



Studio 3 Clinical Services

Psychological Services for Children and Adults: The Studio 3 Neurodiversity Pathways Approach

In all that we do, Studio 3 aims to respond to the unique context of need. Our neurodiversity pathways approach seeks to acknowledge the differing perspectives individuals and professionals may have when they reach out to us for support. We work hard to ensure our response is affordable and practicable. We work in many parts of the world and are sensitive to cultural and contextual dynamics. Our pathway approach is an attempt to tailor our response to the unique needs of families, foster carers, support services, clinical commissioning groups, social workers, and indeed all allied health or caring professionals who contact us.

We can adapt our clinical services to meet the needs of the individual and their unique situation, with our team of clinical experts providing a variety of perspectives and specialties. Our clinical team includes clinical psychologists, counselling psychologists, and psychotherapists, each with unique expertise.

Within each pathway of support we can also offer coaching and mentoring from our team of clinical practitioners, with input from our training team who specialise in crisis management, reducing restrictive practices, and implementing Low Arousal Approaches. For more information on our training and coaching services, visit www.studio3.org/training-and-coaching.

The following is an overview of the primary pathways we can offer you as an individual or organisation.

Diagnostic and Assessment Pathway

Studio 3 Clinical Services offer a full range of assessment options where, for example, autism, ADHD, ADD, ARFID, developmental trauma and/or complex trauma have been queried. A key element within our approach is experience in working in complex cases where superficial features which suggest, for example autism, might in fact be associated with trauma rather than neurodevelopmental difference. Our approach is also formulation driven in that we seek to help individuals find solutions and explanations for their distress. And so if we are asked to complete a diagnostic assessment for autism for example, regardless of the outcome of the assessment, we will always include practical recommendations and signpost towards next steps and tailored supports where appropriate. Where appropriate, in such reports we will also recommend any adjustments required in the system around a person such as for example at home, school, college, services and/or in the workplace.

The following is an overview of typical pathways we offer:

- Diagnostic assessments for autism, attention deficit hyperactivity disorder (ADHD), attention deficit disorder (ADD), Avoidant Restrictive Food Intake Disorder (ARFID), Complex Post Traumatic Stress Disorder (Complex PTSD) and AIM3 assessments looking at harmful sexualised behaviours.
- Diagnostic clarification in complex cases so as to accurately understand a person's need and differentiate between overlapping conditions such as trauma pathways, ADHD and autism. This question is often asked regarding children in looked after care settings where

features of complex trauma and childhood neglect might mirror features associated with autism or ADHD.

- Re-evaluation or second opinion on past diagnostic assessments where it is felt clarification or review is appropriate. This question for example arises for individuals who might not have been able to access complete assessment during the covid pandemic, or where diagnostic overshadowing and emphasis on a primary condition has led to other difficulties being overlooked or dismissed. We also work with adults who feel autism has been overlooked in their life and take care to keep an open mind for overlapping pathways which might explain client difficulty.
- More generally, our lead psychologist team can assist where assessment or diagnosis is required in any area of mental health to as to inform need or adjustments in a person's life such as, for example, in cases of anxiety, depression, trauma or obsessive compulsive disorder.
- Stress and sensory profile assessments, in order to provide guidance within the assessment and diagnosis process.
- Cognitive and developmental assessments profiling for deficits in cognitive ability (e.g., dyslexia, ADHD, autism, learning disabilities, attention, concentration, working memory, processing speed) and developmental stage (e.g., social and emotional intelligence), identifying where strengths and weaknesses lie.
- Behavioural assessments, looking at intensity and frequency of distressed behaviours in order to identify specific interventions and resources that may be necessary in order to set goals and manage distress.
- Contributing to risk assessments.
- Emotional well-being and mental health assessments, looking at self-esteem, hopelessness, anxiety and depression.
- Supporting families to understand and interpret diagnoses by liaising with families, parents and carers to understand the impact of a diagnosis such as trauma, and provide guidance around implementing practical support for an individual.
- Assessments and observations around practice for organisations and services supporting individuals, including assessing practical, organisational and individual support needs. Our clinical and training team can also provide guidance and coaching for supporters (carers, family members, support workers, and providers) in order to implement practical and organisational needs with service users. In addition, our clinical team are involved in assessing an individual's needs and working with already assessed needs alongside other professionals and key stakeholders, such as occupational therapists.

