

Children and Young People's Neurodevelopmental Assessments

Oakdale offers neurodevelopmental assessments for autism, ADHD or both combined.

This guide will help you to understand all the parts of the assessment, what will happen and who will be involved.

1. INFORMATION GATHERING QUESTIONNAIRES

Your child / young person's assessment begins by gathering up to date information.

- An online questionnaire is sent to parent carers to complete.

 If you would prefer a paper copy, this can be arranged instead.
- Completing the questionnaire tells us about your child / young person's current circumstances, their background and gives you a chance to share their strengths as well as your concerns and worries.
- Responses are recorded in electronic clinical records and are an important part of our assessment process.
- If you need help with the questions, we encourage you to seek support from someone familiar with your child/young person, such as a relative, teacher, or health professional.
- A questionnaire is also sent out to your child / young person's education or childcare setting so they can share their views on how your child / young person is doing there and about how they interact with their peers. If your child is home-schooled, we usually try to gain this view from another involved professional, if possible.
- Any further relevant reports, letters or information from their education or childcare setting and other professionals involved are also requested at this stage.

2. PARENT CARER CONVERSATION

An appointment with one of our clinical team.

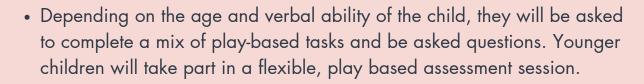
- This is usually a virtual appointment for parent carers.
 Children / young people do not attend.
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- Where both parents are involved in the assessment process, we ask that they attend together. If this is not possible, for example, due to a court order, please let us know so that we can plan to speak with both involved parent carers separately.
- This is an opportunity for the clinician to find out more detailed information about your child / young person, including a developmental history, and for you to ask questions.

"I was nervous before the parental interview but I was really put at ease by the clinician who made the experience much better than I was expecting!"

3. OBSERVATIONAL ASSESSMENT APPOINTMENT

This takes place face to face with your child / young person in one of our centres.

- Children under the age of 16 years and young people who are vulnerable or lack capacity must be accompanied to the centre by a parent carer.
 - For younger children, usually the parent carer will stay in the room. For older children / young people, typically once they are comfortable, you would be asked to leave the room but remain in the building during the appointment.
- Assessment appointments are carried out in accordance with NICE guidelines (National Institute of Clinical Excellence).
- For autism assessments, all our practitioners are qualified and experienced in delivering the ADOS-2 (The Autism diagnostic Observation Schedule-2). For ADHD assessments, there are several ways that the observation aspect can be offered, depending on the child / young person being assessed.



Our team includes Psychologists, Speech and Language Therapists,
 Occupational Therapists, Clinical Nurse Specialists and Senior Mental
 Health Practitioners who work collaboratively to provide comprehensive
 assessment and support.

"The clinician was clearly very skilled at her job in putting my child at ease and they had a great time in the assessment."

ADDITIONAL APPOINTMENTS OR FURTHER INFORMATION

At Oakdale, each assessment is unique because we tailor to the individual child / young person. Some cases require more appointments and observations such as a school observation, cognitive assessment or Qb check. Find out more about additional appointments that are sometimes offered below:

- For a childcare / education setting observation, one of our team visits your child / young person's setting and observes how interact with others in the place they are in.
- The Qb Check is delivered in one of our clinics and is the only CE marked and FDA approved aid for assessing and evaluating ADHD. It is designed to give objective and unbiased information to clinicians, supporting reliability in assessing ADHD.
- Cognitive assessments are occasionally offered to help us decide whether a child / young person's presentation is best explained by a diagnosis of autism and / or ADHD or whether something else might better explain the way they present.

What is a Cognitive Assessment?

Cognitive assessments are formal assessments that aim to identify areas where an individual has strengths and those that they may have more difficulty with. Oakdale administers the Wechsler Intelligence Scales to assess cognitive abilities including concept formation, visual spatial processing, inductive reasoning, working memory, and speed of information processing. It can be completed without any reading or writing and the time required to complete this assessment depends on the age and concentration ability of the child.

As part of a cognitive assessment, Oakdale also offers an assessment of adaptive behaviour using the ABAS-3 (Adaptive Behaviour Assessment Scale). The ABAS-3 is an assessment tool used to assess the functional skills necessary for daily living. This includes assessing a wide range of skill areas including: communication, community use, self-care, leisure, social, motor, functional academics, self-direction and health and safety.





4. FORMULATION BY THE CLINICAL TEAM

Formulation is the stage where all the information is considered together and a decision is made about whether a diagnosis of autism and / or ADHD is agreed or not.

- Parent carers, children and young people do not attend this stage but it is a key part of the assessment.
- Once all appointments are complete, the multi-disciplinary team meet and review all the information gathered. They consider all the information against the DSM-V* criteria and decide whether there is enough to make a clinical decision about whether your child / young person does or does not meet criteria for a diagnosis of autism and / or ADHD.



• This is sometimes called a panel meeting. It can take between 4-6 weeks to arrange and, following the meeting, further information may be required if a decision cannot be reached. If more information is required, this will be gathered and the team will need to meet again at a later date.

JARGON BUSTER: The DSM-V is the clinical manual we use.

5. FEEDBACK APPOINTMENT

A virtual appointment to share the outcome of your child / young person's assessment.



- This is a virtual appointment is for parent carers. For older children / young people it can be helpful for them to be present too.
- The clinician will explain the outcome, the reasons for the outcome and agree recommendations with you.
- This is a good opportunity to ask questions.
- Usually this appointment is with the lead clinician. Typically the lead clinician is the person who carried out the parent carer conversation.

6. WRITTEN REPORT

After the feedback session, our clinical team will spend time putting together a detailed written report.

- The assessment report includes s a summary of all the information gathered and the outcome. We also provide recommendations.
- The written report will be sent to you a few weeks after the feedback session and will reflect the discussion you had in the feedback appointment.
- We normally advise that a copy of the report is shared with the child / young person's GP and education / childcare setting. This would be discussed with you in the feedback meeting.

"Thank you for being so helpful and approachable and making the whole experience a stress free and positive experience."