



# CASE STUDY



North West

CHILDREN AND YOUNG PEOPLE'S DISABILITY PARTNERSHIP  
(NHS STOCKPORT/LOCAL AUTHORITY) IN PARTNERSHIP WITH STOCKPORT CHILD  
AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS) PENNINE CARE  
AND PSYCHOLOGY STOCKPORT LOCAL AUTHORITY

# SCHOOL AGE PATHWAY FOR AUTISM SPECTRUM CONDITIONS

## SUMMARY

- A multi-agency group led by Stockport's Children and Young People's Disability Partnership came together to improve service provision for school age children with autism. They established a multi-agency assessment and diagnostic team which allows staff working in mainstream placements to access services efficiently and be involved in the work up with families they know
- The project started in 2007 and by 2009 waiting times reduced to a mean of 4 months from allocation on the assessment waiting list, reflecting increased trained staff available to implement diagnostic assessments (Autism Diagnostic Observation Schedule-ADOS and Autism Diagnostic Interview-ADI) despite the referral rate increasing from 45 per year to 150 per year
- Before this project Stockport PCT started from a position way behind local comparators in service provision. There were 2 waiting lists for diagnosis of Autism one via Child and Adolescent Mental Health Services (CAMHS) and one within Speech and Language Therapy (SLT). Due to historic arrangements these services were working in isolation, and in 2006 children were waiting up to 2 years for assessment



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# CASE STUDY

## KEY OUTCOMES

- The project started in March 2007, initially the 2 waiting lists were combined and the new school age pathway was in place with multi-agency assessment by January 2009
- Comparison of diagnostic data from June 2003-2006 and an audit for the 6 month period from 1 January 2009 to 30 June 2009 demonstrates an increase in the number of school age children diagnosed with multiple diagnoses associated with Autism Spectrum Conditions e.g. Attention Deficit Hyperactivity Disorder. This reflects the change in the assessment and diagnostic process from single agency to multi-disciplinary CAMHS assessments and the improvement in diagnosis taking into account a wider range of issues
- Staff have developed their understanding of each other roles and gained knowledge across the process which has improved diagnostic skills. Working together has improved the job satisfaction for staff as the children require holistic approaches which can not be achieved by working in isolation

## WHAT WAS DONE

- The project was steered by a multi-agency group led by the Children and Young People's Disability Partnership. The group consisted of representation from:
  - o Speech and language Therapy
  - o CAMHS
  - o Occupational Therapy
  - o Paediatrician
  - o Educational Psychology
  - o National Autistic Society (NAS)/Parent rep
  - o Inclusion Co-ordinators

## BACKGROUND AND CONTEXT

Stockport PCT was not meeting national autism plan guidance. Two points of entry to the service were resulting in duplication, delays and inequity resulting in poor feedback from service users.

The project aimed to:

- Reduce the waiting times for assessment and diagnosis
- Agree a single point of entry and pathway for assessment and diagnosis
- Create a 'virtual team' within existing resources and with each service contributing their specialist skills in this area, ring-fencing their time to commit to this pathway
- Ensure that all children had received the appropriate work up prior to assessment
- Agree a standard set of pre-referral screening tools for schools and mainstream therapists and educational psychologists to use
- Develop a training package for awareness

Challenges to overcome included:

- Involving all partners, getting them to commit to multi-agency working and ring-fencing specialist input
- Agreeing areas of expertise and respective roles and responsibilities to avoid duplicated effort
- Overcoming concerns about confidentiality between CAMHS and other services
- Plugging the educational psychology gap in the assessment process

- o Portage
- o Child development unit specialist nurse
- o Primary Behaviour support services
- o Social Care
- o Special Educational Needs Team

The group started by identifying the gaps in current provision and the issues

- from the perspective of service users and services. Following this the group was involved in base lining the current provision against the national audit for autism. These results were analysed to identify where change was needed

- The national Autism plan was used to create the local pathway
- Each member of the group was involved in creating consensus decisions about the nature of the pathway and how this would work in practice
- The services developed a matrix of the provision, identified duplication and agreed the key services to take on specific roles to reduce the duplication



# CASE STUDY



North West

- Heads of service were asked to define what time commitment could be committed to the pathway to be based at CAMHS for school age children
- Clinical members of the team were advised on the screening tools to be used
- The children and young people's disability partnership board received feedback about progress and agreed proposals for services to be re-organised to create the virtual team
- NAS advised on the standards and the provision elsewhere in the Northwest
- Sub groups were set up to create the common screening tools, permission forms for the assessment and sharing information. A sub group including the parent rep was involved in writing the training package on awareness raising about autism
- Clinicians helped to make the case for ring-fenced time commitment by calculating the time per week

they were currently spending with children with suspected autism. The Group explained to service managers that actually this time was already being spent and that if the professionals could work together there would be economies of scale and so more children would be seen in the same time

- Concerns about confidentiality were overcome by involving the clinical governance adviser of the PCT, having a training session on consent versus permission, and by agreeing a leaflet and permission form that would be signed by parents during the screening and work up pre-referral
- Commissioners were able to fund 3 educational psychologists to be trained in the diagnostic tools in order to 'plug the gap' in the assessment process
- The multi-agency group remains in place to check development of the pathway and to ensure the agreement is still in place

- The group takes responsibility for auditing progress and is the forum for front line practitioners to send their concerns to when they observe deviations from the agreed pathway

## KEY LEARNING

- The project was developed on the understanding that services were making a long term commitment to the creation of a team. Setting this as a criterion from the start has reduced the risk of this ending as a short term project only
- The improvements were made by a shift in working processes without additional funding

## CONTACT FOR FURTHER INFORMATION

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