The Family Pathway

The Studio 3 approach engages with the whole system around a person if that is felt to be helpful. We have a particular speciality in working with families, whether foster carers, parents of children with autism or intellectual disability. The idea of transactional stress within family and support systems is at the heart of Professor Andrew McDonnell's *low arousal* model. To learn more about the Low Arousal Approach, join our weekly [Online Low Arousal Training](#) at both introductory and advanced levels to begin understanding and implementing Low Arousal Approaches. Within a person-centred and empathic model, we work hard to hear all voices in a family unit and advocate for families where possible.

The following are examples of what our family pathways approach looks like in practice:

- Well-being support for families in a wide range of areas, including general support for carers who are struggling with, for example, transitioning between services or finding and accessing an appropriate level of care.
- Working with our colleagues at Lives Through Friends, an independent service brokerage, to support transitions for families seeking to move individuals from services to community-based placements or to be supported at home, including support with accessing services and creating a roadmap to care pathways.
- Therapeutic support for parents/carers, family members such as siblings, and individuals themselves, where appropriate. This can include one-to-one therapy, group therapy, joint sessions with family members and general coaching, advice and support for carers and other practitioners.
- Supporting carers around their own self-care within one-to-one or group therapy sessions, either within services or with individuals. This can include support with understanding, recognising and managing your own stress and anxiety.
- Working with the individual and other members of the family in order to enact a collaborative and positive approach to creating a team of support around the individual.
- Mediating between parents and services/staff to create open dialogues around support, nurture good working relationships, and ensure consistency of approaches throughout the individual's network of support.
- Supporting parents of children who have autism or anxiety related difficulties where direct work with the child is not possible or appropriate.
- Helping parents manage and cope with caregiver burden. This might lead to therapy proper with one of our lead clinicians where sought.
- Offering access to training or introduction to low arousal approaches whether online or in person. These can be tailored to bespoke sessions with parents where necessary.
- Supporting the family in multi-disciplinary professional settings so that their perspective is heard. For example, we often attend review meetings in settings such as school, social work overview, care settings, guardianship cases, or where there is wider medical involvement and a person is in hospital for example. Supporting a child and family so that the child can manage to maintain a placement at mainstream school is an example of where we can help re-frame understandings of other professionals.
- Working with looked after children who are in care. Here we may offer training such as trauma-informed support to foster carers/services or, if appropriate, work directly with the young person. We also offer training, coaching and practitioner work to residential care workers and care teams. We undertake this work across the UK but particularly in Wales where David Walker of Studio 3 offers trauma-informed care training using the Safety, Stability, Repair and Resilience (SSRR) model to support children in a range of care settings. We also provide aftercare and follow-ups, where we seek to support the whole system and provide ongoing support and advice. We also support transitions and work closely with staff teams as well as the young person on a one-to-one basis in order to inform staff in their approaches, as we consider carers to be the key agents of change. This includes social workers, foster carers, schools, and Local Authorities, encompassing the entire support team around the child.
- Supporting guardians or services around capacity questions.
- Liaising with solicitors or advocates for individuals around review of models of care and support where new pathways of service configuration are sought.
- Providing court reports for tribunals, appeals, and claims, specialising in complex cases for Health and Local Authorities (including health, social care, and education sectors) in the UK and Ireland. This can involve offering opinions around injuries at work; level of and

adherence to training/policies; safety risks; alleged organisational failures and oversights; risk assessments etc.

