapy assessment has ruled out a specific language impairment, delay or language disorder

For further information on speech development, read our [Children and Young People's Integrated Therapies \(CYPIT\) toolkits](#).

When all these checks have been completed – and the child is showing evidence of difficulties in social interaction, social communication and repetitive and restrictive behaviours that can't be attributed to other factors – a referral can be made.

Referrals should include information about the previous assessments and evidence of difficulties in the areas stated above.

### Pre-referral checklist for children aged 5 - 17½

- ✓ Make sure that needs-led support is in place within the school environment and under the supervision of the school special education needs coordinator (SENCO)
- ✓ Make sure there's been educational psychology involvement in the school through assessment, observation or detailed consultation
- ✓ Check that parents have been offered parenting support and advice through school based parenting support, Positive Parenting Programme ('triple P') or a family support worker
- ✓ For older children, check that difficulties with social interaction, communication and restrictive behaviours pre-date secondary school and have been present since early childhood

When all these checks have been completed – and the child is showing evidence of difficulties in social interaction, social communication and repetitive and restrictive behaviours that can't be attributed to other factors – a referral should be made to the Autism Assessment team.

Referrals should include information about the previous assessments and evidence of difficulties in the areas stated above.

### Referrals for young people aged 17½ - 18

Referrals for young people aged 17½ and over can be made directly to the Adult Autism Spectrum Service.

Adult Autism Spectrum Service  
25 Erleigh Road  
Reading  
Berkshire  
RG1 5LR

Call: 0118 929 6477

### How to make a referral for autism assessment

We need confirmation that the steps outlined above have been completed before we can accept a referral. Once we've received this, we'll need additional information from the main carer(s) and/or the school for us to assess if the child or young person is appropriate for a referral to the Autism Assessment team.

If the young person is accepted for an assessment, this pre-assessment information is vital in helping us decide about diagnosis at a later stage.

If the information doesn't support an assessment, we'll advise the family or carer what support or assessment might be more appropriate. This reduces the chance of a young person attending an assessment they don't need, and will allow them to access the right support much quicker.

### Screening questionnaire

Professionals who are unsure about referring can complete a screening questionnaire ([AQ-10](#) or Q-CHAT for children 18-24 months). Ideally, this should be completed by professionals (such as teacher, SENCO or health visitor) who know the child best.

### Waiting times for an autism assessment

All referrals received by Child and Adolescent Mental Health Services (CAMHS) are triaged for current clinical risk and prioritised on that basis. Young people at high levels of risk are offered an assessment quickly and will be seen within a few weeks.

Currently, the longest time a family would wait for a routine assessment is 24 months. However, the recent investment in CAMHS services is reducing this, and by October 2017 it will be a maximum of 18 months. Average waiting times in 2016 were just over a year.

### Improving support while awaiting assessment

In November 2014, the number of referrals being made to the Berkshire CAMHS Autism Assessment Service was far outweighing the capacity for assessments. The result was a growing waiting list with children and young people having little access to support while waiting for their assessment.

To address the problem, we, along with the support of our commissioners, have taken steps to improve support for children and carers while they're awaiting assessment, to reduce waiting times, and to improve signposting for support.

