Service Evaluation of the Fetal Alcohol Assessment & Support Team (FAAST)

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**Background**
- Fetal Alcohol Spectrum Disorder (FASD) is a lifelong physical & neurodevelopmental condition related to prenatal alcohol exposure.
- The estimated UK prevalence of FASD is 3-6% & therefore it is the most common neurodevelopmental condition (Autism is 1.2%).
- 41.3% of pregnant women in the UK drink alcohol: this is the 4th highest in the world.
- Early identification & diagnosis is known to improve outcomes in respect of educational attainment, social inclusion and mental health.
- NHS Ayrshire & Arran piloted the Fetal Alcohol Assessment and Support Team (FAAST).
- This was the first multidisciplinary (MDT) assessment & diagnostic pathway for children affected by prenatal alcohol exposure in Scotland.
- Due to high demand, the pilot process was also mainstreamed within child health services

**Evaluation Methodology**
- Two clinical pathways were examined in parallel: The Fetal Alcohol Assessment & Support Team (FAAST) pilot versus treatment as usual (TAU: CAMHS/Community Paediatrics).

**The Trident Method** was used to evaluate these by looking at:

1. **Process**: Analysis of timing and input from the FAAS team versus ‘treatment as usual’ cases plus diagnostic outcomes.
   - **1) Carers**
     - Reported having to “fight to be heard” prior to FAAS team input. They finally “felt heard by the FAAS team” following their acceptance to the service and receiving an assessment.
     - Viewed assessment processes from the FAAS team as helpful in understanding their child’s strengths & difficulties.
   - **2) Educational professionals**
     - Found diagnosis to be helpful to a child & that the FAAS team multidisciplinary assessment helped them understand the strengths and difficulties of affected children.
     - Felt “informed but not yet empowered,” to work with affected individuals. Strategies were highlighted as an area where education wanted to collaborate with clinicians.

**Processes**
- Multidisciplinary assessment is key!
- There was an average of 4 years between a child’s 1st referral to services & when FASD was considered.
- Many TAU children had an ADHD diagnosis prior to FASD assessment.
- Children with FASD can often have affected siblings, and the majority of children were case-experienced.
- Across both service pathways 80% of children acquired neurodevelopmental & MDT profile.

**Outcomes**
- Children felt that they achieve less than others, were less resilient and took more risks.
- Children within the pilot study had a high rate of suicidal ideation (35%).
- Over the course of the evaluation, quality of life, mood and behaviour were positively affected in these children.
- Carers reported strong coping skills and belief in their parenting.
- All cases were supported to access education and community inputs.

**Key Learning & Future Work**
- The complex interplay of neurodevelopmental and mental health needs in these children evidenced that mainstream neuro-developmental pathways with MDT & mental health inputs are essential. Care experienced children are also disproportionately affected by FASD.
- This evaluation identified a need for tailored intervention strategies at both home & school as well as improved supports for parents/carers.
- Improving knowledge of FASD is urgently required alongside profession specific training in assessment, diagnosis and intervention.
- FAAST now has a national consultancy, training, research, & pathway development remit to encourage implementation of multiagency assessment and support services for those affected by prenatal alcohol exposure (see the new SIGN guideline published January 2019).¹
- As a priority we are furthering research around families, carers & individuals’ perspectives of the lived experience of FASD & the diagnosis.
- Having raised awareness in 5,000 individuals across Scotland, we will roll out Scotland-wide e-learning resources to foster knowledge of FASD across health & social care partnerships, education & the third sector. This will include input from those with lived experience of FASD.

**FASD is the most common neurodisability & has a significant impact on health, education, social care & the 3rd sector.**

FASD is preventable. Fetal Alcohol Spectrum Disorders are everybody’s business!

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⁴. SIGN 156. Children & Young People Exposed Prenatally to Alcohol: https://www.sign.ac.uk/assets/sign156.pdf

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