



Department
for Work &
Pensions

Continuing Professional Development (CPD) Neurodiversity/ASD

HAAS Core Training and Guidance

November 2025

Foreword

This training and guidance document has been produced by the Department for Work and Pensions (DWP) and forms part of a suite of Core Training and Guidance Materials (CTGM) for PIP, WCA and Specialist Benefits. Throughout the CTGM, the abbreviations 'HP' and 'HCP' will be used interchangeably for the term 'health (care) professional'. Suppliers must use CTGM to inform the development of training product(s) for their health care professionals who conduct assessments on behalf of the DWP.

All HPs undertaking assessments on behalf of DWP must be registered practitioners who have also met requirements around training, experience, and competence in the relevant benefit areas. Health care professionals should be mindful of their regulatory body requirements and consider all applicable regulatory body guidance.

In addition, this is not a stand-alone document, and forms only a part of the suite of CTGM available to Suppliers. All relevant DWP assessment guidance (which forms an integral part of that training) must be read in conjunction with the CTGM, as it provides information on DWP's scope and intention for the relevant benefit stream.

The clinical content of DWP's CTGM is, where applicable, informed by national guidance such as National Institute of Health and Care Excellence (NICE) guidelines and is intended for educational purposes for use in benefit assessment only. All NICE guidance is subject to regular review and may be updated or withdrawn. NICE accepts no responsibility for the use of its content in this product.

End users of this guidance shall not place sole reliance on the content of any NICE guidance or NICE Clinical Knowledge Summary (CKS) referred to within this guidance and are responsible for validating any NICE CKS guidance, advice, findings, asserted facts, and/or conclusions ("Guidance") using independent professional clinical judgment. End users of this CTGM and Guidance acknowledge that the understanding of clinical conditions, diagnosis, and treatment is ever-evolving, as is the understanding of drugs and associated adverse effects

Although the CTGM may be of interest to non-medical readers, some of the information may not be readily understood without background clinical knowledge and an awareness of the other training given to HPs. It is not intended to cover all the contractual requirements placed on Suppliers, their full business processes, or work carried out by DWP to monitor and manage Supplier performance.

Document Control

Document History

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Changes since last version

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WCA_CPD_027_V1_Autism_Spectrum_Disorder_Awareness

PIP_CPD_CC_044_V2_Final_Learning_Disabilities_and_Autism_Spectrum_Disorder

PIP_CPD_CC_020_V2_ASD_Workbook

PIP_CPD_CC_007_V2_Autism_Spectrum_Disorder

PIP_CIR_002_V1_ADHD

PIP_CIR_007_V1_Autism

Issue Control

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Introduction

This document is part of the ongoing training programme for Health Professionals (HPs) and is designed as a learning tool to consolidate Health Professional's knowledge and understanding.

This document consists of 3 sections. Section 1 is applicable to all assessment types whilst section 2 and 3 contain information relevant only to that specific assessment type

Section 1: condition specific content applicable for all assessment types along with any generic functional impact

Section 2: PIP specific content related to functional impact on assessment

Section 3: WCA specific content related to functional impact on assessment

The overall aim of this document is to improve understanding of Neurodiversity and Autistic Spectrum Disorder (ASD) including typical symptoms, diagnosis, treatments and how these may impact upon claimant function. Additionally, to enhance understanding of how this diagnosis may impact within the WCA and PIP assessment process.

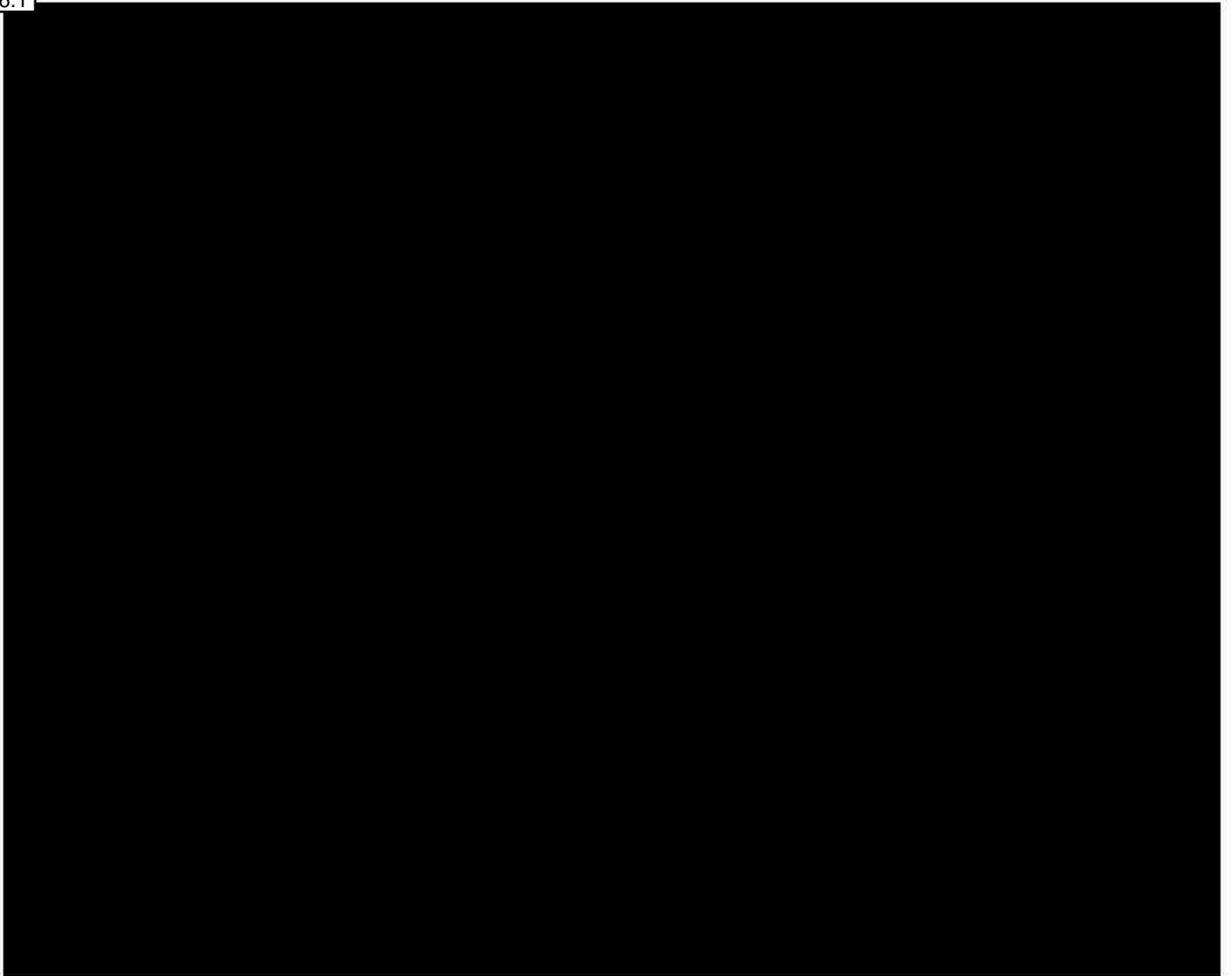
This document is intended to provide an overview of the condition and functional effects. HPs have a responsibility to ensure that they have the appropriate knowledge of a claimant's condition(s) or disability and likely functional restriction(s) prior to assessment and should refer to other appropriate evidence-based resources if required.

Within the Core Training and Guidance material there is no reference to any specific branding, however in the live environment HPs/HCPs are expected to document the relevant information, including reference to any specific brands, as described by the claimant.

All case scenarios or examples in this document are fictitious and have been solely designed to support learning activities.

Section 1: Clinical Overview

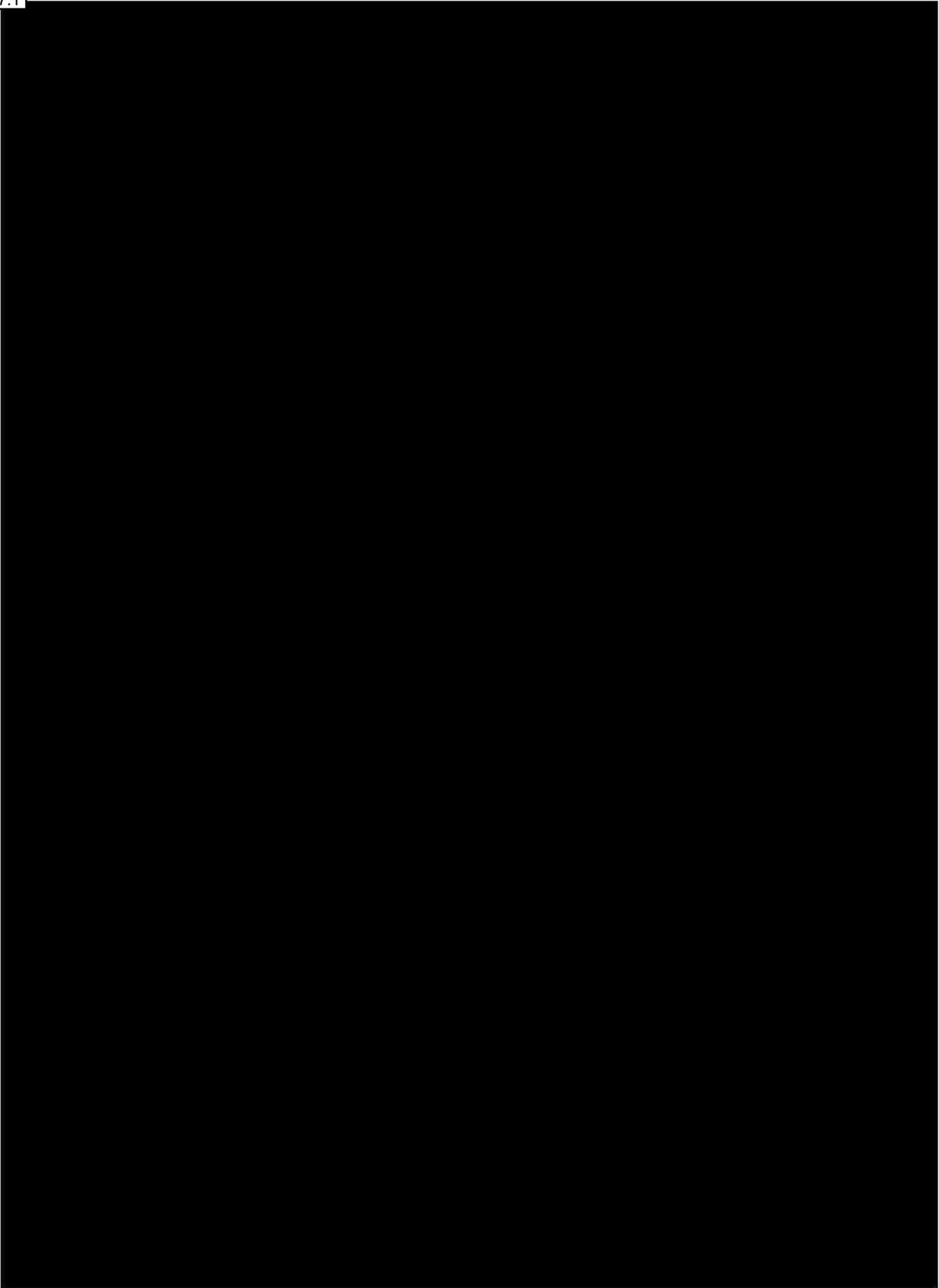
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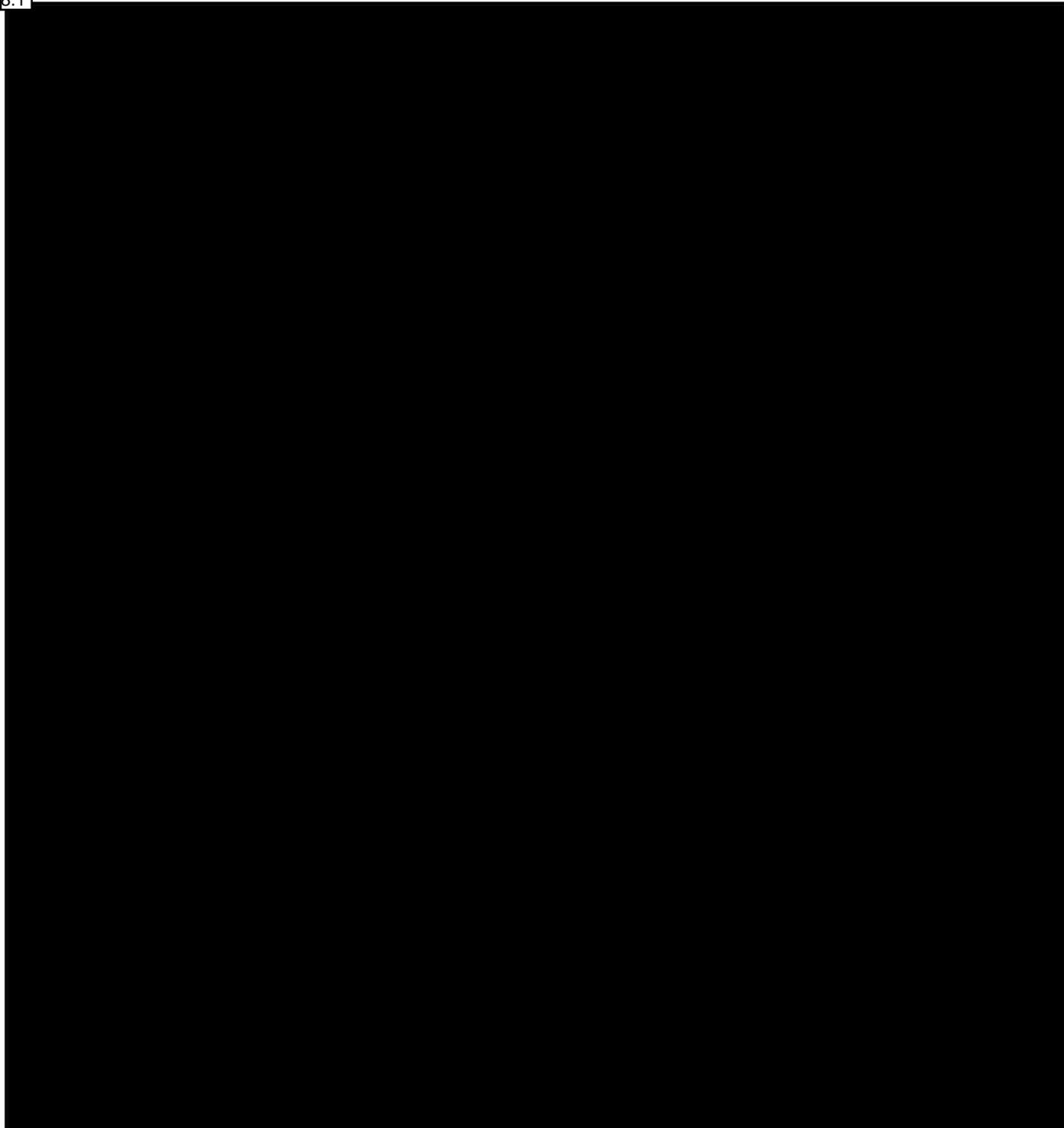


