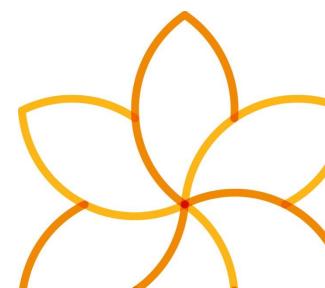




Post-diagnostic support in Wigan

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Background to service

- Pilot established in 2013 in response to Autism Act
- Initially commissioned as diagnostic service for adults (16+) in Wigan
- Service was developed to offer short-term follow-up after diagnosis
 - Limit of up to 8 sessions
- Developed for around 40 referrals
 - Now receive 160+ referrals per year
- Also offer post-diagnostic workshop
- Deliver training to Trust mental health teams
 - Include information on Reasonable adjustments
- Offer consultation in complex cases





Composition of team Boroughs Healthcare NHS Foundation Trust

- 1 WTE Clinical Psychologist
 - 1 dedicated practitioner
 - 4 other psychologist who input from LD Psychology
- All DISCO and/or ADOS trained

- Worked towards model of assessment with initial session with two practitioners to administer ADOS
 - Follow-up assessment to gather developmental information



1:1 post-diagnostic support

- Up to 8 sessions
- Non-urgent
- Only for individuals who have come through the diagnostic service
 - i.e., not those with existing diagnosis
- Formulation-led sessions which are focused on goals of the individual
- Taken up by around 60% of clients



Case study

- 35 year old woman
- Family history of ASD
- Attending university

- Sought assessment after supporting brother through service
- Goals to be able to cope with meltdowns; understand diagnosis; develop coping strategies



Diagnosis

- Reaction and acceptance
 - Felt empowered but angry that it had taken until adulthood to be recognised
 - Shared with some colleagues
 - Mixed reactions marked by lack of understanding
 - Initially felt compelled to hide difficulties
 - Understood role of shame
 - Initial exacerbation of anxiety and meltdowns





Dilemma

Tension between:

Being 'driven' Being 'driven' by societal norms

- Pros and cons at each end of the continuum
- Position would fluctuate depending on situations





Emotional toolkit

- Tony Atwood model
 - Collection of tools designed to help people deal with negative emotions
- Use of existing strategies:
 - Listening to certain song / watching television programme
 - Engaging in special interest





Emotional toolkit

- Development of new strategies
 - Mindfulness
 - Taking time out
 - Pacing
 - Social battery
 - Negotiating needs
 - At university and at home





Coping with sensory sensitivities



- Awareness of triggers
- Means of reducing overall arousal
- Compensatory strategies
 - Wearing headphones
- Exploring self-soothing
 - Utilising sensitivity for pleasant sensations
 - 'Yin to the yang'





Focus on strengths



- Driven and tenacious
- Strong sense of empathy
- High level of knowledge
- Retention of facts





Adaptations

- Aspects related to autism may affect therapeutic engagement
 - Can be hard to envisage change
 - Black and white thinking
 - 'Theory of mind'
 - Development of therapeutic alliance
 - Emotional awareness and recognition





Reflections

- Aspire to deliver autism-specific intervention
 - Added value to 'reasonably adjusted' CBT
 - Often presenting problems are related to anxiety and low mood
 - Should we be signposting to Think Well Being (IAPT)?
- Slippage due to limited provision of services
- Limit on sessions can be positive and negative
 - Maintaining focus v unfinished business
- Plan to deliver group interventions from menu of therapy options
 - Due to increasing service demands