

PREPARING FOR A MEDICAL ASSESSMENT

This section is designed to help prepare you for any consultation with a health professional, from your GP, to a Paediatrician, to a Therapist, or any other health professional you may meet on your journey. There is a common misconception that assessments for ND conditions are a destination point or a one-off occurrence. However in reality, the assessment is a continuum, and the reports and feedback from the settings your child or young person is at form part of the holistic assessment.

It is important that you are prepared for the assessments.

You may wish to write down concerns prior to the appointment and there are some templates that can be completed to support you share information that is relevant so you don't have to repeat your story and history repeatedly. At the end of this section, there is an example of a template you can complete and print to give to any health professional you are meeting with.

WHAT SHOULD I TAKE WITH ME FOR THE APPOINTMENT AT THE LIGHTHOUSE CENTRE?

<input type="checkbox"/>	If you have completed the template at the end of the section, take a printed copy with you. It would be a good idea to make a list of all of the things that concern you about your child's development or behaviour.
<input type="checkbox"/>	You ask family members or anyone who spends time with or works with your child if they have any concerns; add these to your list.
<input type="checkbox"/>	If your child is young, take your Red book that has all the details of your child's vaccines, height, weight, etc.
<input type="checkbox"/>	Write down any questions that you might want to ask. It is very easy to forget these when you get into the appointment!
<input type="checkbox"/>	Take a pen and paper with you to take any notes. If the health professional has sent you any questionnaires to complete, take these with you.
<input type="checkbox"/>	If you have copies of any previous assessments at school eg by EP or school reports, please take them with you to the appointment
<input type="checkbox"/>	You may ask your School SENCO to come to the appointment with you if able to.



What will happen during the appointment?

The Paediatrician will be able to explain to you what will happen throughout the assessment process. There is no set procedure as every child is different.

They are likely to;

- ▶ Take both your child's and your medical history and ask you questions about your pregnancy and your child's birth.
- ▶ They will ask you about what concerns you have about your child.
- ▶ They will ask you questions about your child's development and if they have regressed (gone back to an earlier development level) at all.
- ▶ They will observe your child and how they interact with you or any family members you have brought to the appointment and may try to interact with them themselves.

They may say that your child needs to have a genetics test, which is a blood test that will look for any indicators of genetic illnesses that share some characteristics with ND conditions. This is just to rule them out because you cannot diagnose ND conditions with a blood test or with a scan, so the Paediatrician has to rule out anything else that it could be before they can make a diagnosis. If your child is under five years old, they may put them on the Under 5's Autism Pathway. This is the series of steps you may undertake from start to finish of your Autistic diagnosis journey. They may ask you to complete a Connors Questionnaire that asks different questions about your child's development, behaviour, communication, social interaction, etc. They may send one to your child's nursery or school (if they attend one) to complete. This will give the Paediatrician as much information as possible before they make a diagnosis.

If your child's development levels are pretty behind in different areas, they may refer you to have a Griffiths Developmental Assessment. This is where a Paediatrician plays with your child, using various toys and activities to see where each of their developmental levels are and where your child needs the most support with improving their developmental levels.

If your child's needs appear to be quite complex, they may refer you to have a Multi-Disciplinary Assessment (MDA). This is where several different professionals (a Paediatrician, a Speech and Language Therapist, a Physiotherapist, an Occupational Therapist, and a Clinical Psychologist) will watch your child play; how they interact with others, what their behaviour is like, what their communication is like, etc. After that, they have a meeting and make a diagnosis based on their observations, any reports from other professionals (Health visitor, Senco, etc.), any other assessments completed, and the information you have provided on your child's medical history.

MEDICAL APPOINTMENT TEMPLATE

CHILD OR YOUNG PERSON'S DETAILS

Surname:		Address:
First Name:		
Preferred Name:		
Date of Birth:		
Gender (tick box) Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say <input type="checkbox"/>		Postcode:
		Telephone No:

PARENT OR CARER DETAILS

MR/MRS/MS/MISS	Surname :	Address:
First Name:		
Preferred Name:		
Date of Birth:		
Email Address:		Postcode:
Home Telephone No:	Mobile Telephone No:	

EDUCATION DETAILS

Name of current School/Nursery/Education setting. If Home Education, Please state this:	
Address:	
Length of time in current School/Nursery/Education setting:	Home Telephone No:
Has their current School/Nursery/Education setting/Childcare raised any concerns with you about your Child or Young Person? If YES, Please list the concerns they have raised:	

MEDICAL HISTORY

What other Health Professionals work with your Child or Young Person currently?

Does your Child or Young Person have any diagnosed medical conditions?

Does your Child or Young Person take any prescribed medication? If YES, Please list name, dose and frequency that they take them.

Name

Dose

Frequency

Have they spent any time in Hospital since birth?

Does your Child or Young Person have any allergies?

YES ☐

NO ☐

UNSURE ☐

CURRENT CONCERNS

What are your current concerns about your Child or Young Person's development?

Have they reached all of the developmental milestones for their age? If not, Please list those they have NOT met, if known.

CURRENT CONCERNS Continued...

If they have siblings, did they experience delays in reaching any of their developmental milestones?

What are your current concerns about your Child or Young Person's behaviour? How long have the behaviour concerns been happening?

Have they experienced stress, trauma or bullying before or during the time that you have become concerned about their development or behaviour? (This could include moving home, a death in the family or a pet, changing School, etc).

Did they have an accident or injury before or during the time that you have become concerned about their development or behaviour?

GENERAL HEALTH

How much does your Child or Young Person sleep at night?

Do they experience any sleep difficulties? (Falling asleep, staying asleep, nightmares, night terrors, etc).

Would you describe their general health as good? (Do they get ill more frequently than others, etc).

Toileting - Do they experience any difficulties with toileting? (Frequent diarrhoea or constipation, incontinence, inability to tell when they need to use the toilet, frequent trips to the bathroom, etc).

How would you describe your Child or Young Person's eating habits? (Do they eat a range of different foods? Do they eat regular meals everyday?).