

## Care pathways for Referrals & Diagnosis of ASD

### Referrals

- All children should be seen by a Community Paediatrician for a Neurodevelopmental assessment before a referral is accepted to the CCDS.
- Only core team members of CCDS (senior community paediatricians, specialist speech and language therapists (SSLTs) and specialist psychologists) can make direct referrals to CCDS to ensure the demand is managed effectively and to ensure judicious use of limited resource.
- If the concern is mainly language delay the child should be referred to SLT in the first instance. If SLT is concerned the child could have significant social communication difficulties they will seek a specialist opinion from the SSLTs who are core members of CCDS. It may be appropriate at this stage to also refer to the Community Paediatrician.
- If the concern is about emotional, behavioural and/or mental health difficulties follow the CAMHS referral pathway.
- If there are social communication concerns in school, the school may want to seek the advice of the Education Psychologist, the Social Communication Disorders Support Services (SCDSS) or the Behaviour Support Team in the first instance. Referrals from schools to the CCDS will only be accepted if the referral is counter-signed by the SCDSS or the Education Psychologist.
- For children where there are concerns about comorbid psychiatric disorder or queries about differential diagnosis (eg OCD, social phobia, attachment disorder), consider referral to CAMHS.

### Referrals



### Stage 1

#### **Neurodevelopmental Assessment**

& investigations (see Appendix 2)



### Stage 2

#### **Referral to CCDS**

2 team members assigned (CCP + SSLT or,  
CCP + specialist psychologist)

Multidisciplinary assessment of the features specific to Autism Spectrum Disorders based on parental interview and observation of the child.



### Feedback of the diagnosis & plan of actions