**What is an intellectual disability?**

An Intellectual Disability (ID) also known as a Learning Disability means that IQ is below 70 and there are adaptive behavioural difficulties (daily living skills). This would place an individual’s IQ in approximately the bottom 2% of the population i.e. outside of the ‘normal’ range.

There are various classification systems in place. An ID can be classified as mild (IQ 50-69), moderate (IQ 35-49, severe (IQ 20-34) or profound (IQ less than 20) (World Health Organization, 2004).

**The Identification of an Intellectual Disability, an A to H Framework (IDID A2H©):**

**Evidence framework**

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The following alphabetical framework is designed as a tool for gathering information for the identification of an ID (in children, young people or adults). It will help you identify available information sources and gaps in knowledge about an individual’s ability. It will guide you in decision making regarding a likely diagnosis and help you generate a needs based plan. It can be used by any professional working with children and young people as a tool for gathering evidence and planning.

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A full version of the IDID A2H**©** framework, a short version and a parent/carer version are available at [www.acamh.org](http://www.acamh.org) in the Intellectual Disability Topic Guide.

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| --- |
| **Academic**  Type of educational establishment(s):  Historical Attainment:  Current Attainment:  Predicted Attainment:  Attendance:  Engagement:  Learning difficulties: |

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| --- |
| **Behaviours of daily living**  Evidence / Assessment results: |

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| --- |
| **Cognitive assessments**  Formal IQ assessment results: |

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| --- |
| **Development (other)**  Physical-growth, fine motor, gross motor and sensory:  Socio- emotional development e.g. social skills, attachment, play and behaviours:  Other- including sleep, speech, language and communication:  Consider specific or more generalised delays:  Degree of developmental difficulty: |

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| --- |
| **Environmental Influence**  **Has this been supportive of development and learning?** |

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| **Factors (other)**  Any other neurodevelopmental conditions:  Any Mental Health and Behavioural disorders:  Any Physical health problems e.g. sleep or mobility problems  Any genetic information:  Any attachment difficulties:  Any history of Abuse and safeguarding: |

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| **General Impression (delete if not applicable)**   1. **Not** an ID i.e. IQ and/or adaptive functioning are within normal range for age, alternative diagnoses or formulations should be considered 2. **Possible** ID i.e. further investigation is required over time (consider time scales) 3. **Confirmed** ID i.e. IQ is 70 or below and there are significant difficulties with adaptive functioning 4. **Other** diagnoses/formulations: |

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| --- |
| **How to meet an individual’s needs?**  In partnership with the patient and parents/carers, professionals should then generate a person centred multiagency, multidisciplinary plan to meet the needs identified in A to G. Communicate sensitively and with positivity the findings and plan to the individual and their wider network eg parents/carers, health, education and social care.  A:  B:  C:  D:  E:  F:  G: |

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| **Distribution list** |

**References**

World Health Organization. (2004). <http://apps.who.int/classifications/apps/icd/icd10online2004/fr-icd.htm?gf70.htm+>