How to Request an Autism Assessment in Victoria



The first step is often a practical one: deciding who to contact and what to say. For people working out how to request autism assessment, the pathway does not need to begin with certainty. A parent, adult, school staff member or other health professional may have noticed a pattern of social, sensory, communication, behavioural or daily-living differences that would benefit from a clearer clinical understanding.

An autism assessment can help organise this information into a developmental and psychological picture. It is not based on a single questionnaire, a short appointment or one observation. The process usually considers how a person has developed over time, how they function across settings, and whether other factors may also be relevant.

Start by requesting an appointment

In Victoria, an autism assessment can be requested directly from a psychology clinic. This is called a self-referral. A parent or caregiver can make contact on behalf of a child or adolescent, while an adult can contact the clinic themselves. A referral from a GP, paediatrician, psychiatrist, school or allied health professional can also be helpful, but it is not always required to make an initial enquiry.

When requesting an appointment, it helps to provide basic details about the person seeking assessment, their age, and whether the request relates to autism, ADHD, learning difficulties, emotional wellbeing, or more than one area. The clinic can then explain its intake process, appointment availability, fees and whether the presentation falls within its service.

There is no need to prepare a polished explanation. A brief description of the concerns, when they were first noticed, and the settings where they arise is usually enough for the first contact. For a child, this may include information from home, kindergarten, school or social activities. For an adult, it may include longstanding patterns in education, work, relationships and everyday organisation.

Consider a GP appointment before or alongside the request

A GP can be a useful part of the assessment pathway, particularly where there are physical health concerns, sleep difficulties, anxiety, low mood, attention difficulties, learning concerns or questions about medication. GPs may provide a referral, coordinate relevant medical information, and remain involved after an assessment where ongoing medical decisions are needed.

For some people, a GP appointment is also the place to discuss a Mental Health Care Plan. Medicare rebates may be available where a person has an eligible referral and Mental Health Care Plan, and where the service provided meets current Medicare requirements. A plan or referral does not automatically mean that every part of a comprehensive assessment will attract a rebate. Medicare item rules, referral wording and the type of appointment all matter.

It is sensible to ask the clinic and GP separately about the documents required for the proposed appointments. This allows the family or adult to understand the likely pathway before booking. A clinic can explain its own fees and service structure, while the GP can advise on referral and care-plan arrangements within general practice.

What to ask for when requesting an autism assessment

It can be difficult to know the right language, especially when a school has raised concerns without recommending a specific service. A clear request may simply state that an autism assessment is being sought because of developmental, social communication, sensory, behavioural, learning or functional concerns.

The request can also note any existing diagnoses or supports. For example, a person may already have support for anxiety, learning difficulties, ADHD, speech and language needs, or sleep problems. These do not rule autism in or out. They provide context for the psychologist considering the full presentation.

For a child or teenager, it may help to ask whether the assessment includes contact with caregivers and whether the clinic needs school reports, teacher observations, previous assessments or reports from other practitioners. For adults, it is worth asking whether historical information is needed from a parent, sibling, partner or old school records. Not every adult will have access to all of this material. The clinic can discuss what information is available and relevant in the individual circumstances.

How an autism assessment is usually structured

A comprehensive autism assessment takes more than one source of information into account. The exact format depends on age, developmental history, communication profile, current circumstances and the questions being assessed.

Developmental and clinical history

The psychologist will usually gather a detailed history. For children, this may cover pregnancy and early development, language, play, friendships, sensory experiences, behaviour, school progress and family history. For adults, the discussion often includes childhood experiences as well as education, employment, relationships, independent living, sensory needs and emotional regulation.

The purpose is not to search for a single cause. Autism is a neurodevelopmental presentation, and assessment considers whether a pattern has been present across development and whether it is affecting day-to-day functioning.

Interviews, observations and structured measures

Assessment may involve clinical interviews, direct observation and structured measures completed by the person, caregivers, teachers or other relevant people. The psychologist may also consider cognitive, learning, attention, language, mood or anxiety factors where these are part of the referral question.

This matters because similar difficulties can have different explanations. A person may have more than one area of need, and some experiences may be related to stress, sleep, learning demands, trauma, anxiety or attention difficulties. The assessment process is designed to consider these possibilities rather than assuming one explanation from the outset.

Feedback and planning

After the assessment information has been considered, a feedback appointment provides space to discuss the findings and ask questions. A written report may outline the assessment information, diagnostic conclusions where appropriate, and recommendations for supports.

Recommendations depend on the individual. They may include psychological therapy for anxiety, emotional regulation or adjustment; practical strategies at home, school or work; communication with a GP or other practitioner; school-based planning; or referrals to other services where indicated. A psychologist does not prescribe medication. Where medication is being considered, that decision sits with a GP, paediatrician or psychiatrist.

Preparing information without turning it into a test

Families and adults sometimes feel pressure to gather every document before making contact. Useful information can make the assessment more efficient, but a missing report should not prevent an initial enquiry.

Bring or send documents that are already available, such as school reports, individual education plans, previous psychology or allied health reports, relevant medical correspondence, and notes about developmental history. For adults, old school reports can sometimes offer useful context, but they are not essential in every case.

It may also help to write down a small number of examples showing how the pattern affects everyday life. For a child, this could include transitions, group activities, sensory environments, friendships, classroom demands or after-school exhaustion. For an adult, it might include workplace communication, planning, social expectations, household tasks or managing change. Brief examples are more useful than trying to prove a conclusion.

Avoid relying on online screening tools as a diagnosis. A screening result may support a decision to seek professional advice, but it cannot replace developmental history, clinical interview and assessment of other possible explanations.

Requesting an autism assessment through BNC

Behavioural Neurotherapy Clinic in Doncaster accepts self-referrals and referrals from GPs, paediatricians, psychiatrists and allied health professionals. Its registered

psychologists assess autism, ADHD, learning difficulties and related presentations for children, adolescents and adults. Appointments are available in person for metropolitan Melbourne clients and by Zoom telehealth across Australia, where telehealth is clinically suitable.

The intake discussion is a practical opportunity to ask what the assessment will involve, which appointments may be needed, what information to provide, and whether a GP referral or Mental Health Care Plan may be relevant. A person does not need to arrive with a settled diagnosis to request that conversation.

When school or another service is involved

Schools often identify learning, social or behavioural patterns that warrant further discussion, but schools do not diagnose autism. A teacher's observations can be valuable because they describe how a student manages the demands of a busy classroom, playground, group work and changing routines.

Parents or caregivers can ask the school for relevant reports, learning plans or written observations. It is usually helpful to share only information that is relevant to the assessment. The psychologist may request consent before seeking additional information from a school or another practitioner.

For adults, workplaces are not required to be involved in an assessment. Some people choose to provide information about work demands; others prefer to keep the process private. The assessment can proceed using the information that is appropriate and available.

Requesting an autism assessment is not a commitment to a particular outcome. It is a way to replace uncertainty with a structured conversation about development, functioning and the supports that may be useful next.

For more information

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