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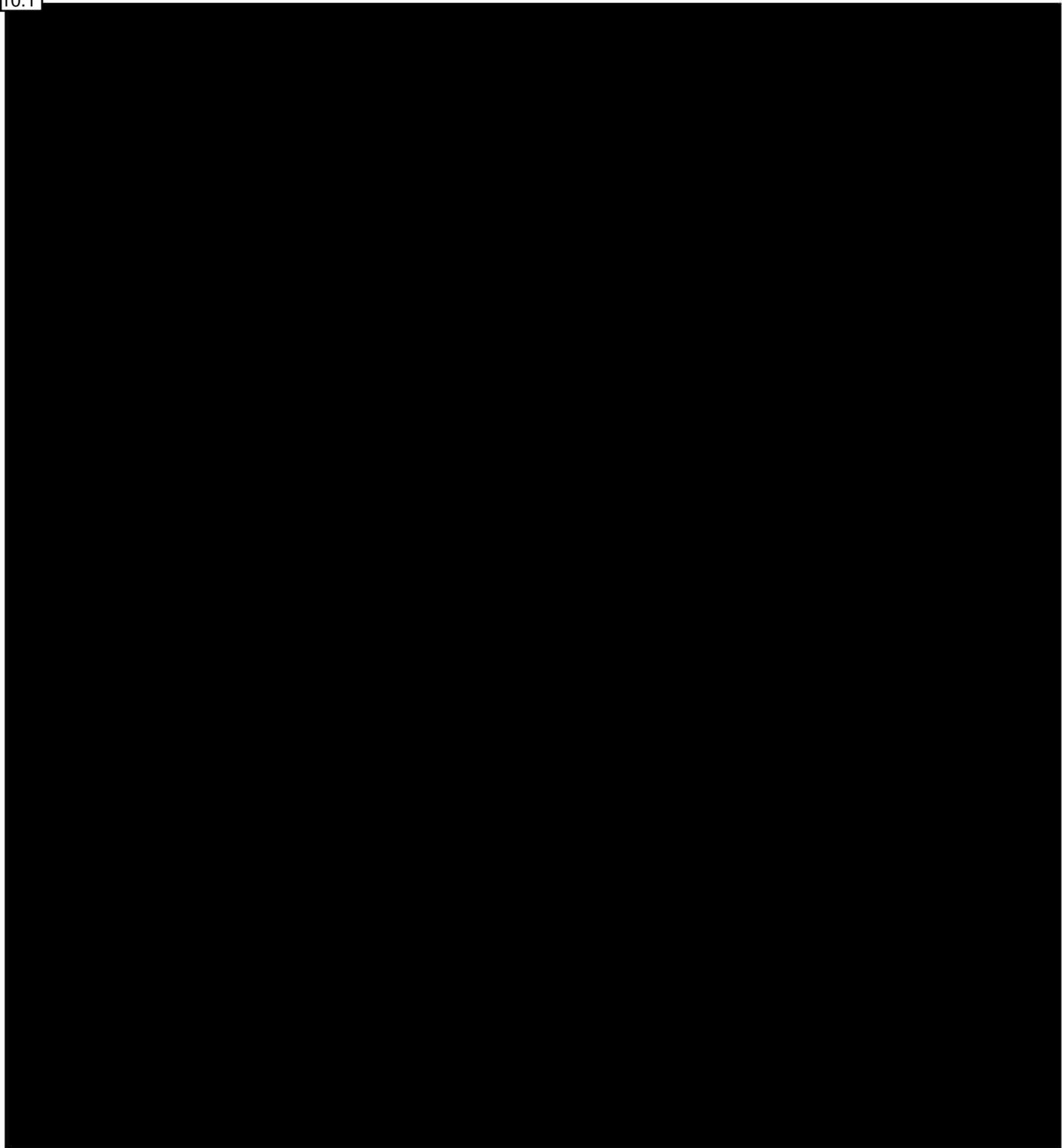
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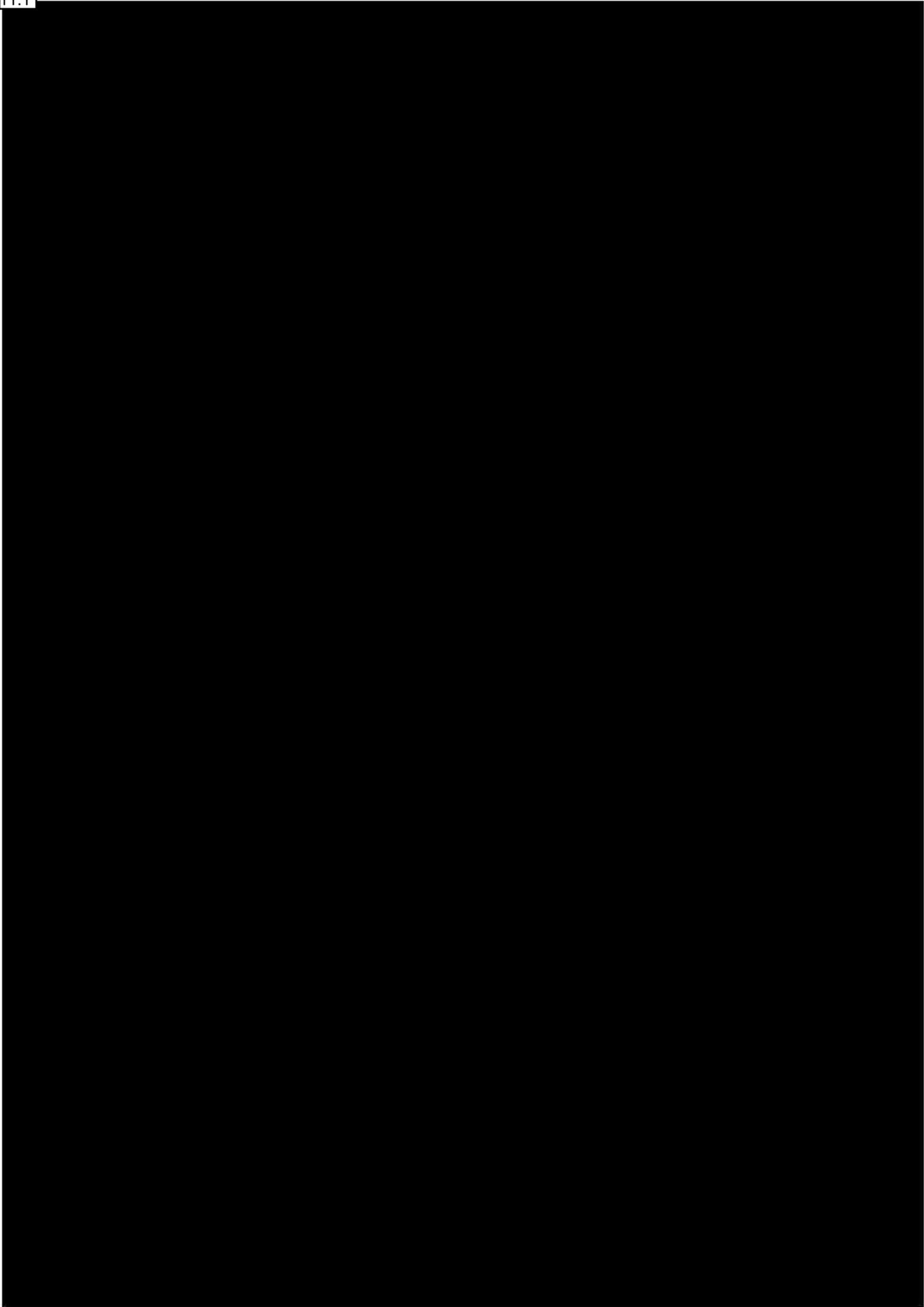
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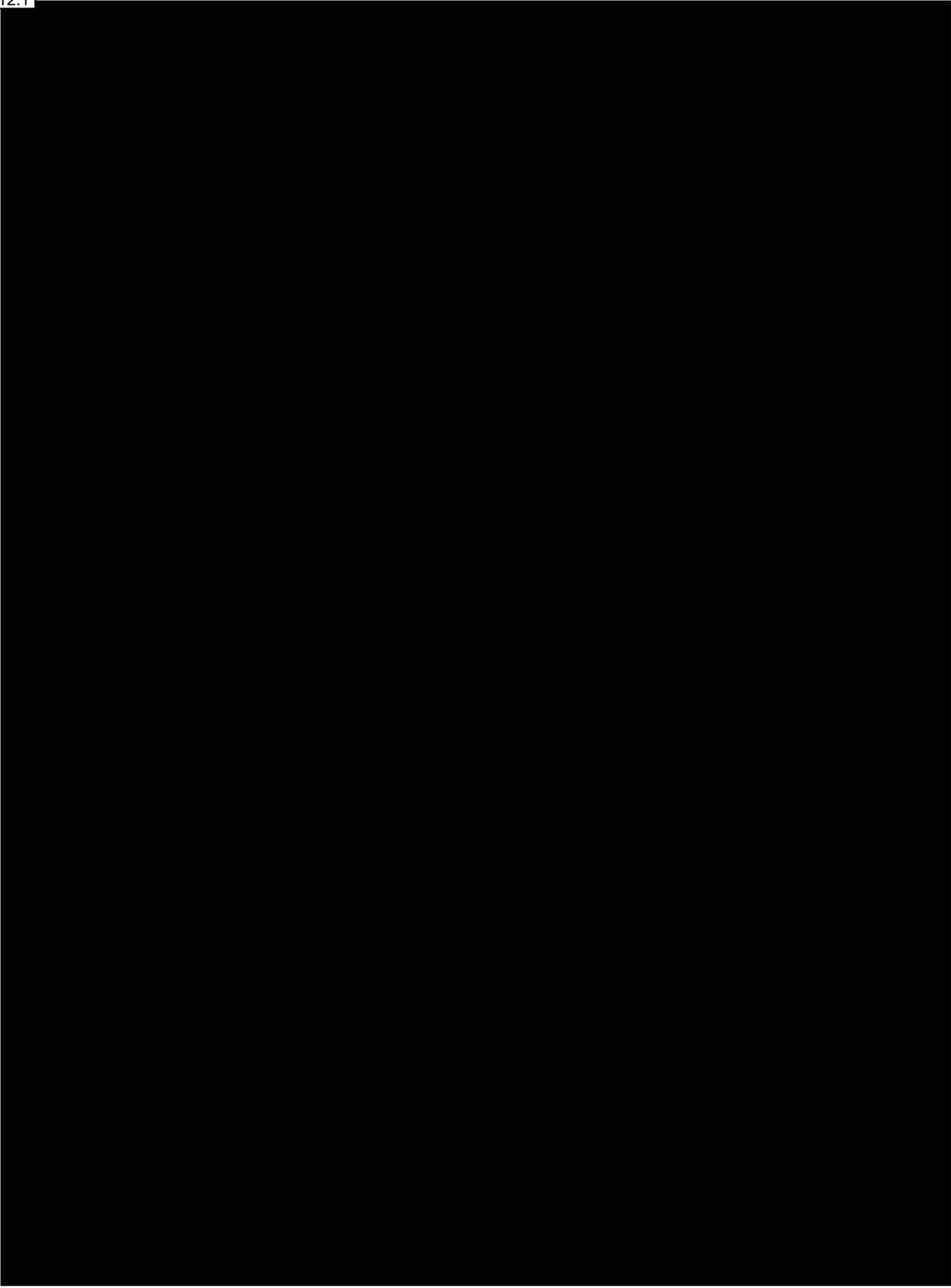
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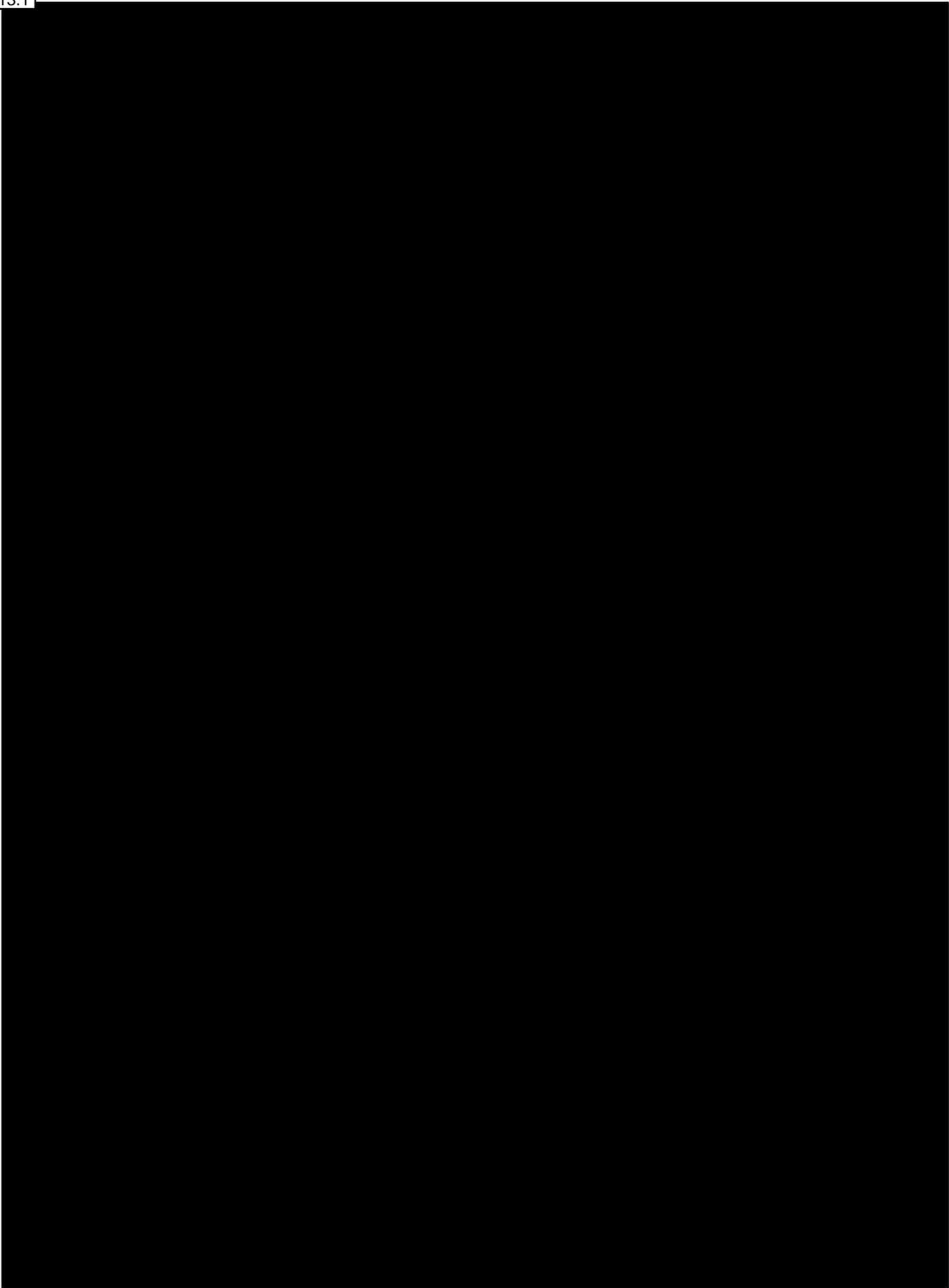


