



Insights into an Autism and Related Disorders Clinic jointly run by NHS and Children's Social Care Services

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Who, what, where and why ...



- General Population: Autism affects approximately 1–2% of children (Baird et al., 2006; Roman-Urrestarazu et al., 2021)
- Looked After Children: Studies estimate 6– 12% prevalence (Meltzer et al., 2003; McGuire et al., 2022)
- Posited reasons for Higher Rates in looked after children:
 - Early trauma, neglect, and disrupted attachments
 - Genetic vulnerability and complex developmental histories
- Underdiagnosis is common: Behaviours often misattributed to trauma (Crane et al., 2021)

- Implication: Greater need for traumainformed, neurodevelopmentally-aware assessments in care settings
- Social care team keen to develop a service that prioritises their young people who often come to assessment later than children where SC is not involved
- In parallel, Paediatric team also wanted to find a way to prioritise these children for the same reason
- Set up a joint, fortnightly clinic for CLA and/or on CP plan
- 37 children and young people seen since April 2024 Reduction in wait : average: 228 days

Pre clinic: Social care team gather information; do learning assessment if necessary

Clinic: ADOS-2, ADI-R, (Connors, RCADS, CAT-Q, SDQ if necessary); feedback given on the day

 School observation arranged and further discussion with other professionals if conclusion cannot be reached Post clinic: Social care team support social workers to understand recommendations and implement these

They made me feel
welcome, it felt
comfortable, as long as my
child is comfortable that's
what mattered and he
seemed happy

The feedback was different to what I expected but it did make sense and at the end I felt happy with it

What do families say?

What was good about going to the autism assessment clinic?

Parent of 17 year old

What was not so good about the assessment

clinic?

They treated us with respect, and they seemed to listen to us and the concerns we had

This has been very important for me. There are many behaviours we now understand. Autistic kids behave differently, we did not understand them as well before the assessment

Parent of 15 year old

Nothing – it was all good actually.. It didn't feel that long of a wait

Parent of 6

year old

Nothing, they

Nothing, they gave a good service

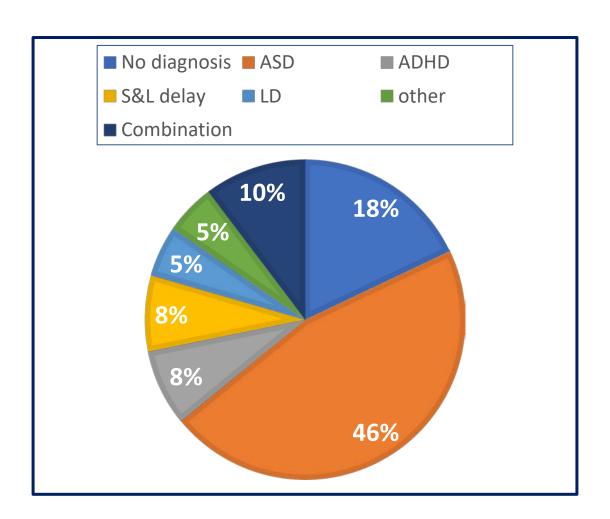
We've had the diagnosis but have not had any support yet, I really need support





Diagnostic tools and outcome

- It is rarely as simple as ASD/ADHD OR developmental trauma; often can be BOTH/AND
 - Learning difficulties/disabilities
 - Language Disorders
- Coventry Grid
- CAT-Q
- RCADS
- WISC
- ABAS
- School observations
- Speaking with other therapists/teachers/carers/support workers who know the young person well







How did we make this work?

- Cost neutral for NHS:
 - Social Care team proactively sought ADOS/ADI training under their budget
 - Extra clinic added into rota as part of NHS clinicians job plan
 - Honorary contracts between Social Care team and GSTT
 - Clinical governance from GSTT
- Commitment from social care team and willingness to be innovative with resources
- Communication and alignment of admin processes
- Future savings: accurate diagnoses and support; YP understanding themselves; considerations for future emotional wellbeing of CYP

