Webinar

An interdisciplinary panel discussion

Collaborative care for children with an autism spectrum disorder

Wednesday 4th April 2012

“Working together. Working better.”

Supported by The Royal Australian College of General Practitioners, the Australian Psychological Society, the Australian College of Mental Health Nurses and The Royal Australian and New Zealand College of Psychiatrists
This webinar is presented by

Panel
- Dr John Wray
- Associate Professor Cheryl Dissanayake
- Professor Sylvia Rodger
- Professor Andrew Cashin

Facilitator
- Dr Michael Murray
This webinar is hosted by

- A Commonwealth funded project supporting the development of sustainable interdisciplinary collaboration in the local primary mental health sector across Australia
- Currently supporting over 450 local interdisciplinary mental health networks
- For more information or to join a local network visit www.mhpn.org.au
At the end of the session participants will be able to:

- Better understand the key principles of intervention and the roles of different disciplines in providing collaborative care to children with an autism spectrum disorder and their families

- Recognise the mental health risks for children with an autism spectrum disorder and their families

- Better understand the merits, challenges and opportunities in providing collaborative care to children with an autism spectrum disorder and their families

To find out more about CPD recognition visit [www.mhpn.org.au](http://www.mhpn.org.au)
Session outline

The webinar is comprised of two parts:

• Facilitated interdisciplinary panel discussion

• Question and answers fielded from the audience
Session ground rules

• The facilitator will moderate the panel discussion and field questions from the audience

• You can submit question/s for the panel by typing them in the message box to the right hand side of your screen

• You can also minimise the text box if you are finding it distracting using the arrows above and beside of the text box

• If your specific question/s is not addressed or if you want to continue the discussion, feel free to participate in a post-webinar online forum on MHPN Online

For further technical support call 1800 733 416
Session ground rules (continued)

• Ensure sound is on and volume turned up on your computer. If you are experiencing problems with sound, dial (toll free) 1800 142 516 on your telephone landline & enter the pass code 40151365#

• If you are having bandwidth issues (sound or internet lagging or dropping out) you can minimise this by clicking on the presenters webcams and pressing the pause button under their video screen. You will still be able to hear the presenters when you pause their webcams.

• Webinar recording and PowerPoint slides will be posted on MHPN’s website within 48 hours of the live activity

For further technical support call 1800 733 416
Paediatrician perspective

Initial presentation

- Jamie has features of autism spectrum disorder, with difficulties in communication, socialization and some unusual behaviours – this needs to be explained to the family. Indicate that outcomes are variable, but can be very good.

- Jamie has some significant behavioural and sleep problems which are impacting on the family. These should get immediate attention.
Paediatrician perspective

Next steps:

• Refer for diagnostic work-up.
• Refer for immediate behavioural and social support. Liaise with GP in relation to mum’s mental health needs.
• Offer to catch up with the father, if not present at first paediatrics appointment
• Give the family further resources – websites, written material

Dr John Wray
Psychologist perspective

Main areas of concern

Difficulty in social interaction/reciprocity
• he is a loner
• prefers to play alone with certain toys/activities
• wanders around; has difficulty settling for long at play activities with other children

Difficulty in language/communication
• speech is “not as comprehensive as Serena’s was at a similar age”
• does not respond to direct and simple commands
Main areas of concern

Restricted/repetitive interests; also note sensory features

• likes puzzles which he is very good at – specifically puzzles of trucks, cars, vehicles etc.
• developed preferences for certain clothes (soft fabric, specific T shirts, and track pants/drawstring shorts that are loose),
• picky with eating (prefers white foods such as rice bubbles, white bread, specific brands and does not do well with foods that require chewing)
• rarely eats fruit or vegetables (beyond potatoes and occasionally some creamed corn)
Psychologist perspective

Other concerns

Child
• doesn’t sleep well at night
• poor diet

Parents
• “avoidant” in dealing with concerns about Jamie
• Justin is delighted to have had a son; has high expectations of “his boy” so dismisses the concerns of child care as coming from people who are “unqualified”
• Sandra has been presenting more often than usual to her GP - complaining of sleeplessness, migraine headaches, loss of appetite and requesting medical certificates to account for days off work

Associate Professor Cheryl Dissanayake
Psychologist perspective

Assessments

Background
• Developmental/Family history with parent/s
• Social Communication Questionnaire (Lifetime version)

Assessment of child
• Developmental/cognitive assessment (Wechsler test: WPPSI; or Mullen Scales of Early Learning: MSEL)
• Behavioural Assessment: Autism Diagnostic Observation Schedule