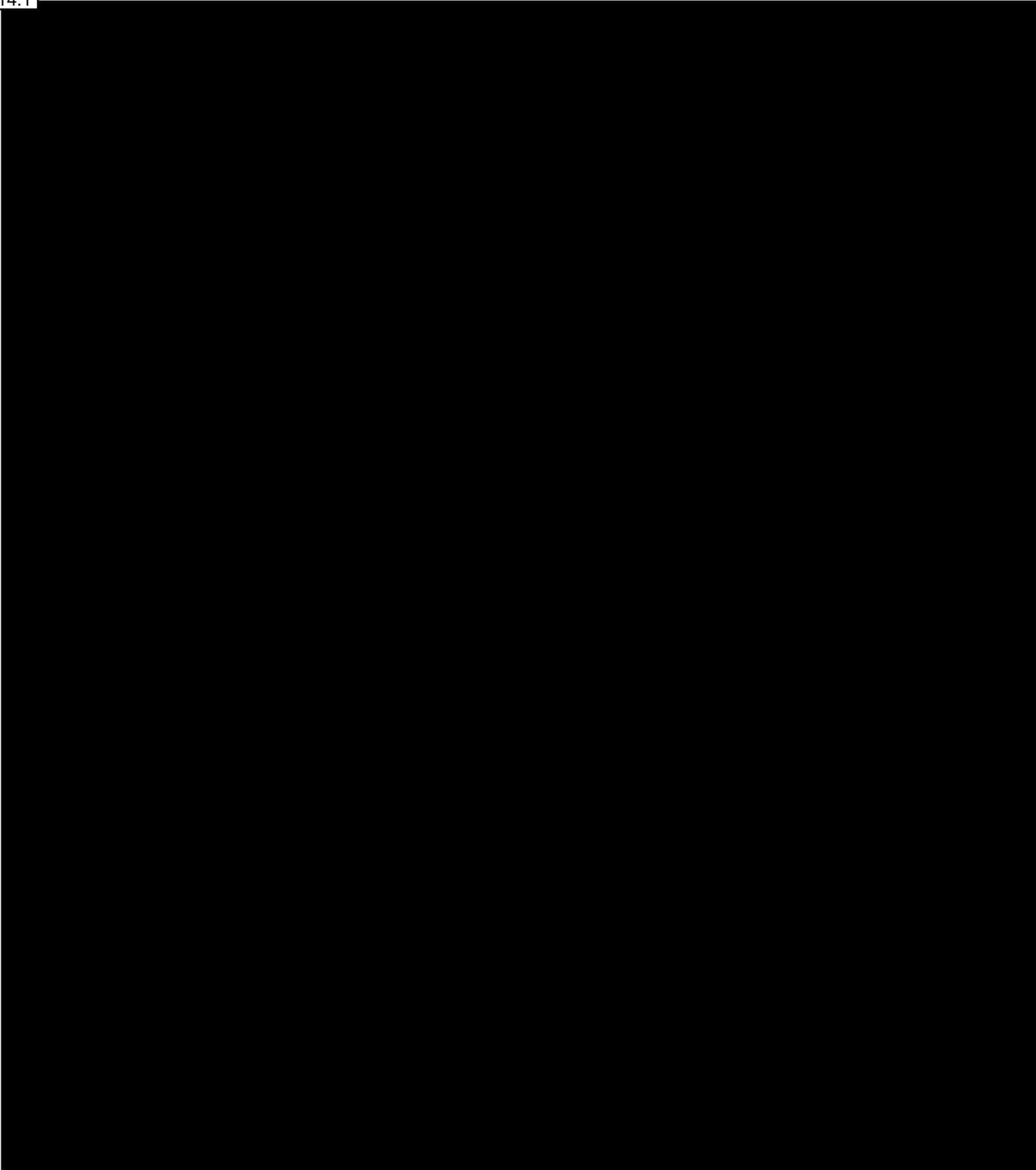
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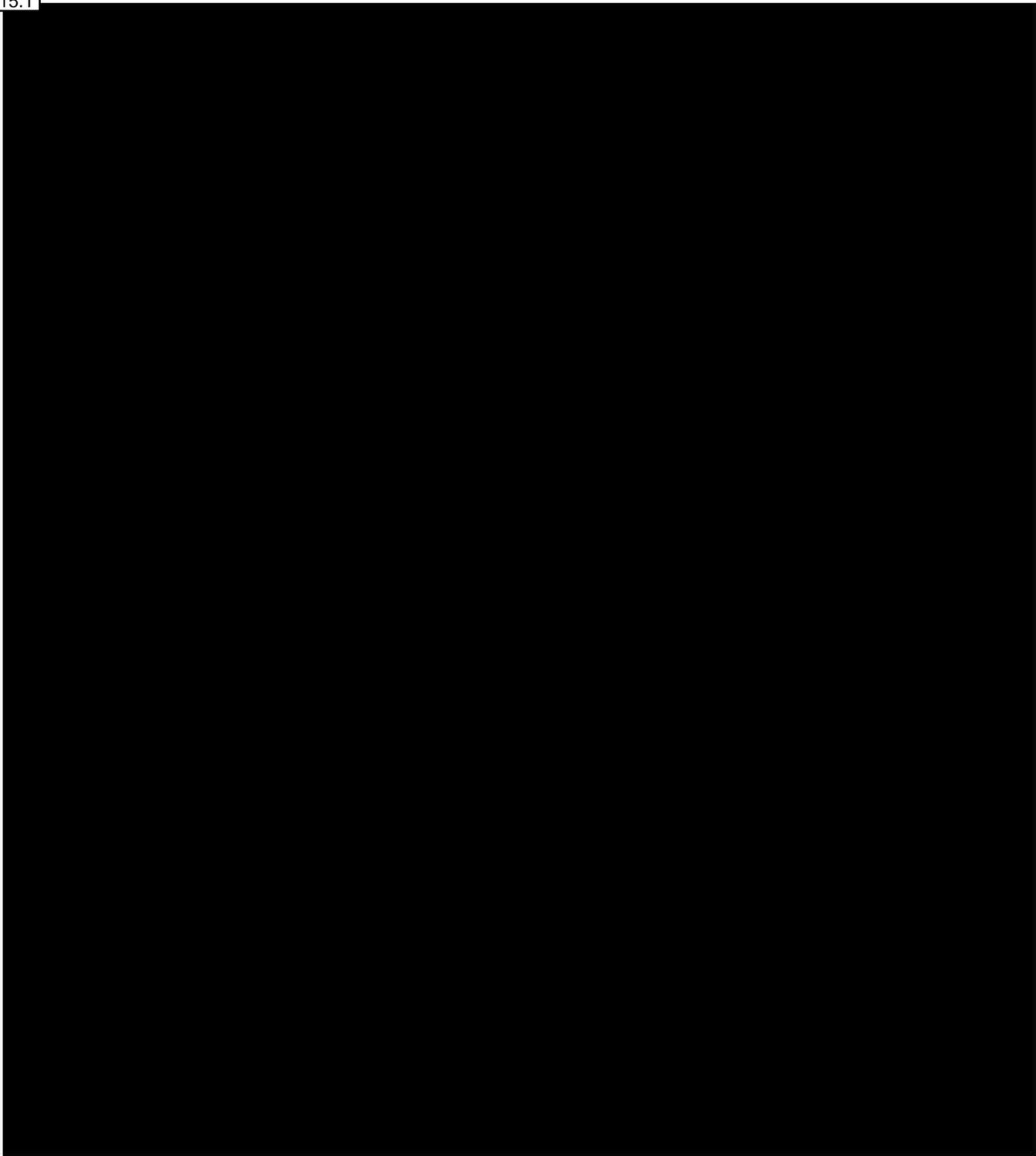






