Referral Form

- Completed by a professional alongside parents.
- Forms will be screened by the co-ordinator and further information requested if needed.

Neurodevelopmental Pathway Panel

- Completed forms are discussed by a multi-agency information sharing panel and the young person's needs are considered.
- Outcome letter sent to parents and referrer.

Diagnostic assessment not appropriate

Comprehensive Initial Assessment

- Interview with parents, including differential assessment.
- Observation of young person, either in school or in a group.
- Outcome discussed within the team, and if indicated, specialist assessment is planned.

Specialist Assessment

- Specialist assessment components depending on the needs of each young person.
- Timetable of planned appointments shared with parents.

Multi-disciplinary Diagnostic Discussion

- Information from the specialist assessment is discussed and considered against the diagnostic criteria for ASD and/or ADHD.

Formulation Meeting

- Outcome of multi-disciplinary diagnostic discussion shared with parents (and young person).
- Final formulation and recommendations are co-produced.

Discharge

- Comprehensive report shared with all relevant parties.
- Transferred to CAMHS if ongoing treatment required.

Diagnostic assessment not appropriate

Ongoing support and intervention

Additional information:

1. <u>Referral Form</u>

Where a family have significant concerns that their child might have either ADHD or ASD, the first step is for them to discuss their concerns with a professional who knows the child well, ideally the school Special Educational Needs Co-ordinator (SENCo). The professional can then complete the referral form in collaboration with the parents. Referral forms should be e-mailed to the team, alongside any relevant reports or documents. If the form is incomplete, the referrer will be contacted and further information requested before the referral can progress.

2. <u>Neurodevelopmental Pathway Panel</u>

Completed referrals will be discussed by a panel attended by representatives from TEWV, the Education Team, Early Help and North Tees and Hartlepool NHS Trust. The team will discuss each young person and share relevant information. The team will identify any unmet needs that the young person is presenting with and decide whether a neurodevelopmental assessment is required.

3. Panel Outcome Letter

A letter will be sent to both families and the refer explaining the outcome of the Neurodevelopmental Pathway Panel meeting and identifying support that the young person can access from the Bubble of Support.

4. Information Gathering

Before meeting with the young person or parents, the neurodevelopmental team will make sure they have access to all the historical information about the young person.

5. Comprehensive Initial Assessment

Each young person will be allocated a Lead Clinician who will conduct the initial assessment with parents. This will be a thorough assessment, including developmental history, social history, a clear picture of the current presenting difficulties and it will screen for additional difficulties such as mental health problems, learning difficulties, trauma and attachment. If the child is old enough to engage, they will be also offered an initial appointment to hear their story. All young people will also be observed in school or in a group situation.

For some young people, it will become apparent following the initial assessment that a specialist assessment is not appropriate at that time. The young person will be discharged from the pathway with a formulation of their presenting difficulties and a plan for appropriate support and intervention that will be shared with the referrer.

6. Multi-disciplinary Assessment Planning

Once the initial assessment is complete, the young person's presentation will be discussed in a multi-disciplinary team. A specialist assessment will then be planned, depending on the complexity of the young person's difficulties. For many young people, this is likely to be quite a brief assessment, focussed in on either ASD or ADHD, as other possible explanations of the presenting difficulty have been ruled out. However, for children who are presenting with a combination of difficulties, the assessment will include more components, so that their difficulties can be fully explored and understood.

7. Specialist Assessment

Families will be provided with an assessment planning letter, with the components of the assessment outlined with appointment times. A provisional date for Formulation appointment will also be included in the assessment planning letter. The multi-disciplinary team will then conduct the components of the specialist assessment.

8. Multi-disciplinary Diagnostic Discussion

The information from the specialist assessment will be discussed within the MDT. A theory is developed that keeps the child's presenting problems at the centre and includes a broad picture of their strengths and difficulties. The diagnostic criteria for ASD, ADHD or both are considered at this point.

9. Formulation

The outcome of the MDT discussion is shared with the family and the final formulation is co-produced. The referrer will be invited to attend part of this meeting and they will then be able to share the outcome with school. The outcome of the assessment is documented in a written report and shared with all the relevant parties. This final report will include a plan for how the bubble of support can continue to support the young person now that their difficulties are better understood.

10. Discharge from Neurodevelopmental Service

Once the assessment is complete, all young people will be discharged from the Neurodevelopmental Pathway. If additional mental health needs are identified, or if there is on-going treatment for ADHD, they will be referred into the appropriate CAMHS team to access "Getting Help."