



EDUCATION, ARTS AND LIBRARIES

**STRATEGY AND PROVISION
FOR PUPILS WITH NEEDS
ON THE AUTISTIC SPECTRUM**

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CHILDREN AND YOUNG PEOPLE WITH AUTISTIC SPECTRUM DISORDER IN DEVON – CURRENT POSITION AND FUTURE DEVELOPMENTS

This paper is concerned with the education of all children and young people who are on the Autistic Spectrum. Such children may also have Severe Learning Difficulties and will be found in our Special Schools. More able children and young people with ASD, described as having Asperger Syndrome, are often appropriately educated in mainstream schools when inclusive policy and practice is in place.

1. CONTEXT

- 1.1. Autism is a crucial issue for those with responsibility for the education and care of children and young people. For the children affected, the condition can be extremely debilitating and will probably significantly affect their life opportunities, both educational and social. Intervention through education can make a significant difference in both these respects. Devon has a wide array of experienced and knowledgeable teachers and other professionals who are currently making such a difference. Because of the rise in the numbers of children identified as having ASD it is necessary to review, co-ordinate and develop our expertise and resources so as to ensure appropriate and consistent opportunities for all young people with autism.
- 1.2. There has been a recent reported rise in the incidence of autistic spectrum disorders within the child population. There is some dispute over causes of the increase, but it is likely to be at least partly due to an increase in awareness, recognition and diagnosis. Taking conservative current estimates, (for example the Medical Research Council Review in 2001) of 60 children in 10000 being on the autistic spectrum, in the child population of Devon of approximately 120,000, some 720 children could be affected. On this basis it could be predicted that the majority of mainstream schools will have to meet the needs of one or more children with an autistic spectrum disorder at some stage.
- 1.3. The vast majority of these children have of course, always been in our schools and preschool settings, but their development has frequently been limited by not being recognised as ASD and hence not receiving appropriate, or at least not optimal, teaching and care. Increasing knowledge, sophistication of recognition and associated methodology of teaching has meant that we can more successfully target the specific needs of this group in ways which will maximise their capacity to learn and become full members of our society. Indeed we have a duty to do so.
- 1.4 **Children in Devon with a diagnosis of autism**

Area	PreSchool	Mainstream Primary		Mainstream Secondary		Special Provision			
	(Data provided by PreSchool Advisory Ts)	Supported by ASD Outreach Team				DCC Unit	DCC School	Indep. School	Other
		Action Plus	Statement	Action Plus	Statement				
North	4	2	10	0	0				
Mid	5	8	7	0	0				
Exeter	6	0	11	0	3				
East	8	6	8	0	3				
South	12	6	20	1	2				
West	10	4	12	0	2				
Totals	45	26	68	1	10	12	51	7	6
Total children with diagnosis known \cong 226									
Total children with Statement & diagnosis \cong 154									

The data clearly shows a high number of children who will require specific help when they move into secondary education.

- 1.4. Last Summer, the All Party Parliamentary Group on Autism published "Good Practice Guidance" which sets out a comprehensive framework much of which is incorporated into that which follows.
- 1.5. The nature of autism is such that it represents a number of particular challenges. The core cluster of difficulties in communication, social interaction and impaired imagination, interact with two other key dimensions of language and general ability, to present a very different range of challenges and needs. It is this complexity, combined with the key principles set out in section 2, which require a very comprehensive range of provision, wide knowledge base and high levels of understanding.

2. **PRINCIPLES**

2.1 **Intervene early**

The importance and demonstrable benefits of early intervention are well researched. This is particularly so in respect of autistic spectrum difficulties, because the nature of these difficulties has a very specific and adverse effect on children's capacity to engage in normal learning processes. Very young children frequently develop very difficult and defiant patterns of behaviour which are often seen to persist well into teenage years. It is far easier to achieve change when such children are young. Oppositional, defiant and challenging behaviour is obviously far more difficult to deal with in teenagers. Ongoing research by University College London strongly suggests that some forms of intervention are more effective than others. For example, the Parents of Autistic Children – Training & Support (PACTS) programme, an intervention programme in Bexley London, is demonstrating gains equivalent to LOVAAS interventions, but after much shorter periods of intervention and for a smaller number of hours per week. This programme consists of a one week training course for parents/carers, followed by 10 hours a week of direct teaching in the home utilising a core of ABA methodology, play based activity and targeted generalisation of specific behaviours from home to wider settings.

2.2 **Involve and support families**

The vast majority of children with autistic spectrum difficulties live with their families and attend school on a daily basis. Many of these families are under a great deal of stress. Any strategic plan should seek to reduce such stress through enablement and co-operative intervention. Specific interventions at pre-school such as Early Bird or PACTS incorporate such aims with demonstrable success. At school age, engagement of parents in joint planning, target setting and awareness and knowledge of specific methodologies for intervention in the home setting is highly desirable. Training courses for parents of school age children have been scarce and would potentially fill a very significant need. This would seem an ideal opportunity for effective multi-agency work.