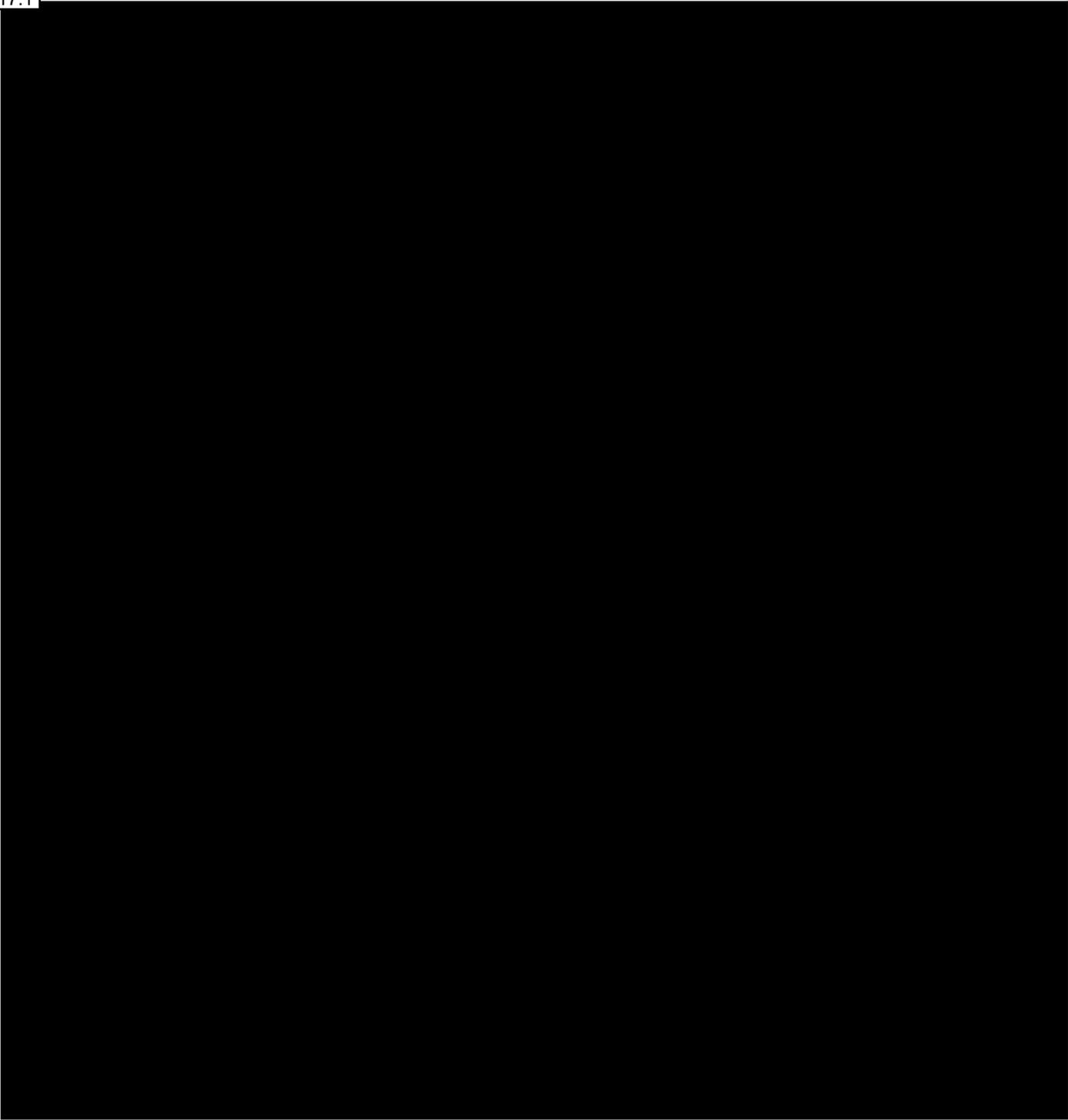
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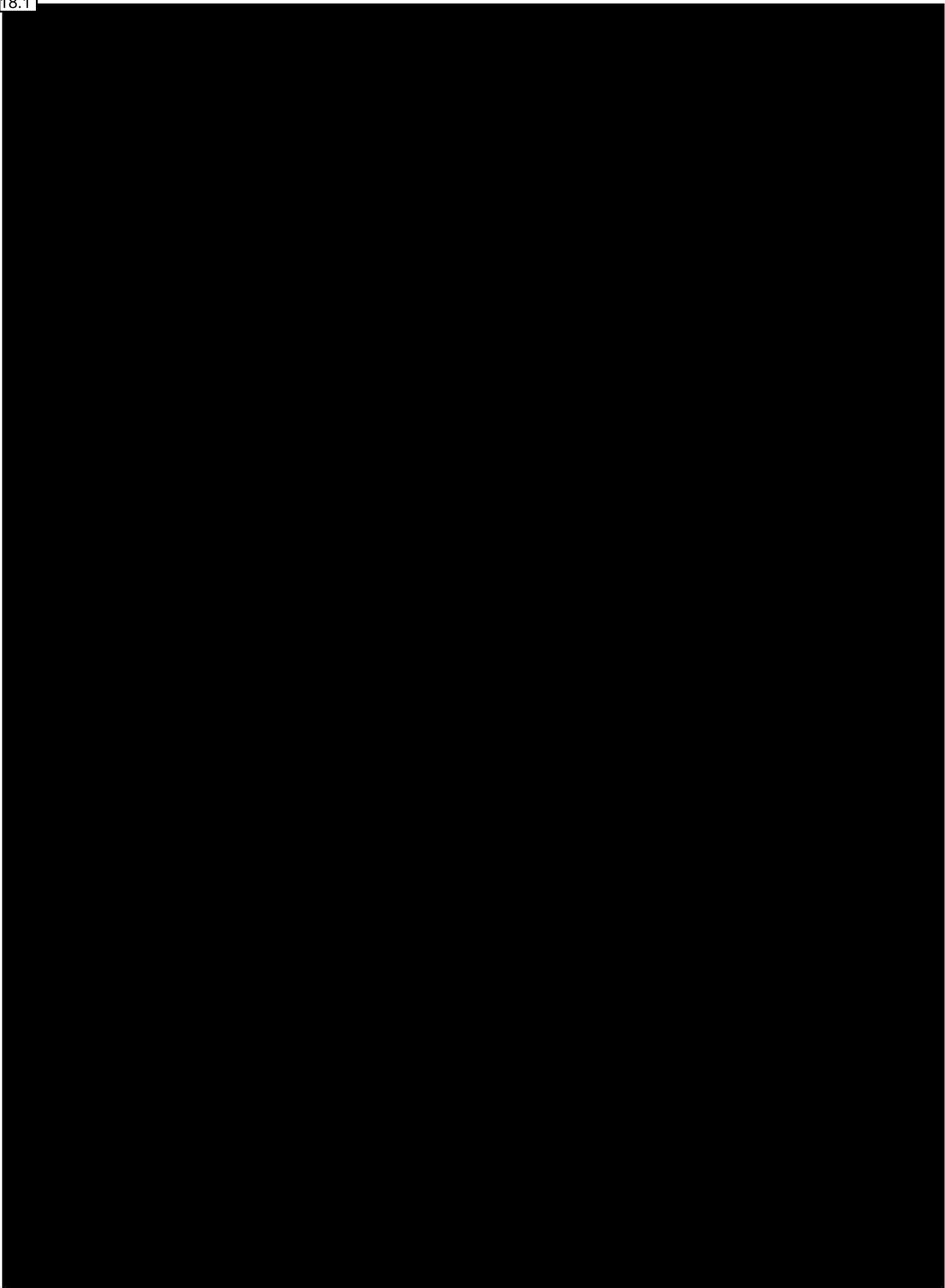
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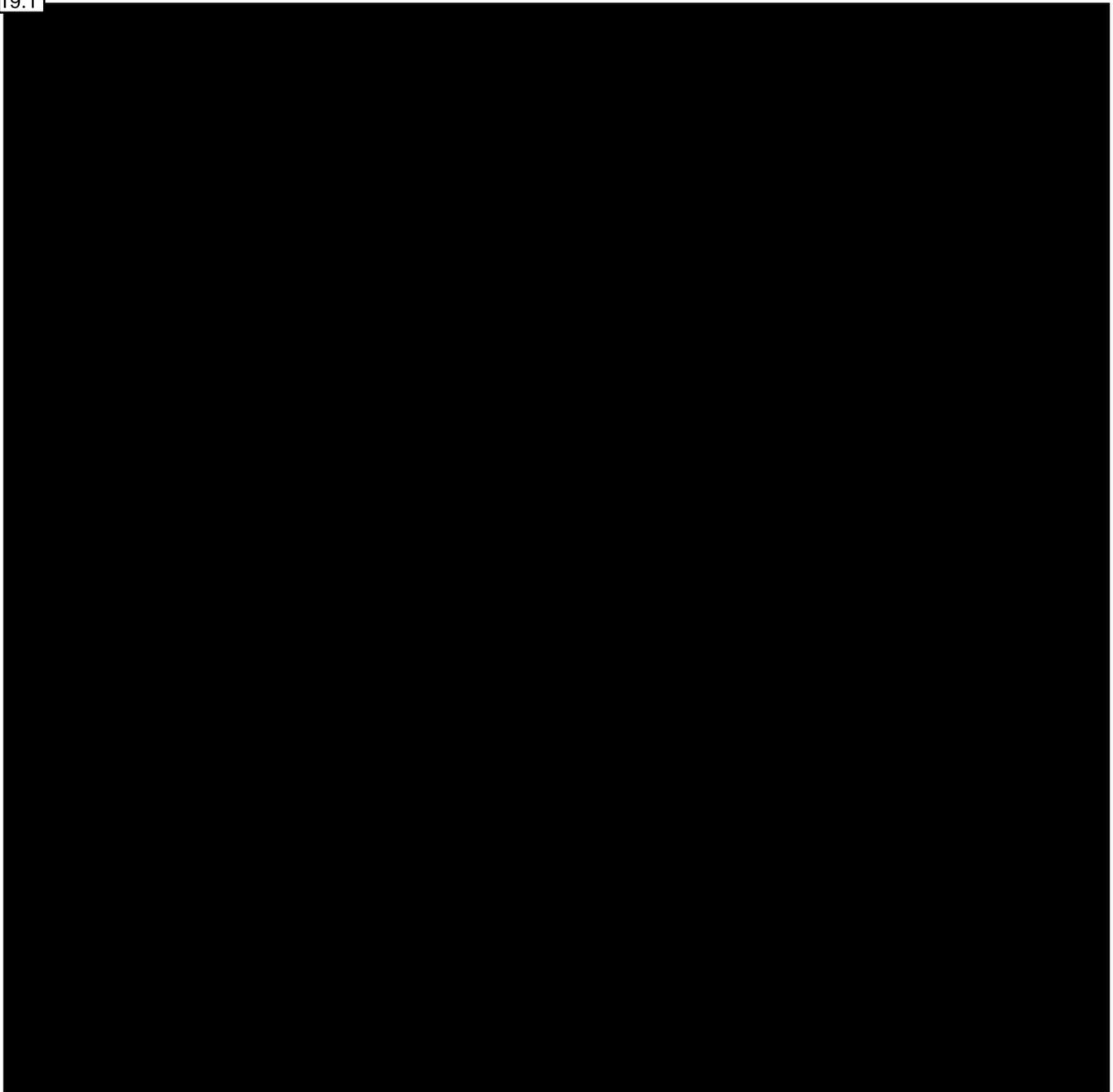
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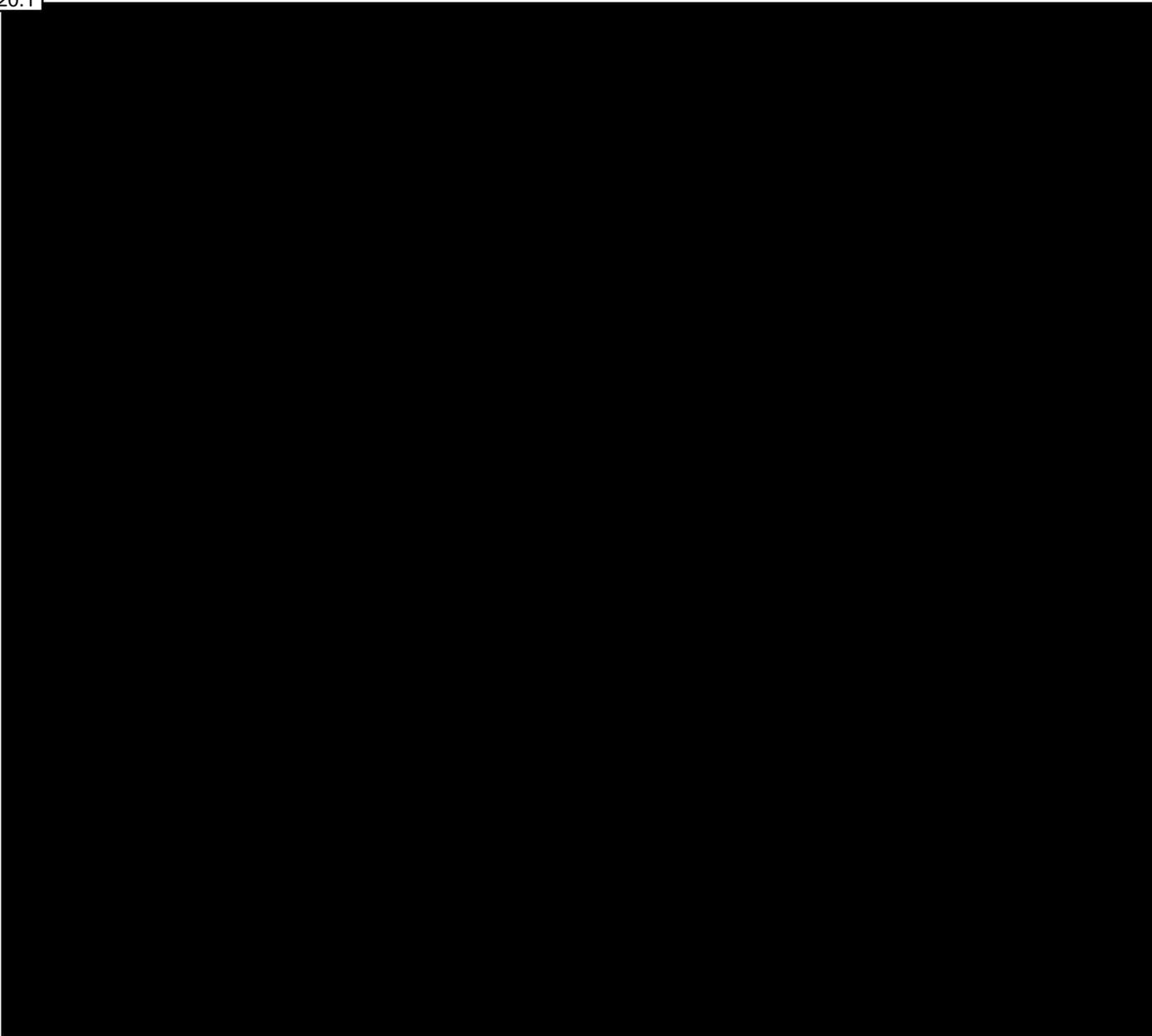




