

Guidance for completing the referral form for the Specialist Assessment Service for Children presenting with a possible ASD

- **We need a wide range of information.** *The information forms part of our assessment process and helps us understand the child's presentation in school and at home.*
- **GPs and other medics are not expected** *to complete the referral form as they will not know all the information required. Instead GPs and Medics can give the parents a copy of the referral form from this site and write a supporting clinical letter if they wish. Parents should then complete the form in full in partnership with the school Special Educational Needs Co-ordinator.*
- The child/young person **must be aged between 0 years and 17 years 11 months.**
- The child/young person must be registered with a **Solihull GP.**
- **We need information over a 6 month period** *(2 school terms) This does not mean that you have to wait 6 months before you submit the form. Parents and school need to look back over the last 6 months and tell us about adjustments or additional input that a child has received. It is important to tell us the outcome of these adjustments. This is needed so that we can understand a child's presentation over time and not just a snap shot of a child. The child cannot be accepted if this section is not completed fully.*
- **Section 8 Parent Consent** *This is very important we cannot proceed until we have consent from a parent.*
- **Section 26 Signatures.** *This is very important as we need to know who has contributed to the form*
- **Sections 18-25** *These sections are divided into 2 columns . One for the parents to complete and one for school or a professional working with the child to complete.*