2.3 **Maximise Inclusion**

Devon's inclusion policy assumes that any child or young person with ASD has the right to be a fully participating and valued member of his or her school community. The child or young person should be offered access to a broad, balanced and relevant education, including the Foundation Stage Curriculum and the National Curriculum. The realisation of this ideal, as in 2.6 below, will be achieved through increased knowledge and understanding, a consequent reduction in anxiety and an increasing confidence and expertise on the part of teachers and other staff in mainstream schools.

2.4 Provide a continuum of provision offering access to all

The demography and geography of Devon present particular challenges in ensuring equality of access to a continuum of provision for all children. This must be seen in relation to 2.5 and 2.3, i.e. the need to appropriately target resources which will maximise inclusion. Children with very complex, "low incidence" needs, will, by definition, be small in number yet may require the development of in-County residential provision.

2.5 Target Resources

The County support services, schools and other settings should ensure that those in direct contact with children and young people are empowered to use resources effectively for all children. They should also agree the distribution of financial resources and access to support services to ensure effectiveness and equality in relation to need. Wherever possible, systems should be put in place to evaluate the effectiveness of provision.

2.6 Increase knowledge and understanding

It is generally held to be true that uncertainty leads to stress and anxiety. Many parents and teachers harbour significant fears about the implications of a diagnosis of autism. The most important means of reducing this uncertainty, increasing confidence, and maximising their capacity for effective help; is therefore through increasing knowledge and understanding.

2.7 Develop effective multi-agency and multidisciplinary practice

It has been estimated that a family of an ASD child might have seen as many as twenty professionals by the time their child has reached the age of five. This is particularly significant at pre-school level where parental anxiety and uncertainty are highest. The development of effective multi-disciplinary referral pathways and assessment procedures is therefore of prime importance. The development of the Joint Agency Teams in Devon could provide a firm foundation for development in this regard.

3. MAPPING NEED TO PROVISION

3.1 Pre-school children

- (a) There is a need for common referral pathways to be defined and agreed. Co-ordination of referral information and subsequent appropriate assessment is part of the function of the Joint Agency Teams (JATs). Identification of the subgroup of children with ASD by these teams should ensure fairly accurate collection of data, over time, to inform ASD service development, both at pre-school and school age.
- (b) There is a need for a coherent and consistent multidisciplinary assessment process which takes account of, and builds on the existing statutory framework as set out in the 1996 Education Act and SEN Code of Practice. Currently, there is a significant difference in the number of children identified and diagnosed in different parts of the county. Planning provision to ensure that children's needs are appropriately met is therefore made difficult.
- (c) Devon needs a co-ordinated range or continuum of provision which should include an intensive early intervention programme for appropriate children. Appendix 1 also includes Portage, Early Bird, and Foundation Support Classes.