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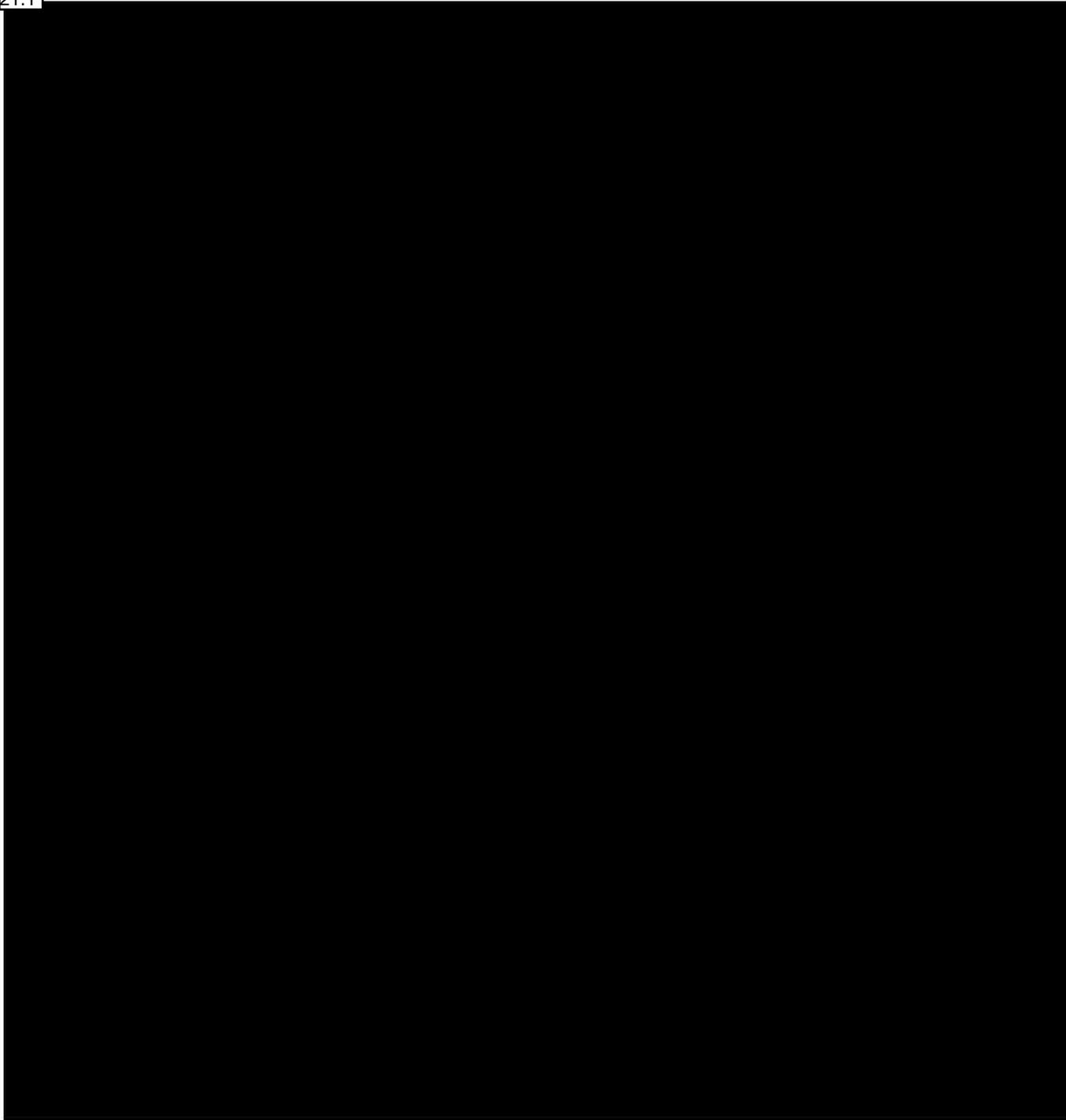
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Section 2: PIP

ASD and the PIP Process

A claimant with ASD may have an Appointee (a person formally nominated to act on their behalf), or support from a family member, carer, Community Psychiatric Nurse or other person who will usually ensure that the claimant is supported throughout the process and in those circumstances, the claimant would not be classified as requiring “Additional Support”. In some cases, however, claimants may not be able to engage effectively with the claims process, due to a lack of mental capacity or insight – for example, they may not understand or care about the consequences of not returning a claim form and may not have any support from another person who would be able to help them engage with the PIP application process. In the PIP journey such claimants are considered to require additional support from the DWP and elements of the PIP claims process have been adapted to provide further support for this group.

Part 1 of the PIP Assessment Guide provides further information.

The PIP Assessment Guide examples of health conditions that may affect mental capacity and potentially mean a claimant may struggle to engage with the claim process include (but are not limited) developmental disorders such as Autism Spectrum Disorder (ASD). In such cases, the DWP may already have put an Additional Support (AS) marker on the system at the initial claim stage where information was being gathered. The HP then needs to consider the most appropriate approach to completing the assessment for those claimants, be that paper-based review or consultation.

If such a condition is identified at initial review, the claimant may be considered to have Additional Support Needs and every effort should be made to gather further evidence before calling to assessment.

For some claimants, prior experiences may mean that they are no longer able to leave their home or interact with people outside their immediate family. In such cases, attending a consultation centre may not be feasible and other alternative assessment routes such as telephony, video or home consultations, may be more appropriate.

Considerations when assessing claimants with Autism Spectrum Disorder (ASD)

History of conditions:

- Explore the claimant's lived experience of ASD, including any specific triggers that may lead to behavioural responses.
- Consider any coping strategies the claimant uses and whether these are effective or require support.
- Recognise that some difficulties may be persistent and consistent, with minimal day-to-day variation.
- Aim for a balanced understanding of both strengths and challenges. Focus on current functional limitations and the claimant's response to any interventions, treatments, or support.
- Review involvement from formal support services, noting that not all care is provided through NHS pathways.
- Be aware that some claimants may experience co-occurring conditions such as depression or psychosis without formal diagnosis or treatment. Lack of medication or clinical input does not equate to absence of functional restriction. In such cases, a detailed social and functional history, alongside observations from the Mental State Examination (MSE) or if applicable Cognitive State Examination (CSE), can provide valuable insight. Consider initiating the unexpected findings process to alert any relevant health professional if concerns arise.

Social and Occupational History

- **Education:** Consider the type of schooling (mainstream or specialist), any support received (e.g., for learning or behaviour), qualifications achieved, and whether an Educational, Health and Care Plan (EHCP) was in place. Include current study activities and any support needs.
- **Caring Responsibilities:** If applicable, assess whether the claimant cares for children or others, and how they manage these responsibilities.
- **Pets:** If applicable, assess the claimant's ability to care for pets, any challenges faced, and whether support is provided.
- **Mobility and Travel:** Consider whether the claimant has received travel training, who provided it, and its effectiveness. Explore whether they travel independently or with support, and how familiar versus unfamiliar journeys affect their ability. Consider the implications of a familiar journey becoming unfamiliar.
- **Employment and Volunteering:** Review current or past employment, job roles, hours worked, and any reasonable adjustments made. Consider patterns of sickness absence and whether these relate to their condition.
- **Housing:** Assess whether the claimant lives independently, receives support, and the nature, frequency, and effectiveness of that support.

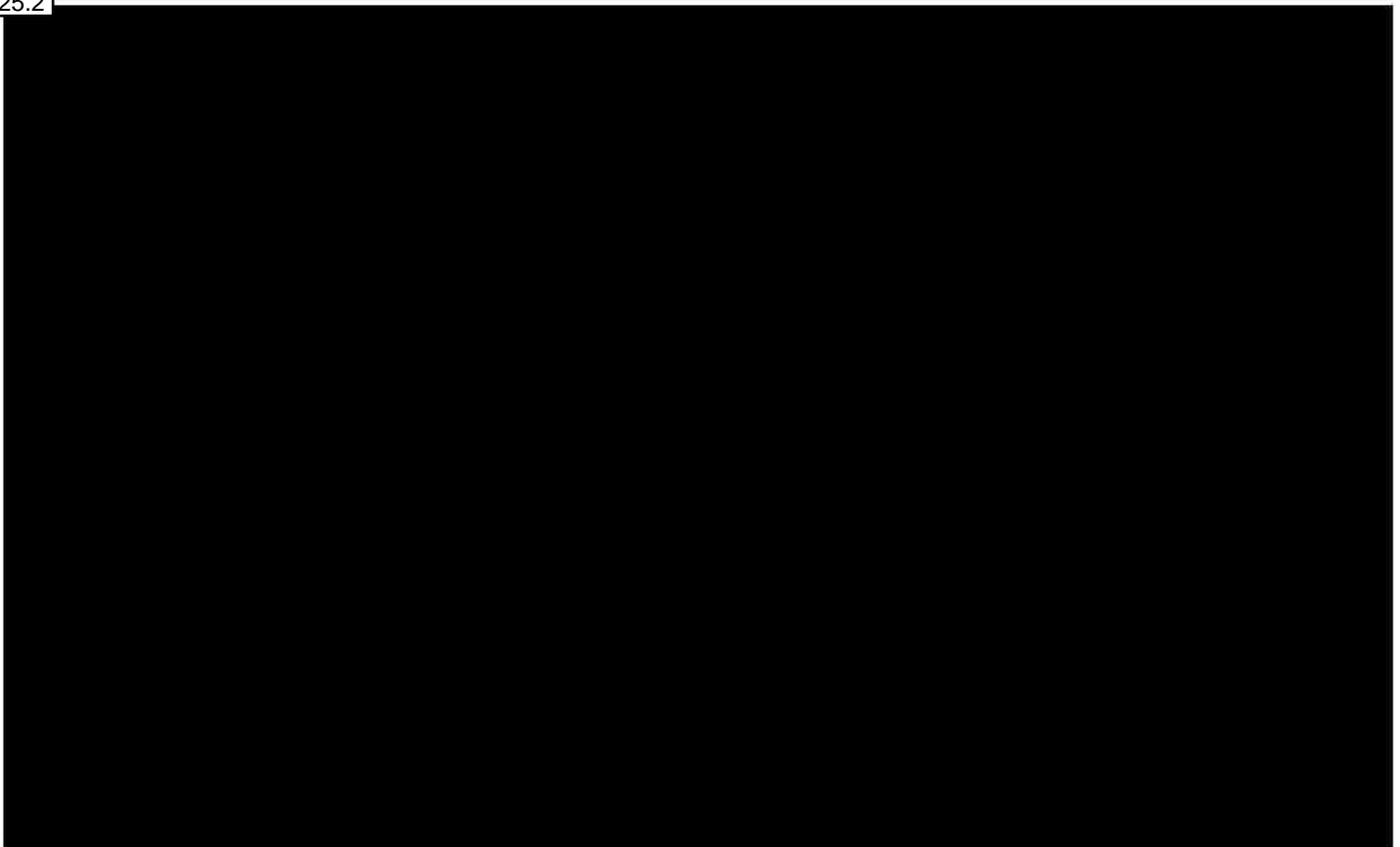
- **Hobbies:** Consider how the claimant spends their time, including hobbies, clubs, and routines.

