# **NCHC ASD Diagnostic Pathway**

For families with a Norfolk GP

... some exceptions

NSFT also diagnose

...and Private Clinics

# Creation of pathway in 2012 led to increased awareness and referrals

Avge 380 accepted for ASD assessment each year

Assessment evidence needs min 2 settings, and 2 practitioners

Pathway also provides post diagnostic support and training, in partnership with ECCH and NCC

Some assessments require many contacts to gather information

In mid 2017 only 4 wte NCHC staff assigned to Pathway work

## Consequences of resource gap

Families: unacceptably long waits, not able to use diagnosis to get additional support, high risk of secondary behaviour issues

**Commissioners:** 

complaints, unfavourable press coverage, high scrutiny from HOSC

**NCHC:** Complaints, high cost in manager time, risk to reputation

Pathway struggled with low resource from 2012 to 2017

## What happened next?

- Commissioners and NCHC produced a business case in August 2017
- New investment agreed in Sept 2017
- Recruitment of OT, Nursing, SLT to address the backlog of assessments and to provide sufficient resource to keep within an 18 week waiting time
- Positive Behaviour Support offer to all ASD waiters

## What has changed?

#### **November 2017**

- 396 uncommenced
   ASD assessments
- Half waiting over 52wks
- No offer of PBS
- No offer of OT. Limited sensory assessment
- ASD pathway embedded within NDS

#### Feb 2019

- 105 uncommenced
- 0 waiting over 52 weeks
- 30 waiting over 18 wks
- improved patient flow as a result of process change and scrutiny
- NDS staff able to support ASD. Teams working together

## Other Changes in Dec 2018

Most assessments now done by a single clinician

Introduction of Teleconsultation for families

Wider range of staff at every stage of assessment

Review of report-writing process

Development of own postdiagnostic support programme for ASD. Puffins is now being evaluated

School referral pilot

# What about Healthwatch report?

Lack of awareness about ASD across all health and social care services

Better communication is needed with families

Lack of support
available especially
Waiting rooms were
after diagnosis of ASD

commonly referred to as noisy and unsuitable for children with ASD

Waits for an ASD diagnosis are too long

## What NCHC did in response....

**ASD Awareness:** Clinical staff are familiar with ASD and how to make reasonable adjustments. Guidance for all staff has been added to website

Waiting areas: NCH areas were co-designed with users. Now reviewing the option of changing one of the quiet rooms into a low stimulation waiting space

**Better communication:** Plain English guide to Pathway has been added to website. Telephone consultation for new referrals to NDS

### Cont'd....

Lack of support after diagnosis: January 2019 NCHC trialled a new 5 workshop programme, covering strategies for sensory, communication and behaviour, and advice for helping at school

Waits too long: reshaped assessment process – wider range of staff involved at key points will increase capacity. Sharing staff resource within NCHC to enable more assessments. Working with NCC and Private sector to share resource. Targeting 2 key pressures: reviewing assessments and giving diagnosis.

**Recruitment:** active programme

## **Interventions**

- Medication initiation/review
- ADHD Parent Groups
- Cygnet/Early Bird/ Puffins
- Groups for children