Parental Assessment
• Depression, Anxiety and Stress Scale (DASS-21)
• Child and parent sleep
Psychologist perspective

Referrals

• Speech Pathologist (language & communication concerns)
• Occupational Therapist (sensory issues; other)
• Early Intervention Provider
• Autism Specific Information
  o State Autism Peak Body (Autism Advisor)
  o HCWA Package: Early Days Workshops; Play Connect playgroup; Raising Children Network autism site for evidence-based information
• Psych Counselling
Psychologist perspective

Early identification and Intervention

• Early identification of risk processes → intervene → prevent full symptomatic picture
• Early intervention → minimize disruption of neural development → foster typical development
Occupational therapist perspective

- Occupational therapy focuses on:
  - enhancing an individual's participation in meaningful life roles, and
  - optimising performance of daily occupations such as self care, education/work, play/leisure, and social participation.

Professor Sylvia Rodger
Occupational Therapists assist children:

- To overcome challenges with daily activities, or occupations, eating, dressing, toileting, playing with others, or participating in play-group, pre-school or school.
- To manage the sensory sensitivities and processing issues, behavioural and coordination difficulties that often accompany ASD.
- Through using children’s everyday activities and modifying activities and environments to better suit a child’s needs.
Information gathering - Assessment

- Jamie’s **general developmental abilities** (Batelle Developmental Inventory, Bayley, Devt Profile 3).
- Assess his **specific abilities in the occupations of play, self-care, and kindergarten learning**, and his **underlying capacities** that impact on performance.
  - Sensory (Sensory Profile)
  - Motor (Peabody, M- ABC)
  - Perceptual/cognitive skills (VMI)
Occupational therapist perspective

Assessment & Goal Setting

• Interview, observation, standardised assessment, and checklists.

• **Interests** (likes, dislikes)

• Determine child’s **strengths/challenges**

• Identify **goals for intervention** with parents, other team members (COPM, PEGS, Preschool PACS) – collaborative goal setting
Occupational therapist perspective

Management - Family

• Supporting Sandra and Justin to manage Jamie at home, enhance **parenting competence** and develop appropriate and functional family routines and rituals that enhance family well-being.

• **Family-centred and strengths-based** approach (Rosenbaum et al., 1998; Brun & Rapp, 2001; McCashen, 2005)

• **Provision of information** about impact of ASD on Jamie’s functioning.
Management – Jamie and family

- Enhance **social play skills** (alone, in parallel, others) & **cognitive play skills** through modelling, imitation, demonstrations to parents or siblings/peers.

- Develop **fine/gross motor** skills, communication and social interaction skills with the therapist, peers and others.
Management – Jamie and family

• Develop **self care skills** (through structured teaching), adapting the task or equipment (e.g., clothes with soft fabrics).

• **Address transitions and the establishment of functional routines** – meal times, dressing/bathing.

• **Help Jamie develop self-regulation strategies** and adapt or modify the environment to decrease sensory overwhelm.
Mental Health Nurse perspective

Diagnosis

• Registered Nurses *can* diagnose. Only a problem if they misrepresent pre-empting using term *medical*

• RNs can use current diagnostic nomenclature so can name Autistic Disorder etc

• Of course, no matter who diagnoses in autism it is a collaborative process

Health sociosemiotic

Mental Health Nurse perspective

Mental Health Nurses:

- Can do individual, couple, and family therapy (when the child is at age 3 ½ individual work is about supporting and educating those who support Jamie).

- At around 10 years of age, if there is no comorbid intellectual delay of significance then the focus shifts to working with him on the problems of daily living*

- Support and educate extended family to enable them to be a support for the family.

- Educate other service providers and assist with intervention based on Positive Behaviour Support

Thank you for your participation

• Please complete the exit survey before you log out

• To continue the interdisciplinary discussion go to the online forum on MHPN Online.

• Each participant will be sent a link to online resources associated with this webinar within 48 hours

• The next MHPN webinar is ‘Collaborative care for older people with mental health issues’ at 7.15pm (AEST) on Wednesday 9th of May 2012

• For more information about MHPN networks and online activities visit www.mhpn.org.au
Thank you for your contribution and participation

Artwork (slide 21, 22, 23 & 24) courtesy of Arts Project Australia and Q Art Studio

Miles HOWARD-WILKS
Not titled (landscape with waterfall, cross bridge and road)
2009
MH09-0008

Sonja Kan
'Secret Garden Series' 2011 QAS

Steven Perrette
In the bay, Port Philip Bay that is
SP00-0017

Ralph Dawson
'Stickmen with Yellow & Purple'
-for Calendar 2011 QAS