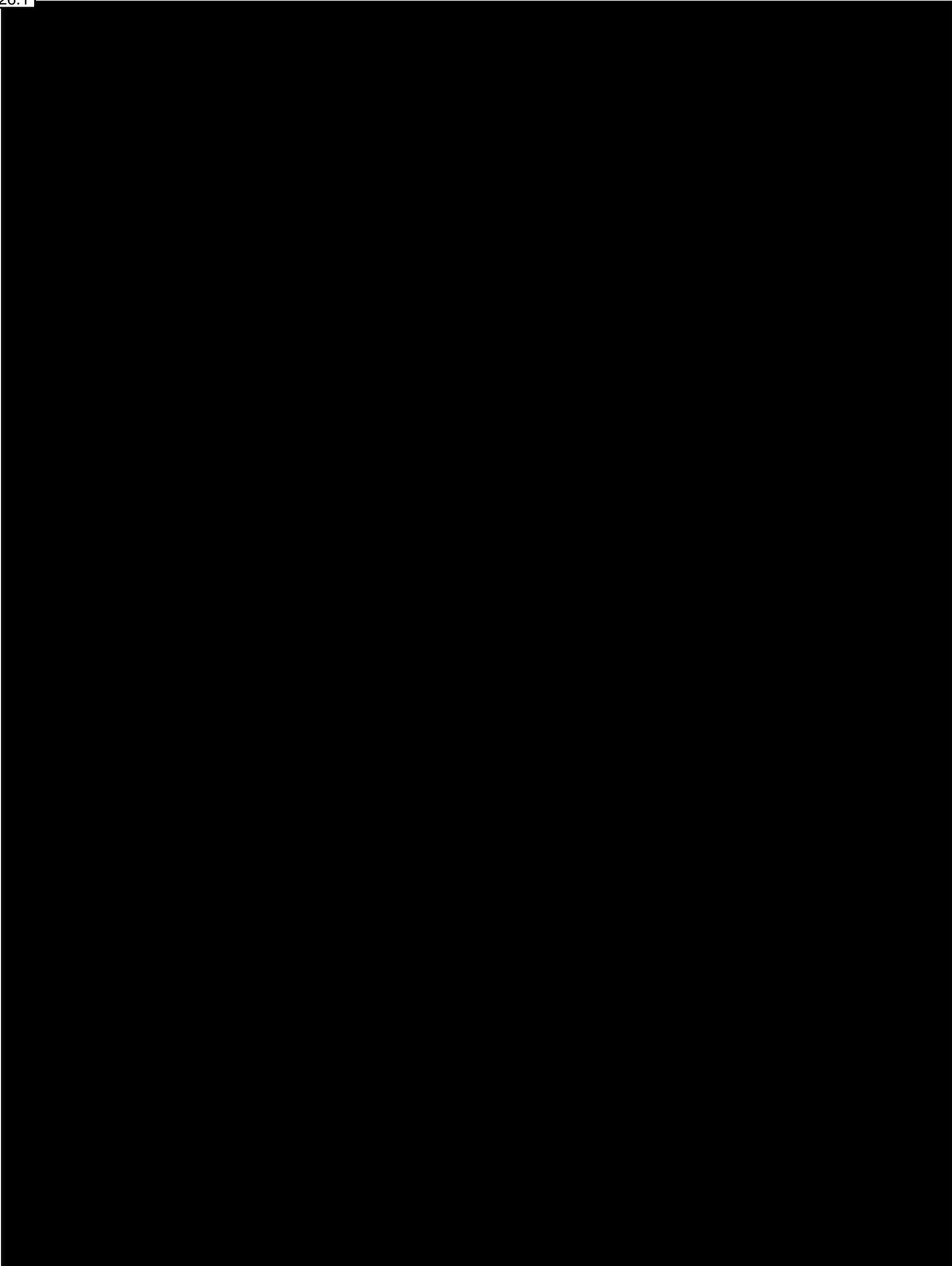
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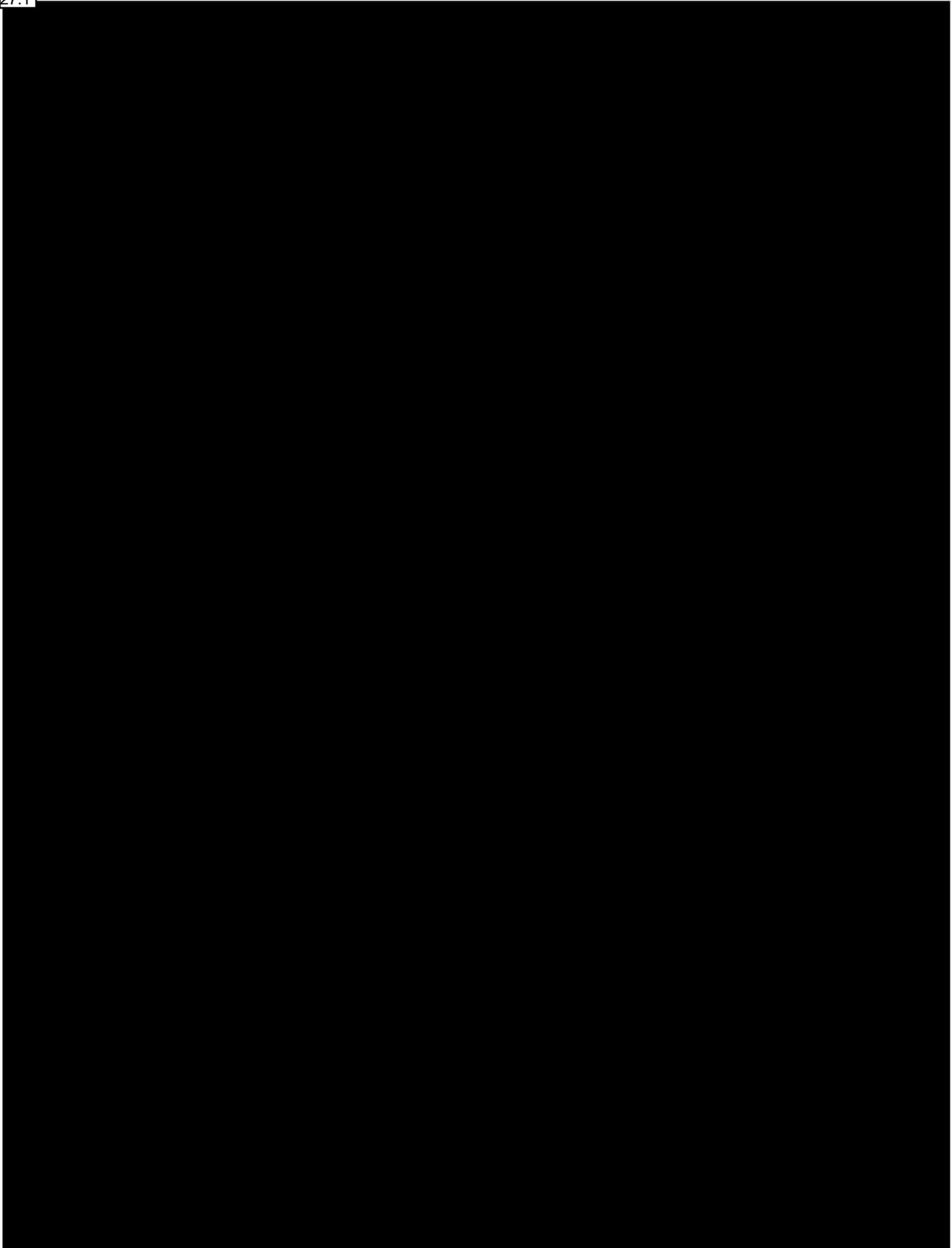


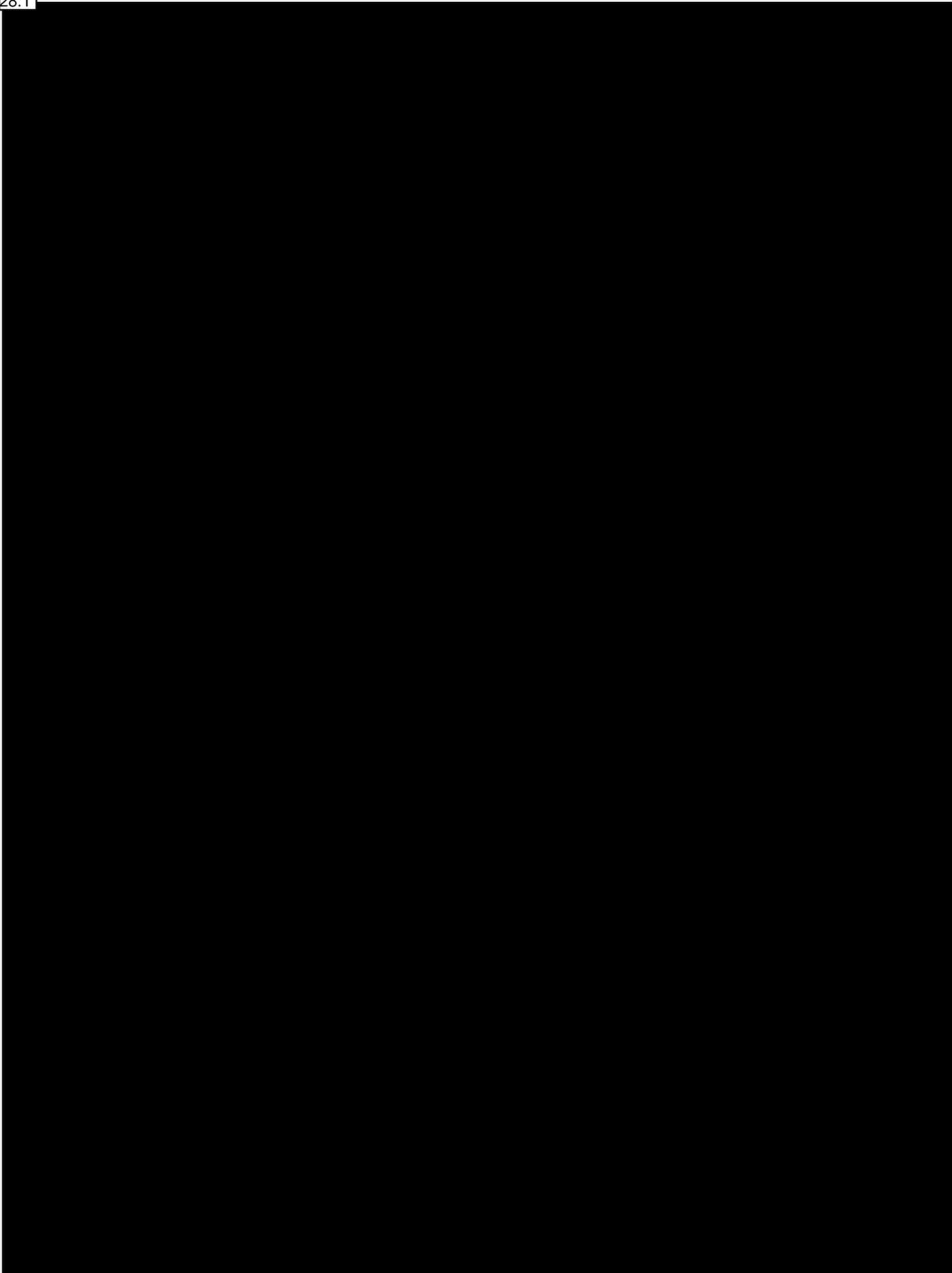
Activity specific considerations for ASD

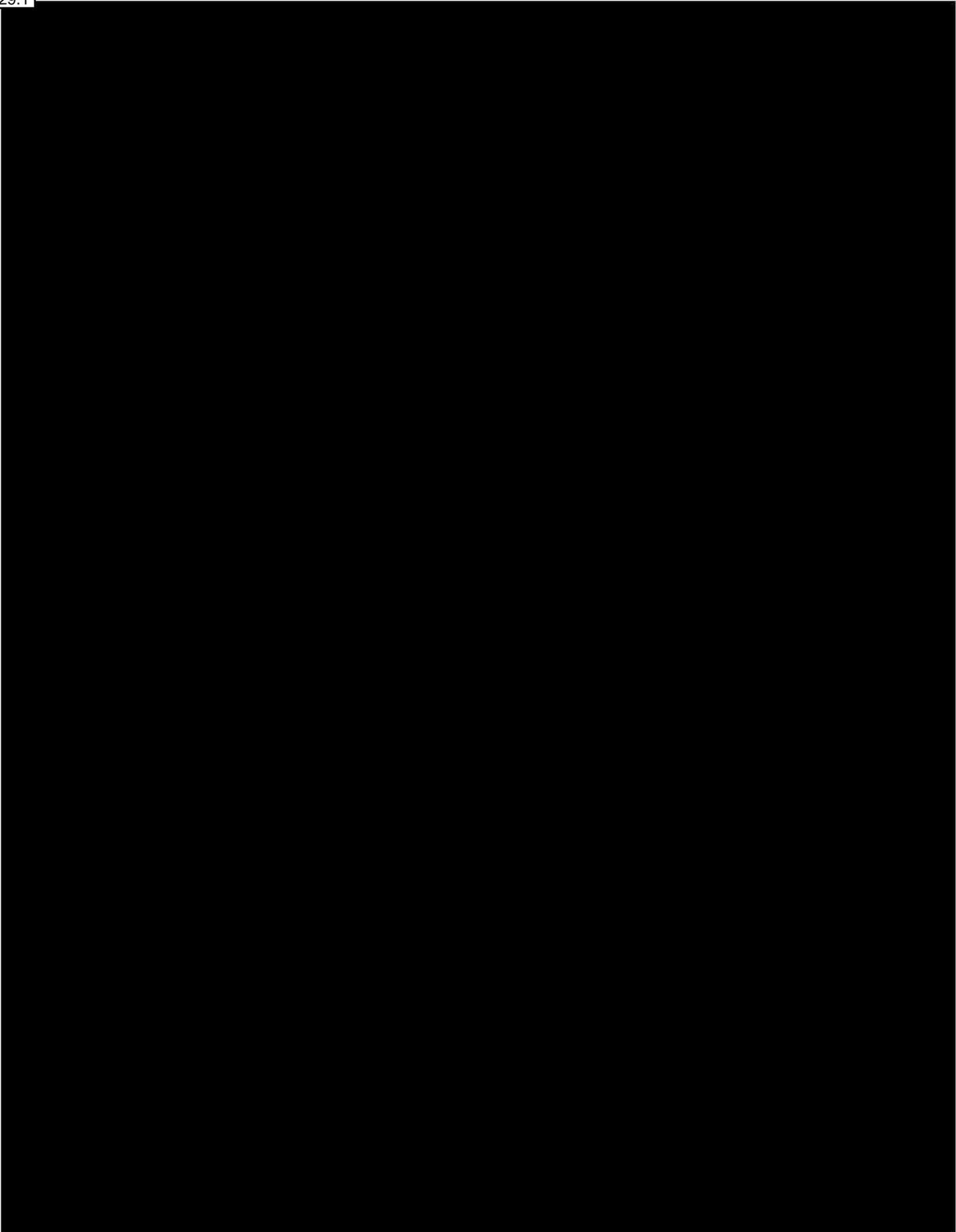
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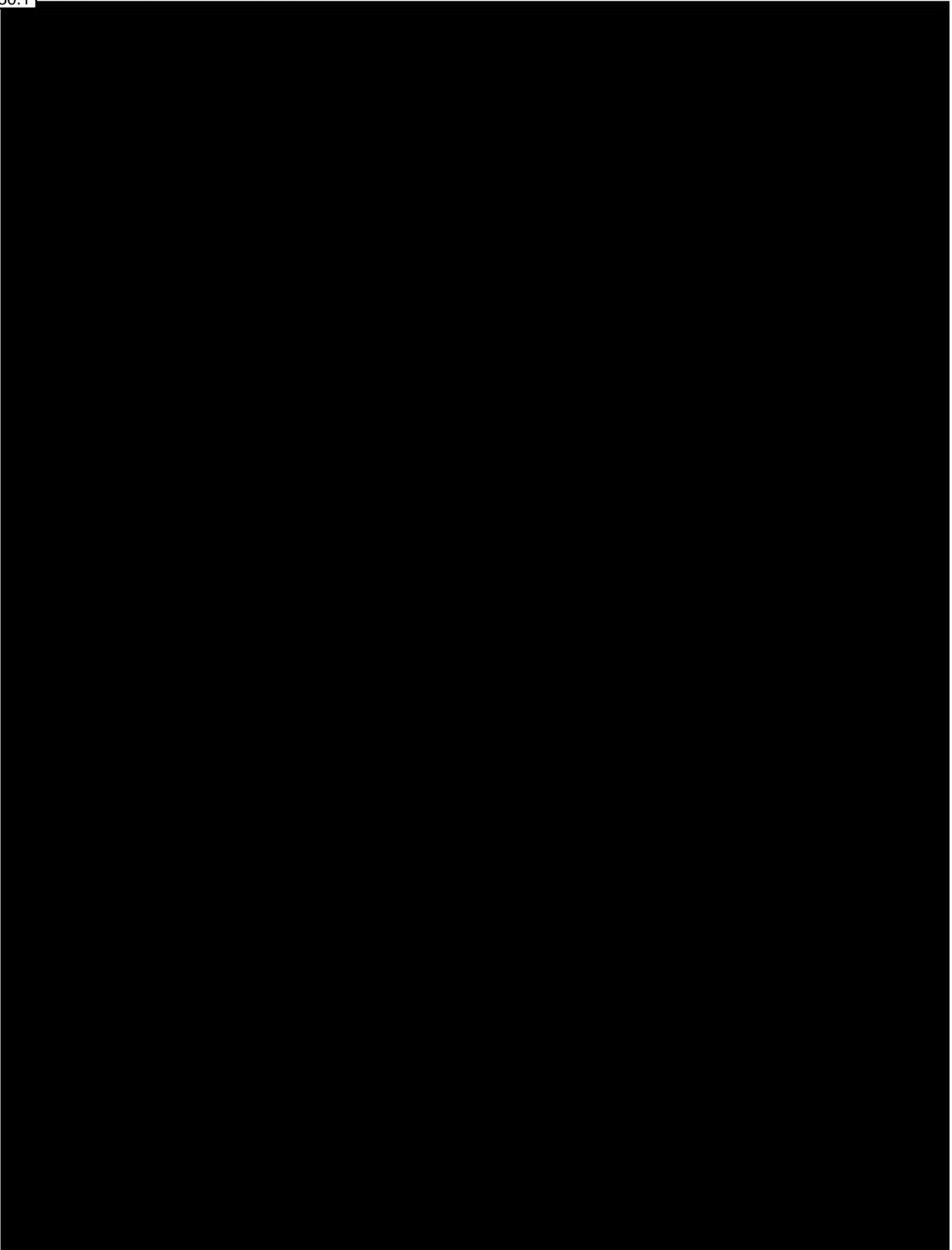






