Maudsley Learning

The Autism Core Capabilities rEPosiTory(ACCEPT) Project: The Delphi Study

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Our partners

Maudsley Learning

Maudsley Learning is a mental health training centre within South London & Maudsley NHS Foundation Trust and the Institute of Psychiatry, Psychology, and Neuroscience. Our mission is to produce the highest quality mental health and wellbeing education and training products.

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The Estia Centre

The Estia Centre at South London & Maudsley NHS Foundation Trust is a market leader in training and research in mental health, intellectual disabilities (ID), and autism. The Estia Centre provides training at a scale to local and national NHS teams, statutory and non-statutory services, and voluntary organisations.

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Autistica

Autistica is the UK's national autism research charity, focusing on giving autistic people the opportunity to live long, happy, healthy lives.

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Health Education England

Health Education England (HEE) exists for one reason only: to support the delivery of excellent healthcare and health improvement to the patients and public of England. This is achieved by ensuring that the workforce of today and tomorrow has the right numbers, skills, values and behaviours, at the right time and in the right place.

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Delphi Study

Aim

Using an iterative approach, the Delphi survey study aimed to develop a consensus statement and recommendations about autism-related training gaps and needs of CBT practitioners working with autistic people.

Methodology

The study was open to recruitment between September and December 2020, principally via the project teams' networks, word of mouth, and social media.

Fifty people completed the Round 1 survey, 25 people completed the Round 2 survey, and 11 completed the Round 3 survey. In Round 1, eighteen percent of participants (n = 9) worked with children and adolescents, 46% (n = 23) with adults and 36% (n = 18) with people (with and without autism) across the lifespan. They had been using CBT in clinical or academic roles for between one and 22 years. The number of autistic clients on peoples' current caseloads ranged from 0 – 100%; approximately 60% of practitioners worked with autistic people less than 25% of the time, and 20% of practitioners worked with autistic clients between 26 - 50% of the time. Sixty percent of participants also worked with people who have an intellectual disability.

Twenty-five people completed the Round 2 survey. This included 10 clinical psychologists, nine CBT therapists, one psychological wellbeing practitioner, four trainees, and one social worker. Five participants worked with children and adolescents, nine with adults, and 11 with people across the lifespan, with and without autism.

Eleven people completed the Round 3 survey. This included four clinical psychologists, five CBT therapists, one social worker, and one trainee. One participant worked with children and adolescents, five with adults and five with people across the lifespan.

Results of Delphi survey

Training attended

Seventy percent of people in the Round 1 survey (n = 35) had attended at least one autism-specific training event. Common descriptions of training contents included autism awareness, diagnostic assessment, sensory processing, mental health in people with autism, and CBT. Training was delivered for between two hours and five days, depending on the focus.

Barriers to acceptability and effectiveness of CBT

Several barriers to the acceptability and effectiveness of CBT were identified. These were categorised into six main themes: (1) *health service factors*; (2) *factors relating to guidelines*; (3) *staff factors*; (4) *client factors*; (5) *CBT-related factors*; and (6) *systemic considerations*.

Enhancing CBT service provision

There were numerous suggestions for ways the CBT care pathway can be adapted to better meet the needs and preferences of autistic clients. These related to five main areas: (1) practitioners; (2) service delivery; (3) therapeutic approach; (4) process issues; and (5) techniques.

Training gaps and needs

It was considered by most people that improving the content and amount of autism-relevant training would be beneficial for working with autistic clients. Modular training, offered via different means, was favoured. Training topics pertained to four areas: (1) autism; (2) co-occurring conditions; (3) engagement; and (4) CBT-specific issues.

Considerations for supervision

A number of participants made recommendations for autism-relevant adaptations to clinical supervision. These were categorised into four themes: (1) considerations for clinical supervisees; (2) considerations for clinical supervisors; (3) suggestions for focal discussion points during supervision; and (4) oversight issues.

Conclusion

Overall, the Delphi survey data indicate that a combination of factors are likely to reduce barriers to effective and accessible CBT for autistic people, including deliberate attempts to enhance the care pathway (such as in relation to adapting structure, process and content of CBT), and improved practitioner knowledge and skill relating to working with autistic people. A full manuscript will be submitted to an academic peer-reviewed journal detailing these findings.

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