# National Institute for Health and Clinical Excellence

Minutes:	
Guideline Development Group Meeting	Autism Spectrum Disorder (ASD)
Place:	RCPCH
GDG present:	Gillian Baird (GB) (Chair) Susan Anderson (SA) Carol Bagnall (CB) Tony Charman (TC) Diana Howlett (DH) Ann Le Couteur (ALC) Anne Marie McKigney (AM) Jamie Nicholls (JN) Sharon Richman (SR) Lorraine Scott (LS) Emily Simonoff Zoe Thompson (ZT) Penny Williams (PW)
NCC-WCH staff in attendance:	Hannah Rose Douglas (HRD) Juliet Kenny (JK) Lily Jin (LJ) Hugh McGuire (HM) Wendy Riches (WR)
NICE Staff:	Sue Latchem (SL) – day 2 afternoon only Korin Knight-Mossop (KKM) – day 2 only
Observers:	N/A
Invited speaker:	N/A
Apologies:	Stephen Murphy (SM)

### Welcome, apologies, housekeeping, minutes from last GDG

GB welcomed the GDG to the 8th guideline development group for the guideline on autism spectrum disorder in children and young people. Apologies were received from SM and GB advised the group that WR would be acting for him on behalf of the NCC-WCH.

Specific points re: ALC's declarations of interest at the previous meeting were clarified in relation to the minutes. The revised minutes for GDG 7 were subsequently uploaded to the website for confirmation.

#### **Declarations of Interests**

GB asked all present to state whether they had any new interests to declare. TC declared new interests.

тс

What was declared? European Science Foundation COST Action: Enhancing the Scientific Study of Early Autism (ESSEA) €400,000. This is a 'network' grant that involves work on early screening and early intervention amongst other activities.

Is it a conflict? Why?

No. The funding goes directly to his department therefore it is a specific, non-personal pecuniary interest. TC confirmed it would not prevent him from taking an independent view on the evidence base and discussions/decisions on the GDG.

Did the GDG member have to leave the room? No

# Day 1

Question 3-C (biomedical investigations)

ES presented evidence provided by HM. Discussion followed and draft recommendations were agreed.

Question 2-B (risk factors)

Discussion

LJ gave presented evidence. Discussion followed and draft recommendations and key points for translation were agreed.

Questions 6, 9, 10 (communication, information and support)

ZT and SA presented evidence and draft translations and recommendations. Discussion followed. It was agreed that the technical team would continue to edit recommendations following the meeting and further research needed to be done about additional/existing resources. Discussion followed about whether to include family's experiences of diagnosis in the guideline and how.

Structured translations and pathway HRD explained the GRADE structured translation to the group and gave a brief overview of the revised care pathway

Review of recommendations

GB guided discussion and revision of draft recommendations for stage 1 and the table of signs and symptoms

Overview of work for day two GB briefed the group about the work that needed to be done on day two and requested that the meeting begin at the earlier time of 9:15am

## Day 2

Review of recommendations continued GB guided discussion and revision of draft recommendations for stage 2 and stage 3

Actions following GDG 8

GB gave overview of work to be done JK/HRD explained need for tight version control and told the group that tasks would be communicated on individual basis via email HRD gave deadline of 13<sup>th</sup> August

# Next meeting 14<sup>th</sup> September Royal College of Paediatrics and Child Health (RCPCH) 10.00am-4.00pm