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PIP Case Scenario 1

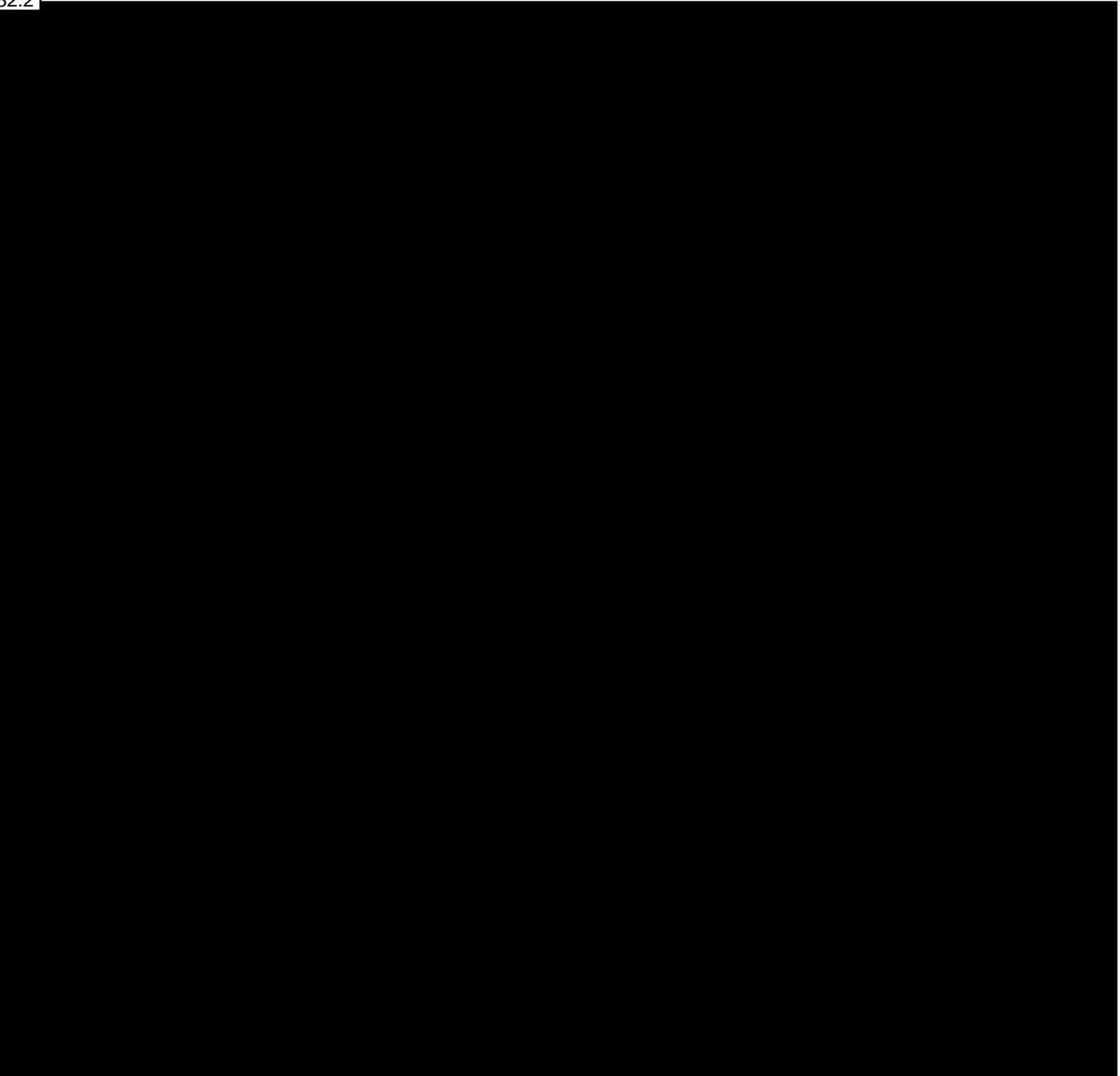


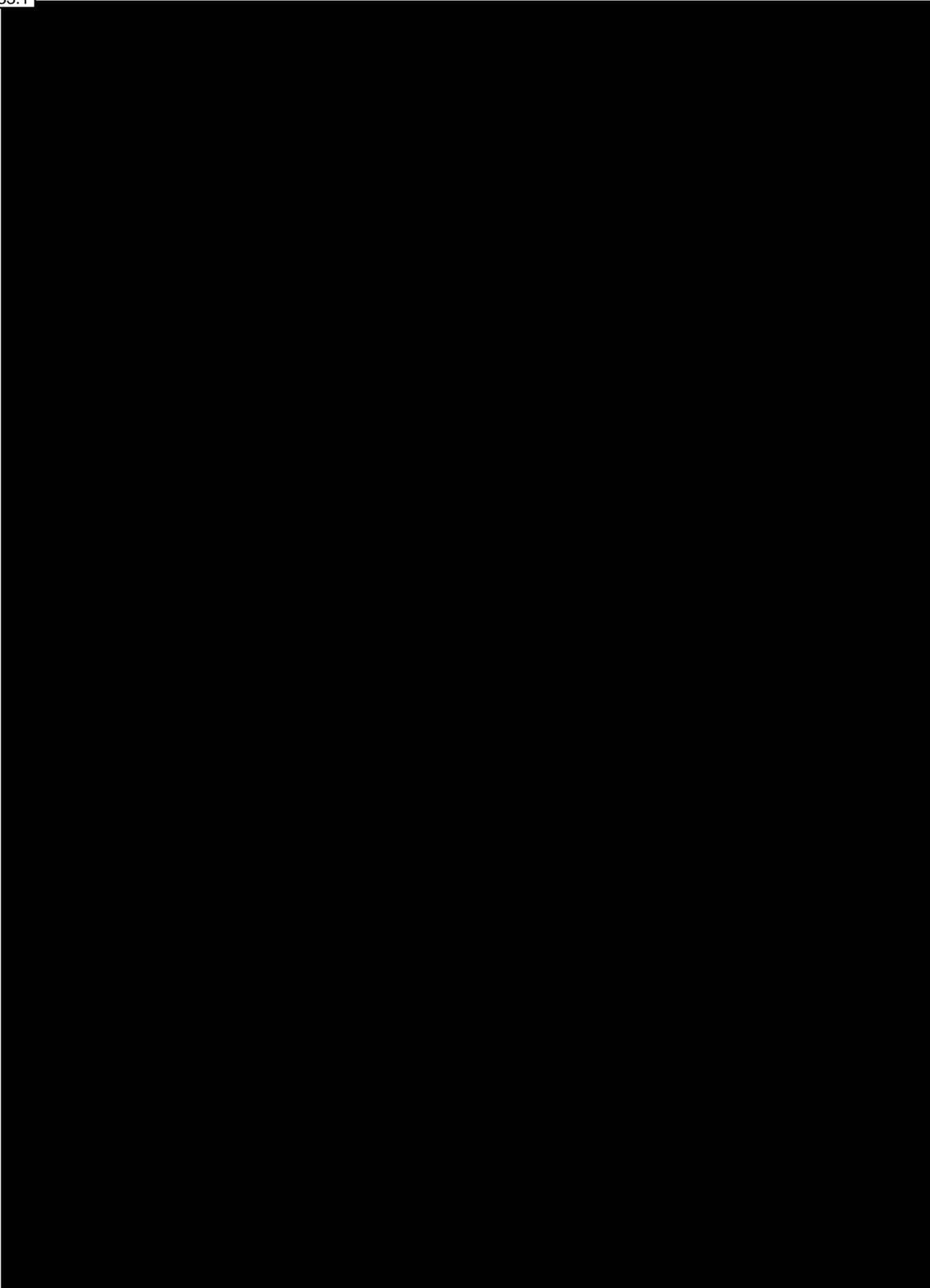
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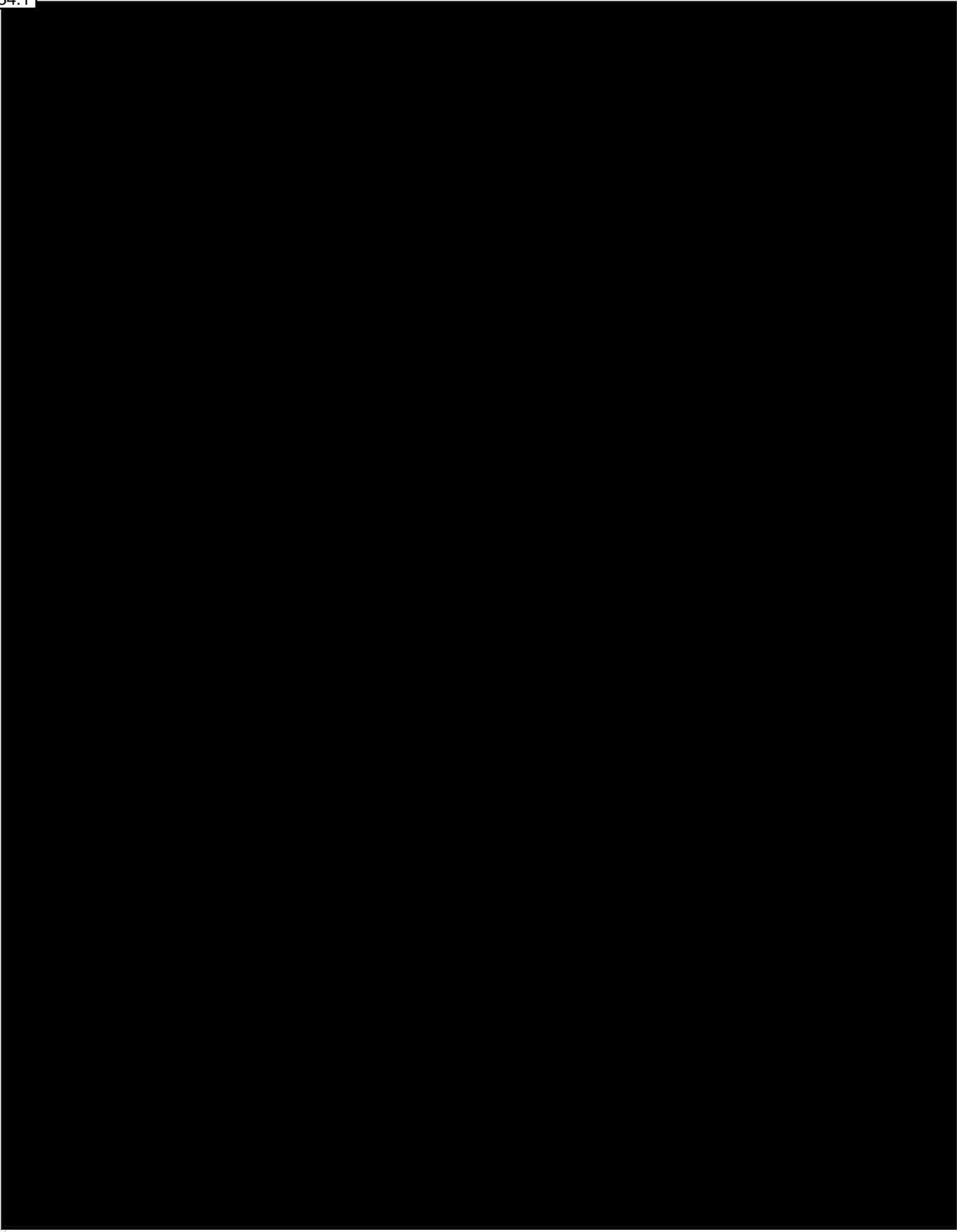


