

## APD REFERRAL PATHWAY

### A guide for schools, local authorities and sensory teams

Early diagnosis gives children with APD a chance at the best outcome via provision of essential support, at school, in work, and for life. Access to the correct referral pathway is therefore paramount and schools and education authorities can play a vital role in this.

If a parent raises a concern that their child may have APD, please believe them: they often notice it first. A child with APD might present as HI and can have similar symptoms, but once a hearing test shows no hearing loss, often nothing is done; if APD is not picked up then the child might just be left to struggle, so schools, local education authorities and other education professionals should make themselves aware of the signs. See the “Education” page of our website.

APD is a medical condition of neurological origin and it needs specialist testing. In the UK, only a consultant in audiovestibular medicine or an audiologist with specialism in APD is qualified to diagnose it. Parents must be advised that diagnosis is made via specialist medical testing and signposted to access this. If APD is suspected at all, only the appropriate testing can rule it out, so please assist parents by:

- briefly explaining APD to parents
- providing a link to our “APD testing centres” document on the website’s “Diagnosis” page
- explaining the need to ensure the child meets the criteria for the NHS testing centre they choose
- explain that they must all required reports as per the assessment centre criteria and provide a referral to a SALT/Educational Psychologist where possible
- tell them to see their GP to refer the child for a hearing test
- the GP must then send a copy of the hearing report and other requested reports to the testing centre as specified in the document (other professionals can refer, but parents must check the centres’ criteria for details of which ones are permitted, and how they can do this)
- refer the parents to APD Support UK to access support and further information.

Patients with APD should be considered as having complex needs because APD never exists in isolation: it can co-exist with any number and variety of other conditions, difficulties and disabilities. Be aware of the signs of other co-morbid conditions that they may have or develop, and be prepared to refer accordingly. These may be masked by APD, mistaken for it, or vice versa. They will need, and are legally entitled to receive, support for APD and all other additional needs. Although APD is also considered a hearing disorder according to the World Health Organisation/WHO, and a sensory impairment which affects communication and therefore qualifies for the support of sensory teams, the support they will need is very different to that for a child with hearing loss and the recommendations of the diagnosing professional must be provided as reasonable adjustments, as well as funding for recommended equipment.

Thank you.

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