HG Mind Works

NHS West Suffolk NHS Foundation Trust

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Getting ready for your child's assessment

For parents and carers

Delivered by HG Mind Works on behalf of West Suffolk NHS Foundation Trust

We know this can feel like a big moment.

Your child has been referred for an autism assessment by West Suffolk NHS Foundation Trust, and their referral has been passed securely to us – HG Mind Works – to carry out. This guide explains what the assessment is, what will happen, and how to help your child feel ready.

There's no rush. Take your time, read what's useful, and come back to the rest whenever you need to.

1. Why is my child being assessed?

West Suffolk NHS Foundation Trust's team has reviewed your child's referral and decided a full assessment is the right next step. The assessment is a chance for us to understand your child properly – how they communicate, how they play, what they find easy and what they find hard. We're not looking for what's wrong; we want to build a full, rounded picture of your child as an individual.

Being referred does not mean your child will be diagnosed with autism. It means the team felt it was worth looking more carefully.

"We're not looking for what's wrong.
We want to understand your child."

Who will we meet?

You'll meet a small team. First there's a short health check with one of our nurses, at a separate appointment before assessment day. On the assessment day itself, one clinician spends time with your child in a play-based session while another talks through your child's development with you. The wider team then reviews all the evidence together, and the report is signed off by the lead clinician who assessed your child.

2. What happens on assessment day?

What happens, step by step

Step 01

Register and book

Complete the registration form. We'll then phone you to book a nurse health check and the assessment.

Step 02

Assessment day

Two parts: an in-depth conversation with you and a session with your child. The nurse health check is a separate, earlier appointment.

Step 03

Clinical team review

Our multidisciplinary team reviews everything together, in line with NICE guidance. You won't get an outcome on the day.

Step 04

Written report

Sent to you by a secure email link, with the outcome and recommendations.

Step 05

Feedback video meeting

One of the clinicians who assessed your child talks it through with you. We email you a link to book.

Your conversation with us

The conversation with you While your child has their session, one of our clinicians sits with you for an in-depth conversation about your child's development, called the ADI-R (Autism Diagnostic Interview, Revised). It's a detailed, internationally recognised interview covering how your child was as a baby, how they've developed, and how they are now. It usually takes around 90 minutes.

It's a relaxed conversation, not a test – there are no trick questions and nothing you can get wrong. You won't be expected to remember every detail; the clinician will guide you gently. If another parent or carer who knows your child well can come too, that really helps – two people often remember different things.

Will I be in the room?

For most children, we ask parents to wait nearby during the child's session, because children often respond differently when a parent is in the room and we need to see your child's natural responses. If your child is very anxious or needs you there to feel settled, tell us beforehand and we'll work something out – they'll never be made to stay in the room if they're upset. If you do stay, we may ask you to sit to the side and not join in, just so we can see your child's natural reactions.

A note on face coverings

Please don't wear a face mask or covering during the session. The clinician needs to see your child's face and your child needs to see the clinician's – the session can't be completed reliably if faces are covered.

Video recording

With your permission, we may record part of your child's session so the clinicians can score the assessment accurately afterwards. It's only seen by the assessment team and isn't shared outside it. You can say no, and it won't affect anything about how your child is assessed.

Can't remember everything? That's completely fine.

The clinician will guide you through it gently. There's no pressure to have every detail at your fingertips.

If another parent, carer or family member knows your child well, it's worth asking them to come too - two people often remember different things, and that really helps us.

Your child's session - the ADOS-2

The play session uses a tool called the ADOS-2. This stands for the Autism Diagnostic Observation Schedule, Second Edition - but all you really need to know is that it's one of the internationally recognised gold-standard tools for autism assessment.

It's not a test. It's a structured observation - a set of activities and conversations designed to help the clinician see how your child communicates and relates to other people. Your child doesn't need to perform well or say the right things. There are no right or wrong answers.

"It is not a test. Your child cannot pass or fail. Whatever they do on the day is useful to us."

The activities might include toys, picture books, puzzles, pretend play, or just having a conversation - depending on your child's age and how they communicate. The clinician will lead gently, creating a relaxed space where your child can be themselves.

Please don't coach your child on what to say or do beforehand. We need to see them as they naturally are - that's what makes the assessment accurate.

Why does the session look different for different children?

The ADOS-2 has several versions, and the clinician chooses the right one before you arrive based on how your child communicates – you don't need to do anything. For children of this age it's usually one of the three below.

Version 1 **Little or no spoken language**	**Activities** Simple toys and everyday objects - bubbles, blocks, picture books	**What it looks like** The clinician plays alongside your child, gently inviting them to join in	**Why it helps** Shows how your child communicates without words - pointing, showing, reaching, eye contact
Version 2 **Some words and short phrases**	**Activities** Play tasks, simple stories, pretend play with toys	**What it looks like** Structured play that feels like a game - your child leads some of it, the clinician guides some	**Why it helps** Shows how your child shares ideas, takes turns, and connects with another person

Version 3	Activities	What it looks like	Why it helps
Fluent sentences (most children aged 6+)	Conversation, storytelling, describing pictures, talking about friends and feelings	More like a chat than a game - open questions, listening carefully	Shows how your child uses language to connect, explain, and understand the world

Don't worry about which version your child does - the clinician chooses it based on information already gathered. Whichever version is used, the clinician is looking at the same things: how your child connects with people, communicates, and experiences the world around them.