PIP ASD Case Scenario 2

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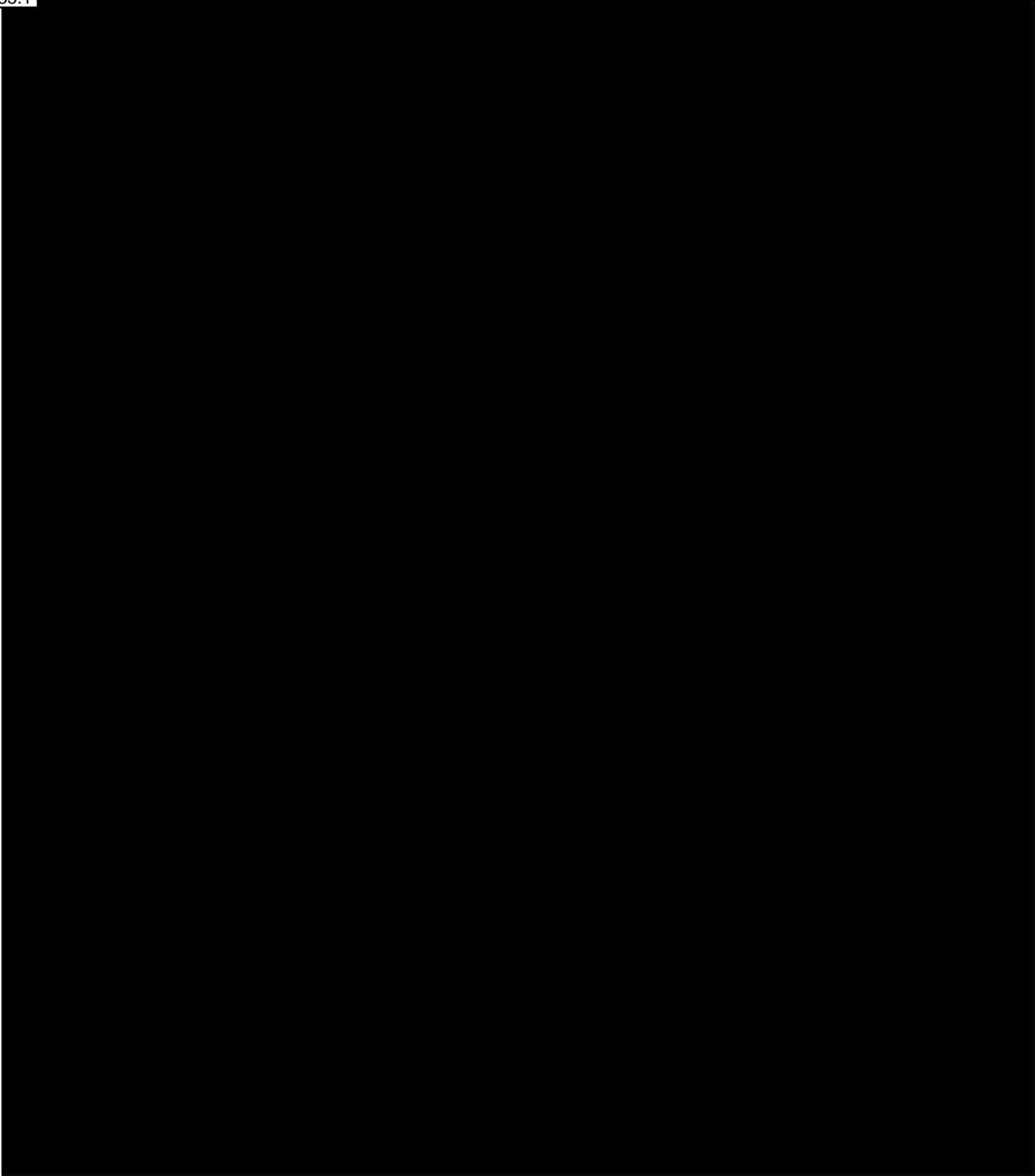


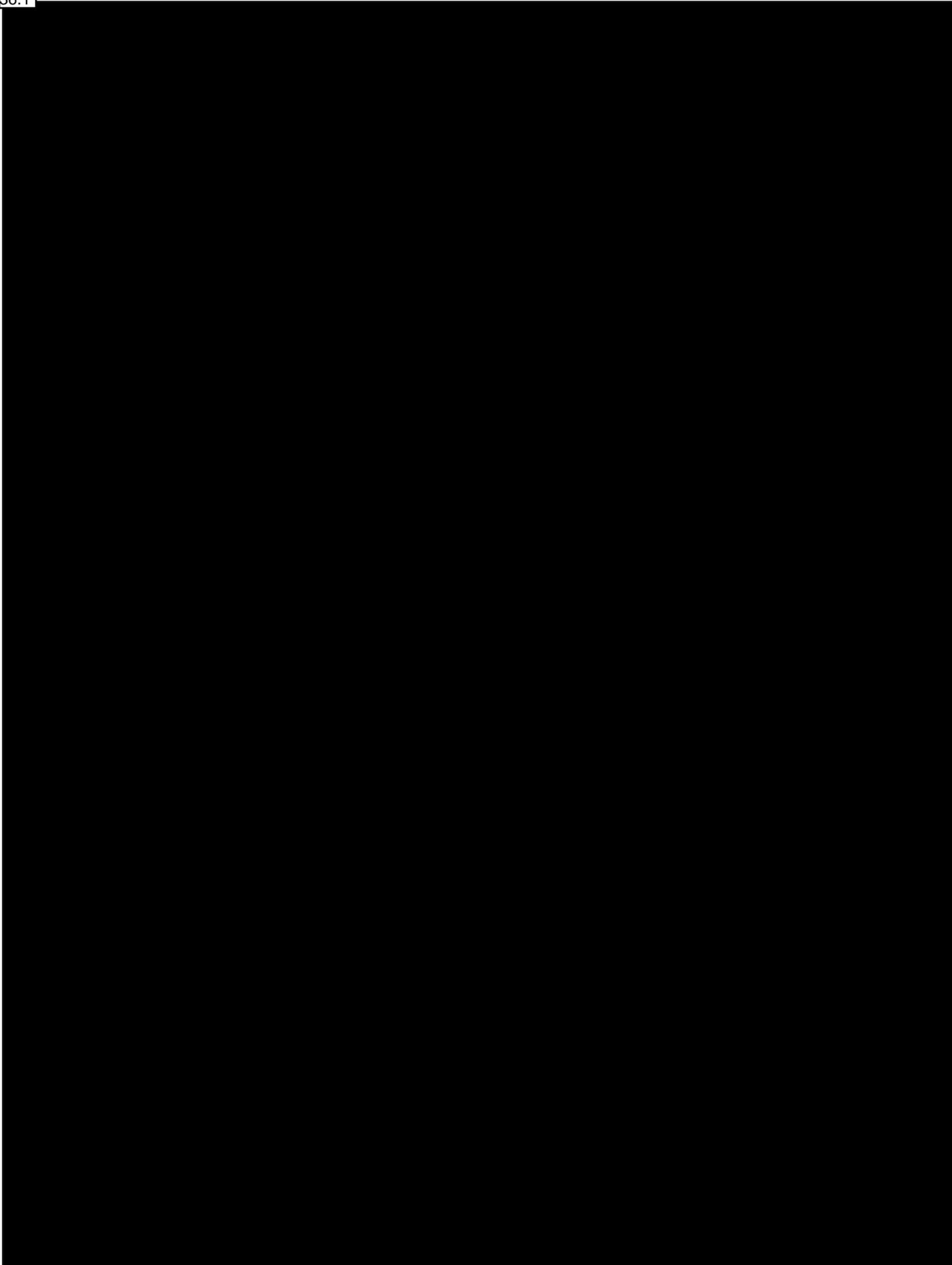


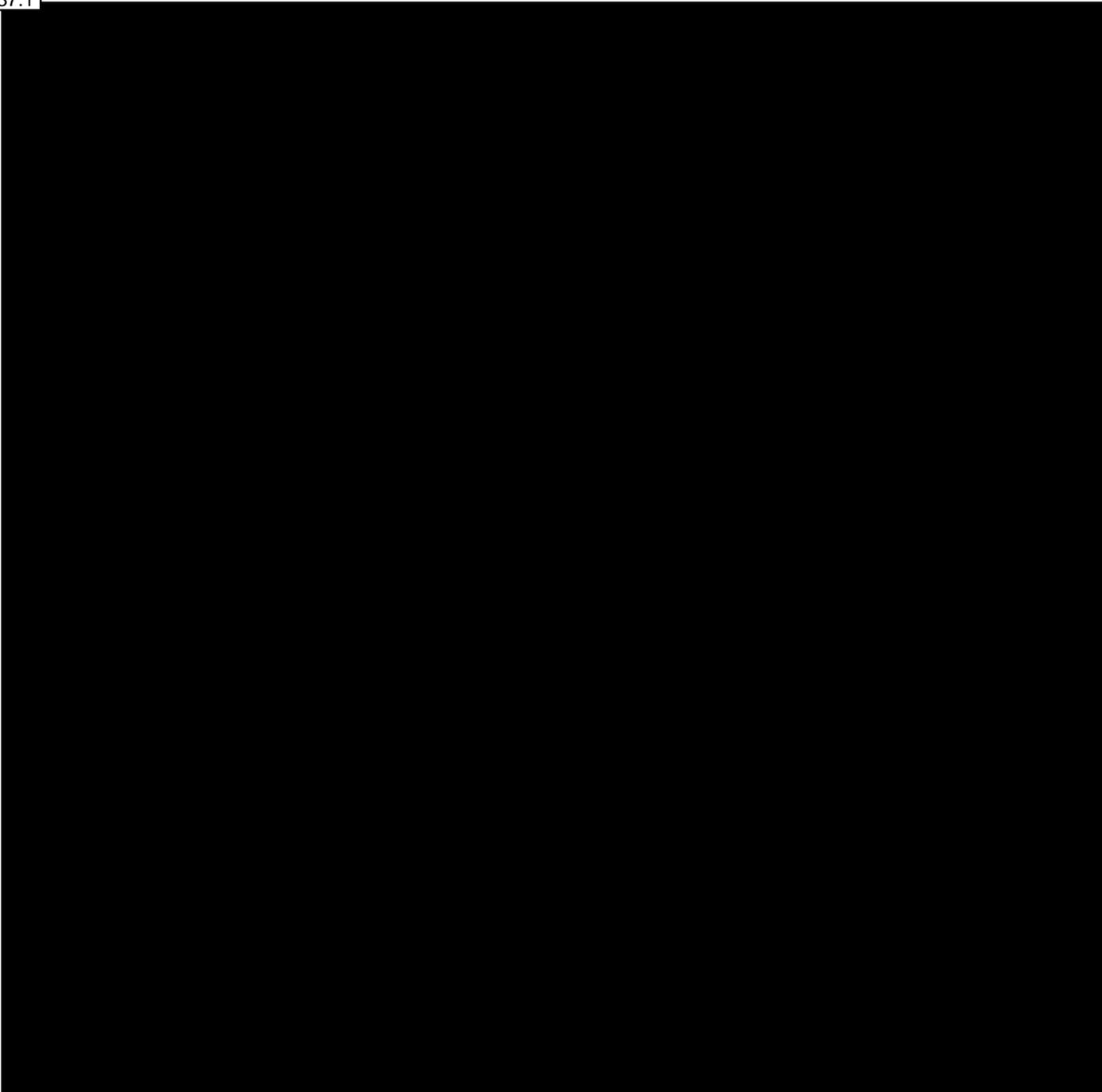
ADHD and the PIP Process

Activity specific considerations for ADHD

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Section 3: WCA

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Redaction Summary

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- S.22 - Information intended for future publication

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