

Reference Number: FOIAH2324/742
From: Other
Date: 28 March 2024
Subject: Service Pathways - tic disorders

We would like to make a request regarding whether you offer a service for children and young people with tics or Tourette Syndrome and basic details of this service. Please include any information for sub-contracts that you have.

We would like you to respond for children and young people within the specified age range that your service accepts (e.g., 6 - 18 years or 6 - 25 years).

Q1 1. What is the specified age range that your service accepts?
• 6 - 18 years
• 6 - 25 years
• Other (please state):

A1 Other - 0-18

Q2 If a referral is made to your service for a child or young person with tics without a co-occurring mental health or neurodevelopmental condition, would you:
• Accept the referral for assessment
• Ask for additional information before a referral decision is made
• Decline the referral signposting to other agencies / service
o Please provide the name of the agency/service:
• Decline the referral but refer to another service within your trust
o Please provide the name of the service
• Decline the referral but make an out of area referral
o Please provide the name of the service
• Decline the referral with no further action

A2 Decline the referral signposting to other agencies / service
Please provide the name of the agency/service: Advanced Solutions, YPAS

Q3 How many referrals for tic disorders did your service receive from 1st April 2022 to 31st March 2023, including those declined?
• Please give an exact number:

A3 Information not held – the Trust does not routinely collate or hold this information centrally as part of its management or performance data. As per A2, referrals declined and signposted to other agencies and services.

Q4 If your service does accept referrals for tics, please continue with the rest of this form.
Out of the referrals that you have received from 1st April 2022 to 31st March 2023, how many referrals for tic disorders did your service accept?
• Please give an exact number:

- A4 Information not held - As per clarification received as to whether the Trust accepts referrals for tics without a co-occurring mental health or neurodevelopmental condition – This question does not apply to the Trust as we do not accept referrals for tics without a co-occurring mental health or neurodevelopmental condition.
- Q5 Does your service:
- Conduct diagnostic assessments for tic disorders? (Yes/No) If you answer No, please still proceed to the next part of the question.
 - o If Yes, how many patients were seen for diagnostic assessments from 1st April 2022 to 31st March 2023?
 - § Please give an exact number:
 - Provide any interventions for families prior to giving a diagnosis? (Yes/No)
 - o If Yes, please provide details of the intervention and who provides this intervention.
 - Offer treatment for tics? (Yes/No)
 - o If Yes, how many patients in your service were prescribed medication to treat their tics from 1st April 2022 to 31st March 2023?
 - § Please give an exact number:
 - o If Yes, how many patients received behavioural therapy for their tics from 1st April 2022 to 31st March 2023?
 - § Please give an exact number:
 - o If Yes, how many patients received psychoeducation for their tics from 1st April 2022 to 31st March 2023?
 - § Please give an exact number:
- A5 Information not held - As per clarification received as to whether the Trust accepts referrals for tics without a co-occurring mental health or neurodevelopmental condition – This question does not apply to the Trust as we do not accept referrals for tics without a co-occurring mental health or neurodevelopmental condition.