3. How to get ready

Getting ready for your conversation

The conversation will cover your child's life from birth up to now. It really helps to spend a bit of time before the appointment casting your mind back and pulling together whatever you can. Here are some things worth doing in the days before you come in:

✓ Before the appointment	
☐ Find the red development book if you still have it	☐ Look through old baby photos or videos
☐ Dig out old nursery or school reports	☐ Jot down early milestones you remember
☐ Note specific examples that are hard to put into words	☐ Write down any questions you want to ask
☐ Think about who else to bring - another parent or carer?	☐ Give the school a heads-up that an assessment is happening

During the conversation we'll cover things like:

- When your child first walked, talked, and hit other early milestones
- How they played as a baby and toddler
- How they communicate now - including pointing, gestures, and eye contact
- How they get on with other children and adults
- How they understand and show their feelings
- How they cope with change or things not going to plan
- What they're like with sounds, textures, light, and other sensory experiences
- Any topics or interests they're really absorbed in

One important thing to mention about school: as part of the assessment, we'll contact your child's school directly to ask for information about how they get on there. This is an important part of building a complete picture - behaviour and communication can look different at school than at home, and both matter. If you can give the school a heads-up that an assessment is coming and ask them to keep an eye out for our request, that really helps things move quickly.

Talking to your child about the appointment

We'd really encourage you to let your child know what's happening before the day. Children who have some idea of what to expect almost always find it easier. You don't need to go into lots of detail - something simple and reassuring is enough:

"We're going to meet some friendly people who want to find out about how you play, talk, and learn. There are no right or wrong answers. They just want to get to know you."

Depending on your child's age, you might also talk about their strengths, and the things they find harder. It can help to explain that everyone's brain works a bit differently - and that's completely okay.

On the day itself

✓ What to bring	
☐ Red development book (if you have it)	☐ Any old reports or records
☐ Your notes and questions	☐ A comfort item or fidget for your child
☐ Snacks and a drink	☐ Familiar, comfortable clothing for your child

- Try to make sure your child has slept well and eaten before you come
- Aim to arrive 15 minutes early - rushing makes everything harder
- Arrange childcare for other children if you can, so you can focus

4. What is the clinician looking for?

The ADOS-2 session, your conversation, and any reports from school are all looked at together. The clinician is building a picture across all of these - not just making a judgement based on one afternoon.

In simple terms, they're looking at two main areas:

How they connect with people

Things like:

- Starting and keeping conversations going
- Using and reading facial expressions and gestures
- Making and keeping friends
- Sharing attention and enjoyment with others

Patterns and routines

Things like:

- Movements or phrases they repeat
- Needing things done a certain way
- Very deep interests in specific topics
- How they react to sounds, textures, light or touch

For a diagnosis of autism to be made, there need to be signs in both areas - not just one. The assessment also looks at when these things first appeared, whether they cause real difficulty in everyday life, and whether there's a better explanation for what the team is seeing.

The assessment also considers whether your child has any other conditions alongside autism - such as ADHD, anxiety, or differences in how they process sensory information. These often go hand in hand and affect what kind of support is most helpful. The report will note anything significant the team picks up.

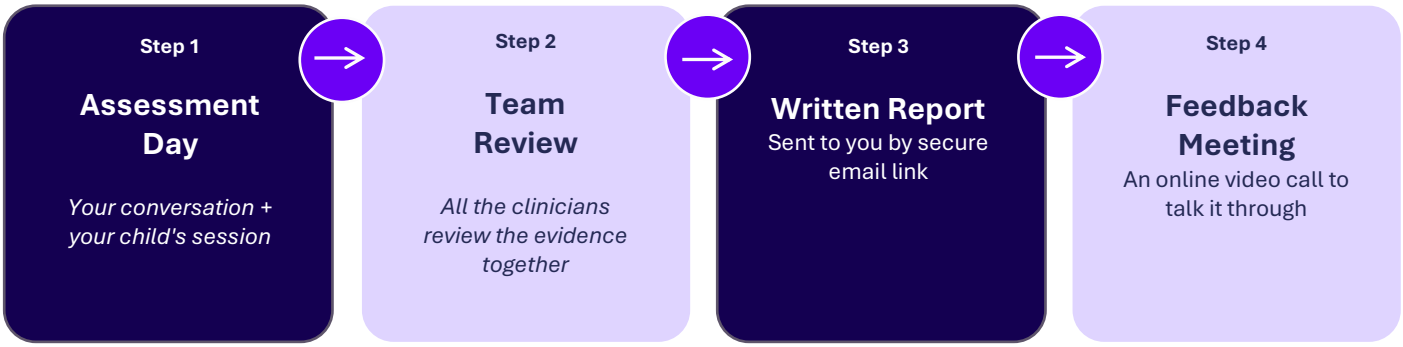
The diagnostic conclusion in your child's report will reference internationally agreed criteria (DSM-5 or ICD-11). You don't need to know what these mean right now - the clinician will explain everything at the feedback meeting in plain language.

