



The diagnostic process for children, adolescents and adults referred for assessment of autism spectrum disorder in Australia: National guideline draft for community consultation

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The Dietitians Association of Australia (DAA) is the national association of the dietetic profession with over 6000 members, and branches in each state and territory. DAA is a leader in nutrition and advocates for food and nutrition for healthier people and healthier nations. The DAA appreciates the opportunity to provide feedback on the diagnostic process for children, adolescents and adults referred for assessment of autism spectrum disorder in Australia: National guideline draft for community consultation by The Cooperative Research Centre for Living with Autism (Autism CRC).

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DAA interest in this consultation

DAA is the peak professional body for dietitians in Australia. DAA acknowledges the importance of accurately diagnosing Autistic Spectrum Disorder (ASD) in children, adolescents and adults. DAA are interested in guidelines that support best practice in diagnosing ASD in Australia.

The Accredited Practising Dietitian (APD) program is the foundation for self-regulation of the profession, and a public assurance of safety and quality.

APDs play a key role in disability care as they have the training, skills and knowledge to provide evidence based interventions using Medical Nutrition Therapy. APDs work with other health professionals to provide nutrition advice to many individuals, at various life stages, with ASD. DAA recognise the essential nature of a multidisciplinary team, including an APD, in ensuring accurate assessment of individuals in order to achieve accurate diagnoses, and personalised needs planning for better health outcomes.

Recommendations

DAA recommends the following:

That the word 'Dietitian' be changed to 'Accredited Practising Dietitian (APD)', throughout the guidelines.

APDs valuable Professional Informants on nutrition-related behaviours of concern for ASD Assessments, and during the Functional and Support Needs Assessment.

The Coordinator should ensure they are familiar with the definition and role of an APD, and understand that APDs work across a range of settings.

The following changes be made to *table 7*. (p42-44):

Physical and Sensory

- Column *Co-occurring Concerns*, Row 2 - include 'food allergies and intolerances' with gastrointestinal difficulties.
- Column *Example of Additional Professional Informant*, Row 8 - include APD for *Sensory processing differences, such as hypersensitivity or hyposensitivity*

Mental and Social

- Column *Example of Additional Professional Informant*, Row 8 - Include APD under for *Attention Difficulties and/or Hyperactivity*.

Functional

- Column *Co-occurring concerns*, Row 2, *‘Feeding issues, such as food selectivity, diet concerns or meal time challenges’* should be reworded to *‘Food-related behaviours of concern, such as sensory issues, food refusal and selectivity, or mealtime challenges’*.

DAA recommends APDs be included in the list of professionals who may observe the child in home or outside settings (Table 10. under column *Considerations*, for Aspect: *Information and Collection*, p 59.)

Discussion

APD credential

APD is the credential for dietitians recognised by the Australian government (for Medicare, Department of Veterans’ Affairs (DVA), and NDIS purposes), many state governments and many private health insurers. The APD program is a way for consumers and other stakeholders to recognise professionals with qualifications and skills to provide expert nutrition and dietary advice in a safe and evidence based way.

ASD Assessment guiding Principles

DAA supports the purpose of the guidelines, and that they should be individual and family-centred, strengths focused, evidence based and follow a holistic framework.

ASD Assessment Roles

DAA supports the roles outlined and described in the guidelines for the assessment team – Consumer, Referrer, Coordinator, Diagnostician/s, Functional Needs Assessor/s, Professional informant/s.

DAA agrees that the ASD assessment process should be coordinated by a central contact person, or Coordinator. The Coordinator should have comprehensive knowledge of ASD and the Professional Informants contributing to team care.

DAA supports APDs as Professional Informants for both Tier 1 and Tier 2, and Functional and Support Needs ASD Assessments.

ASD Assessment Settings

DAA agrees that environment can influence behaviour, therefore collecting assessment information from a variety of settings is important.

APDs, as Professional Informants, are well placed to consult with Consumers in the clinical setting (i.e. allied health clinics, Medical Centres) and in the community (i.e. home visits), to assess meal times. With Consumer/carer consent, this may be recorded or photographed for documentation purposes and to provide visual evidence of nutrition-related signs, symptoms and/or behaviours of concern to

the Coordinator. APDs can also use telehealth (e.g. telephone, video conferencing) for consulting with those clients in which access or transportation is a barrier to a face-to-face assessment.

Table 7. Professional Discipline Specialists for co-occurring concerns observed during ASD assessments (p 42-44)

Physical and Sensory (p. 42, row 2)

As part of gastrointestinal difficulties, APDs do assess Consumers with ASD for food allergies and intolerances, and are skilled at guiding Consumers and their carers through processes such as elimination diets to ensure diet quality is maintained.

There is a growing body of evidence linking feeding difficulties and ASD [1], including sensory issues to food smell, taste, and textures [2]. APDs should be considered key Professional Informants in assessing these issues.

Mental and Social (p. 43, row 4)

An APD should be considered a Professional Informant for *Attention Difficulties and/or Hyperactivity*, particularly if concerning behaviour occurs around meal times [3,4]. It is also important to make sure Consumers diets are adequate to rule out nutritional deficiencies as a cause of any concerning behaviours. Consumers with ASD have been found to have higher rates of certain nutrient deficiencies/imbances (including calcium and protein) [1,2,5]. It is therefore important that an APD be involved to conduct a thorough assessment of the Consumers diet [1].

Functional (p.44, row 2)

The changes to the wording for the *Co-occurring Concerns* column, under 'Functional' are recommended to better encompass terminology used in the guiding documents used by APDs working with Autism, and the literature [1,6,7]

Communication during an ASD Assessment

DAA supports that professionals be sensitive to the cognitive/intellectual abilities and verbal language level of the Consumer. This includes those of Culturally and Linguistically Diverse (CALD) Backgrounds (including Aboriginal peoples).

References

1. Sharp WG, Berry RC, Mccracken C, Nuhu NN, Marvel E, Saulnier CA, et al. Feeding Problems and Nutrient Intake in Children with Autism Spectrum

- Disorders: A Meta-analysis and Comprehensive Review of the Literature. *J Autism Dev Disord* 2013 09;43(9):2159-73.
2. Cermak SA, Curtin C, Bandini LG. Food Selectivity and Sensory Sensitivity in Children with Autism Spectrum Disorder. *J Am Diet Assoc* 2010; 110: 238-246
 3. Zobel-Lachuska J, Andrianopoulos MV, Mailloux Z, Cermak SA. Sensory Differences and Mealtime Behavior in Children With Autism. *Am J Occup Ther* 2015 Sep;69(5):1-8.
 4. Maskey M, Warnell F, Parr JR, Le Couteur A, McConachie H. Emotional and Behavioural Problems in Children with Autism Spectrum Disorder. *J Autism Dev Disord* 2013 04;43(4):851-9.
 5. Zimmer, M. H., Hart, L. C., Manning-Courtney, P., Murray, D. S., Bing, N. M., & Summer, S. Food variety as predictor of nutritional status among children with autism. *J Autism Dev Disord*, 2013 42(4), 549-556.
 6. Dietetic Core Standards. NSW Government Family & Community Services and Cerebral Palsy Alliance, 2016, <https://trainingalliance.edu.au/blog/dietetics/>
 7. Disability Role Statement: Role Statement for Accredited Practising Dietitians practising in the area of Disability. DAA Disability Interest Group, 2014, <https://daa.asn.au/what-dietitians-do/role-statements/>