

The ASD/ADHD Pathway for Children in Peterborough

Frequently asked questions for parents



1. What is ADHD?

Attention Deficit Hyperactivity Disorder (ADHD) is a group of behavioural symptoms that include inattentiveness, hyperactivity, and impulsiveness. Common symptoms of ADHD include a short attention span or being easily distracted, restlessness, constant fidgeting or over activity and being impulsive.

2. What is ASD?

Autistic Spectrum Disorder (ASD) is a developmental disorder of communication, social interaction and restricted, repetitive and stereotyped behaviours.

3. What is the ASD/ADHD pathway?

The ASD/ADHD pathway means that before a child is referred to the specialist Children's Neurodevelopment Service, the child and the family has received Early Help support.

This begins with an Early Help Assessment ((EHA) which is completed by a lead professional working with the child/family (this is most likely to be your child's school or school nurse but may also be a youth worker or health care professional. It is important that as a parent/carer your voice, and that of your child, is voiced and heard throughout the assessment.

Following the completion of the EHA (Early Help Assessment) your experiences will be looked at in an Early Help panel meeting called MASG (Multi Agency Support Group) which is attended by various agencies and support groups to ensure you are offered the most appropriate support. It may be recommended to attend an Evidence-Based Parenting Programmes. These are run by experienced trainers, in a supportive setting,

We offer delivery of the parenting programme in groups and online in the hope parents/carers learn helpful tips and behaviour management strategies that can help improve life in the home or/at school. Once a course has been completed you will have six weeks to explore the strategies at home to see if they have empowered positive change.

If after this period there are still concerns, raised at home and/or in education feedback from the parenting course can be considered as evidence of the need for a further neurological assessment.

4. I just want to access the General Development Assessment (GDA) – How do I do this?

A general developmental assessment (GDA) is used for primary aged children where there is concern about Autism (ASD/Autistic Spectrum Disorder) or ADHD.

It is used to collect background information about the child/young person to enable paediatricians decide if a specialist assessment is needed.

A paediatrician will take a detailed developmental history and review all the information from the early help assessment, school and other information submitted. If they feel that a more specialist assessment of ADHD/ASD might be needed they will discuss/send a referral to the neurodevelopmental team who will then review the information and decide whether to progress the assessment or decline the referral.

GDAs (General Development Assessments) are not appropriate where concerns are about learning, behaviour, speech or coordination, as there are other services who provide these assessments.

5. Why does it need to be an ‘Evidence-Based’ Parenting Programme?

There are many parenting programmes that are available. However, not all programmes can evidence the strong impacts this the course has had on a family.

In Peterborough we run Webster Stratton, The Incredible Years, and the Triple P parenting programmes. These have been selected because there is a strong evidence base and research to demonstrate the positive improvements for parents accessing the programme and identifies positive change within their child and family unit.

6. If I have already completed an Evidence-Based Parenting Programme, will I have to do another one?

No – if you have completed an EBPP in the last three years you should not have to complete another one. However, the parenting programme must be a recognised EBPP (either Webster Stratton Incredible Years, or Triple P) and delivered by an appropriately qualified professional.

You will need to make sure that the professional working with you through early help knows that you have already completed an EBPP. Clear information about this needs to be included in the Early Help Assessment. Where possible make note of when and where you attended the course and any outcomes of the programme for you and your family.

7. What if there are no improvements after finishing the Evidence Based Parenting Programme?

Once you have completed the EBPP there needs to be a period after completion of the course for you to use and embed and adapt the strategies that have been learned in the EBPP.

This would be expected to be a minimum of six weeks after completing the course. If you feel little or no positive change is experienced after this time a referral to the school age neurodevelopmental service may then be made by the lead professional working with you through Early Help.

You should expect some impact from the intervention, but if you or the professionals working with you still think that there is a strong suspicion of a possible neurodevelopmental disorder, then a referral can be made.

8. How do I go on to refer for a neurodevelopmental assessment if there are no positive changes following the EBPP, or are ongoing concerns or a possible neurodevelopmental disorder?

If you continue to have concerns and have not noticed any improvement after using the strategies delivered in the EBPP the lead professional working with you through Early Help can refer your case to the Single Point of Access for CAMHS (Child and Adolescent Mental Health Services).

The referral will need to include as much evidence as possible on why an assessment is needed, including why a diagnosis of ASD/ADHD is suspected.

Depending on the information submitted and presenting issues the referral will be passed to the Community Paediatrics Service for a General Developmental Assessment (for primary aged children) or direct to the Neurodevelopmental Service (for secondary aged youngsters). The teams will review the information and decide whether to accept or decline the referral.

9. What happens once a referral has been made?

Your case will be reviewed at a meeting by the Neurodevelopmental Service and Community Paediatrics Service, which happens once each week.

If the referral is accepted for an assessment, you will receive a letter letting you know what type of assessment has been recommended (GDA/ASD/ADHD or both ASD (Autistic Spectrum Disorder) and ADHD).

You will then be contacted for this assessment again once you reach the top of the waiting list letting you know the details of the appointment.

During this time, the information gathered through the EHA will be shared with the professionals involved to allow them to contribute their opinions.

10. What do I do if my referral is not accepted?

If a referral is not accepted, you can speak to your Lead Professional who can contact the relevant professionals and may consider making a re-referral for some further support

This could be provided via a school referral to the Emotional Health and Wellbeing Service.

11. Can my GP make a direct referral for a neuro-development assessment?

The recommended pathway for ASD/ADHD is initially to access Early Help via an EHA. Professionals most able to complete this EHA are staff in the school or nursery, a health visitor, or a school nurse. These professionals have a better knowledge of the child/young person and the family.

Often GPs do not know enough about the family to complete a detailed EHA, but are welcome to explore this and add information from a general health perspective.

12. What happens if my child/young person has a Child Protection Plan or Child in Need plan in place?

With your permission, the Child, and Family Assessment (CFA) completed by Children's Social Care as part of your child's plan can be used instead of the EHA.

In many of these cases your child/family social worker will be the Lead Professional. They will need to contact you to ask permission to share copies of assessments and plans with the most suitable team – Early Help or Neurodevelopment.

Sometimes it may mean that you could be asked to complete an EBPP as part of your child's CP/CIN plan.

13. What happens if I do not want to engage in the pathway?

The specialist services you are requesting access need as much information about the child/family as possible so that a clear and detailed assessment of your situation can be made.

However, this can only be done with permission and engagement of parents/carers.

It is important that you work with professionals to make sure there are no unnecessary delays in accessing support.

14. What happens if I am unable to attend the EBPP ie due to employment/transport/childcare?

We try extremely hard to make sure that our EBPP are accessible to as many families as possible. As well a face-to-face group session we offer virtual and online programmes.

We will continue to try to deliver flexible and accessible programmes where possible to enable parents/carers to access the support.