> ***"Autism is a spectrum. Every autistic person is different. We're looking at your child's individual picture - not a checklist."***

One more thing worth knowing: the ADOS-2 session is just one piece of the puzzle. It's important, but it doesn't give us the full picture on its own. That's why we also talk with you in depth, gather information from school, and look at any other reports or records. The team reviews all of it together.

5. What happens after the assessment day?

Assessment day is not the end of the process - it's more like the middle. Here's what happens next:



Please don't expect to hear the outcome on the same day.
The team needs time to go through everything carefully. They usually meet in the same week, and the report follows about a week later.

The written report

Once the team has reviewed everything, we'll email you your child's report by a secure link. It covers everything that was looked at, the outcome, and any recommendations for support. It's signed off by the lead clinician who assessed your child.

A copy of the report also goes to West Suffolk NHS Foundation Trust, and to your child's GP if you'd like us to. The report is yours to keep and share - you can pass it on to your child's school, your local council, or any other service that needs it to help your child get the right support.

The feedback meeting

We'll also email you a link to book an online video feedback appointment with one of the clinicians who assessed your child, usually about a week after you receive the report. They'll talk you through what the assessment found and what it means for your child, with time for your questions. It helps to read the report beforehand and note anything you'd like to ask, and if you'd like a follow-up call afterwards, just ask.

If your child receives a diagnosis

The clinician will explain the diagnosis clearly - what it means, and what it doesn't mean. Every family whose child receives a diagnosis will be signposted to the WSFT post-diagnosis workshop as standard. This is a dedicated session run by West Suffolk NHS Foundation Trust to help families understand the diagnosis, what support is available, and what to do next.

You'll also receive information about other local and national support in your written report.

There is no right way to feel when you get a diagnosis.

Some families feel relief. Some feel sadness. Some feel both at once - or neither.

Whatever comes up for you is completely valid. You won't be left without support.

The report will help open the right doors for your child.

If your child doesn't receive a diagnosis

Not every child who goes through an assessment receives a diagnosis of autism - and that's not a failure. If the assessment doesn't find that your child meets the criteria, the clinician will explain what the evidence did show, and will talk through any other steps that might help.

6. Giving your permission - consent

You give your permission in the registration form. By registering, you're agreeing to:

- Your child being seen and assessed by our team
- The information gathered being used to reach a decision about diagnosis
- The completed report being shared with West Suffolk NHS Foundation Trust (who referred your child)
- Information being shared with school or other professionals only if you agree to that separately

Depending on your child's age and understanding, we'll also talk with them about what the appointment involves, and may ask for their agreement to take part too.

You can change your mind and withdraw your permission at any time - before, during, or after the assessment.

If you have any questions about how your information is used, please get in touch with us before the appointment.

Our contact details are at the back of this pack.

7. Practical details

Who should come?

At least one parent or carer who has known your child throughout their life needs to be there for the conversation. If two people can come - both parents, or a parent and grandparent, for example - that's even better. Different people often remember different things.

If you can, please arrange for other children in the family to be looked after elsewhere on the day. The conversation is much easier when you're not juggling other kids at the same time.

Do you or your child have any particular needs?

Please let us know before you come in if there's anything we should be aware of - in the registration form, or by calling us. This could be anything - needing an interpreter, significant sensory sensitivities that might affect your child in a waiting room, documents in a different format. We'll do everything we can to make the day as comfortable as possible for your whole family.

What if you need to rearrange?

Please get in touch as soon as you can if something comes up and you can't make your appointment. We'll offer you the next available appointment, which may be some time away. If a third appointment is missed, your child's referral will go back to West Suffolk NHS Foundation Trust.

8. Get in touch

Service	WSFT Autism Assessment Service
Provided by	HG Mind Works, on behalf of West Suffolk NHS Foundation Trust
Email	westsuffolk@hg-mindworks.com
Phone	020 8126 8767 (option 3), Monday to Friday, 9am to 6pm
Website	hg-mindworks.com/wsft

9. Helpful organisations

These organisations offer useful information and support. We're not affiliated with any of them - we just think they're worth knowing about while you wait for your assessment, and beyond.

National Autistic Society	autism.org.uk - information, advice and support for autistic people and families
NHS	nhs.uk/conditions/autism - plain English information about autism and getting support
Ambitious About Autism	ambitiousaboutautism.org.uk - for young autistic people and their families
Contact	contact.org.uk - support for families with disabled children, including help getting school support
Suffolk Family Carers	suffolkfamilycarers.org - local support for carers and families in Suffolk
Autism Anglia	autism-anglia.org.uk - local autism support across East Anglia

HG Mind Works

NHS West Suffolk NHS Foundation Trust

We look forward to meeting you and your child

If anything in this pack is unclear, or you have questions before you come in, please get in touch - we're always happy to help.

Get in touch with us

Address
hg-mindworks.com/wsft

Email
westsuffolk@hg-mindworks.com

Call
02081268767