## **David Burton-Sampson**

Member of Parliament for Southend West and Leigh House of Commons, London SW1A oAA

Tel: 020 7219 7745

Maggie Cleary SEND the Right Message

Our Ref: DB01618 19 November 2024

Dear Maggie,

Thank you for taking the time to talk to me about the issues facing the local SEND community. I found it to be a very valuable conversation and I look forwards to seeing you again at the Christmas event on 14th December.

As you will remember, we discussed referral pathways for children to receive an autism or an ADHD diagnosis, and the requirement imposed by several local GPs that schools must be involved with this referral, which you believed was against NICE guidelines.

I have written in the first instance to NICE, asking them to clarify the guidelines in this matter. They have recently got back to me with the following response.

We have not made a recommendation in either guideline that the referral for an assessment must specifically come from a school, or specifically from a GP.

We have recommended within guideline CG128 (recommendations 1.4.5 onwards) that:

- 1.4.5 If there is insufficient information to decide whether an autism diagnostic assessment is needed, gather any available information from healthcare professionals. With consent from parents or carers and, if appropriate, the child or young person, seek information from schools or other agencies. [2011]
- 1.4.6 If there is uncertainty about whether an autism diagnostic assessment is needed after information has been gathered, offer a consultation to gather information directly from the child or young person and their family or carers. [2011]
- 1.4.7 Once it has been decided to carry out an autism diagnostic assessment, with consent from parents or carers (and the child or young person if appropriate):
  - seek a report from the pre-school or school if one has not already been made available
  - gather any additional health or social care information, including results from hearing and vision assessments

Within guideline NG87 within the subject of identification and referral which begins on page 10 we have recommended:

- 1.2.5 Referral from the community to secondary care may involve health, education and social care professionals (for example, GPs, paediatricians, educational psychologists, SENCOs, social workers) and care pathways can vary locally. The person making the referral to secondary care should inform the child or young person's GP. [2008]
- 1.2.6 When a child or young person presents in primary care with behavioural and/or

attention problems suggestive of ADHD, primary care practitioners should determine the severity of the problems, how these affect the child or young person and the parents or carers, and the extent to which they pervade different domains and settings.

NICE have made clear to me that they are not able to deal with complaints and have suggested that I contact Healthwatch as a next step, who might be able to provide specific advice or assist with escalating this further. I am very happy to contact them, sharing the letter you have sent me, this with your permission

Please do let me know how you would like to proceed with this matter and I will see you next month.

Kind regards,

David Burton-Sampson Member of Parliament for Southend West and Leigh