- Providing input and supports for families facing legal action, for example reframing and explaining to courts and police new perspectives on behaviour, level of need, and required support for families.
- Individualised [Low Arousal Approach training](#) for families individually or in group sessions.

Therapy, Counselling, and Assessment pathway

Studio 3 offer therapy in a range of contexts and locations. We offer specialisation in working with autism, trauma, and looked after children in particular. Our clinical team will tailor therapy to the level of need and can also assist clients facing a wide range of difficulties.

The following are examples of interventions we can offer:

- One-to-one or group therapy and counselling for a range of difficulties, including but not limited to PTSD, depression, eating disorders, addiction, generalised anxiety disorder (GAD), self-harming, relationship issues, and rape and childhood sexual abuse counselling. This can be provided in person, remotely online, or through hybrid format according to what the client can manage.
- Working with people around anxiety linked to autism.
- One-to-one therapeutic life story work with children, young people and adults.
- Linking therapy sessions with wider support around a person where they consent to such sharing in order to inform need.
- Linking therapy to assessments which might be shared with employers/schools for example so as to inform workplace or educational adjustments.
- Supportive counselling for staff, for example with regard to stress and anxiety.
- We accept referral from GPs, local authorities and allied health care professionals in addition to parents or individuals. Often individuals have secured off-list referrals from GPs (ie. Referral to a specialist clinician outwith the NHS) so that access to therapy is not delayed by NHS local capacity or waiting list pressure.
- Clinical supervision for organisations and individual practitioners, as well as training/practice supervision including coaching and practitioner work on a theoretical and practical basis.

Pathway for Organisations, Services and Educational Providers

Studio 3 have a long track record of liaison with services and agencies to support transitions to more appropriate settings. Our partners Lives Through Friends are often integral to collaborative work to transition individuals from more institutional environments or where service design change is necessary. More generally, we also consult regularly with many care providers, particularly in disability and looked after children care settings and offer support and guidance to managers, staff teams and families connected with the person supported.

Examples of our work in this area include:

- Psychological education for organisations around understanding diagnoses, behaviours, stress, and trauma.
- Debriefing and well-being services/support for staff and carers.

- One-to-one therapy with children, young people and adults.
- Providing clinical inputs and insights, for example producing care plans, informing service risk assessments, and advising on practice.
- Reviewing service configuration and recommending revisions to models of service and support.
- Supporting transition from secure settings to a return to the community with appropriate supports.
- Training agency staff to support individuals in transition, for example when a service provider withdraws service due to difficulty. Our team can act as mentors/supervisors for staff where the staff team requires additional professional guidance in order to manage complex individual presentations. Here we offer coaching, practitioner mentoring, direct practical support, work to increase proficiency in staff teams, guide staff towards embedding a Low Arousal culture and generally moving from theory to practice.
- Providing assessments to for example social work order to inform understanding of how well a family system is functioning and where the family might require support.
- Attending review meetings with school or social work (CIN, TAF, TAC meetings) to provide a psychological perspective on need and support
- Managing transition of a person from their family home to supported living in their own home.
- Providing support for parents/carers in helping to advocate for individuals in schools/services. This might include giving parents the language to be able to ask for accommodations for young people struggling who need access to necessary supports. Or again, we might explain the impact of an individual's sensory needs to a school or employer so that the organisation can identify practical adjustments.
- Working with people in secure/acute settings in complex cases where a systemic solution-focused approach is necessary.
- Changing philosophies and mindsets within services and organisations, for example supporting transitions from one way of practice to another or perhaps around transition to using Studio 3 Training Systems.
- Supporting respite services for staff teams including training, mentoring and support.
- Working with universities as neurodiverse experts, offering general support, training and coaching for well-being, inclusion, and disability services or support for students directly.

For more information about the clinical or training services available, please contact our office at info@studio3.org or by calling 01225 334 111. You can also submit a referral via our website at www.studio3.org/submit-a-referral.