LOOKING GLASS CARE / FREE PRACTICAL GUIDE

Child assessment pathways: ADHD, autism, dyslexia and learning disability

Parents and carers seeking a clear first step in England.

Four different routes explained together, with questions to ask, evidence to gather and a referral tracker. Local services, age criteria and waiting times vary.

Why this matters to me

As a parent, I know why a clear next step matters. My care-work perspective also reminds me that different concerns need different assessments. This guide is designed to help families ask focused questions without being expected to diagnose their child.

How to use this guide

Read the five short lessons, work through the checklist and use the record sheet to choose your next action. Allow around 25-35 minutes plus time for your own review. Keep personal records securely; use anonymised notes for team learning.

This is general educational information for England, checked against the sources listed at the end. It is not an accredited qualification, clinical assessment or individual legal advice.

Learn and apply

1. ADHD: discuss impact across settings

Speak with the teacher or SENCO and arrange a GP discussion about persistent concerns affecting everyday life. Describe attention, activity or impulsivity with examples from home and education, alongside strengths, sleep and other relevant difficulties. A GP or SENCO may help request referral, depending on the local pathway. Assessment is carried out by a specialist such as a paediatrician or child psychiatrist. Ask which service accepts children of your child's age, who submits the referral and how you will know it has been accepted. NHS Right to Choose may be relevant to some eligible referrals; ask the GP about the actual service and provider.

2. Autism: find the local child assessment route

Start with a GP, health visitor, SENCO or another professional who knows the child. Local autism assessment routes differ and some accept referrals from education or health visitors. Describe communication, social interaction, sensory experiences, routines and development without treating a checklist as a diagnosis. Ask what information the assessment team needs from family and school. Confirm receipt and acceptance, rather than assuming a conversation placed the child on a waiting list. Discuss useful support and adjustments during the wait.

Learn and apply

3. Dyslexia: usually an educational assessment route

Discuss reading, spelling and literacy concerns with the teacher or SENCO and review support already in place. A screening tool can flag possible difficulty but does not itself provide a diagnosis. A specialist teacher or educational psychologist can carry out a diagnostic assessment. The NHS explains that a GP cannot diagnose dyslexia, although a GP can help investigate hearing, vision or other health concerns that may affect learning. Many diagnostic assessments are paid; ask the school or local service whether funded assessment is available without assuming that it will be.

4. Learning disability: discuss development and everyday skills

Learning disability affects learning and everyday functioning and is distinct from a specific learning difficulty such as dyslexia. If you are concerned about development, understanding or daily skills, speak with a GP or health visitor and the SENCO. Depending on the child and local pathway, community paediatrics, psychology or other specialists may be involved. Share developmental history and examples of support needed, not just attainment scores. Low school attainment alone does not establish a learning disability. Ask who will coordinate information across health and education.

Learn and apply

5. Keep one tracker and continue support

For each referral, record the service, referrer, date sent, confirmation of acceptance, next expected contact and follow-up route. Keep a short strengths-and-needs summary, relevant reports and the child's views. Ask the school about adjustments and SEN support while waiting. A diagnosis and an EHCP are different processes; an EHC assessment can be considered on the statutory test without a diagnosis being a universal prerequisite. Seek appropriate health advice for new or worsening health concerns rather than waiting for a developmental appointment.

Check your understanding

Can a GP refer every child for dyslexia diagnosis through the same service used for ADHD or autism?

Suggested answer: Do not assume so. Dyslexia generally follows an educational assessment route involving a specialist teacher or educational psychologist. Ask the SENCO about local assessment and funding, and the GP about relevant health concerns.

Practical review checklist

Mark each item: checked / action needed / not applicable. Note the evidence and reason, rather than treating a tick as proof.

[ ] The concern is described through daily impact and strengths.

[ ] The correct local age group and service are checked.

[ ] The named referrer and submission date are recorded.

[ ] Acceptance is confirmed, not assumed.

[ ] School and family evidence are requested where relevant.

[ ] Screening is distinguished from diagnosis.

[ ] Cost or funding is checked before any private booking.

[ ] Support and follow-up continue while waiting.

My next three actions

1. Action: _____

Owner / help needed: _____ Review date: _____

2. Action: _____

Owner / help needed: _____ Review date: _____

3. Action: _____

Owner / help needed: _____ Review date: _____

Your working record

Use a copy for each review, support plan or referral. Keep identifying and sensitive information in your own secure system.

Concern and service name

_____

_____

Referrer and contact route

_____

_____

Date sent and acceptance confirmation

_____

_____

Reports or forms still needed

_____

_____

Next contact or follow-up date

_____

_____

Support agreed while waiting

_____

_____

Sources and next steps

Information checked on 18 September 2026. Guidance and local pathways can change; use these primary sources for current detail.

NHS (2025), ADHD in children and teenagers

NHS (2026), Autism assessments

NHS (2026), Dyslexia in children

NHS (2025), Learning disabilities

UK Parliament (2014), Children and Families Act, section 36

Choose what helps you next

Explore the matching free mini-course, browse related resources or ask Looking Glass Care about practical support. The guide and mini-course do not include an individual assessment or a regulated qualification.

Free resources

Free and paid training

Help me choose

Book a free 30-minute consultation

Email info@lookingglasscare.co.uk