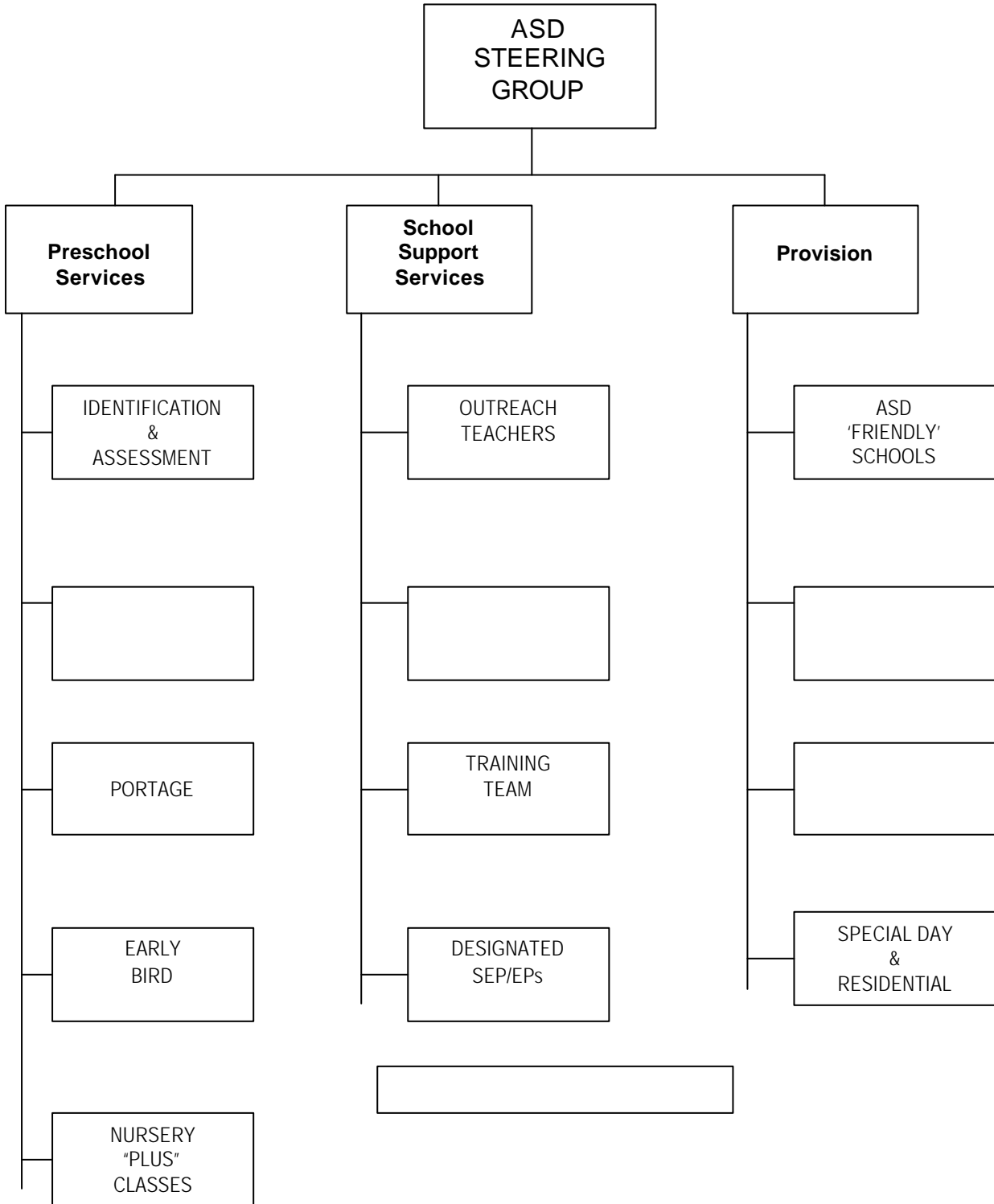
3.2 School age children

The attached table (Appendix 2) sets out a framework for Staff Development and training, coupled with support service roles, for ASD children across the whole range of need.

GLOSSARY OF TERMS

- ABA:** Applied Behavioural Analysis. Refers to a means of analysing learning in the framework Behavioural Psychology. It analyses what children do.
- LOVAAS:** An ABA approach to developing interventions for pre-school ASD children.
- EARLY BIRD:** A programme of training for parents of pre-school ASD children, developed by the National Autistic Society.
- PORTAGE:** A home based intervention for pre-school children with a wide range of developmental difficulties.
- RESOURCE BASE:** It is envisaged that children identified as needing significant support will, from the outset, be part of a mainstream class with their peers. The role of the resource base is, therefore, to identify appropriate strategies to maximise the learning which the children can achieve alongside their peers. This is not to diminish or underestimate the need for individual or small group teaching catering for very specific needs which may necessarily take place in the resource base or other suitable location.

OVERVIEW OF AUTISM STAFFING AND PROVISION



OVERVIEW OF ASD PLAN - SCHOOL AGE PUPILS

APPENDIX 2

LOWER		HIGHER			
LEVEL OF NEED					
	SCHOOL ACTION	SCHOOL ACTION PLUS	MS STATEMENT	MS SPECIAL UNIT	SPECIAL SCHOOL
LEVEL OF CHILD NEED / DIFFICULTY (Illustrative)	<ul style="list-style-type: none"> ❖ Some difficulties in communication particularly with peer group. ❖ Poor adaptive behaviour. ❖ Prone to anxiety. 	<ul style="list-style-type: none"> ❖ Communication difficulties, particularly with peer group. ❖ Poor adaptive behaviour. ❖ Anxiety associated with change ❖ Some sensory sensitivity 	<ul style="list-style-type: none"> ❖ Difficulties in communication with peers & adults. ❖ Significant difficulties of social interaction with peers & adults ❖ Some associated learning difficulties ❖ Significant anxiety often associated with poor adaptive behaviour ❖ Sensory sensitivity 	<ul style="list-style-type: none"> ❖ Significant rigidity ❖ Significant language difficulties ❖ Associated significant learning difficulties. ❖ Some challenging behaviour ❖ Very significant. ❖ Significant sensory sensitivity 	<ul style="list-style-type: none"> ❖ Extreme rigidity ❖ Little or no language ❖ Associated very significant learning difficulties. ❖ Extreme challenging behaviour ❖ Extreme communication difficulties ❖ Extreme and often unpredictable sensory sensitivity
STAFF KNOWLEDGE UNDERSTANDING & SKILLS	<p>LEVEL 1 (All Mainstream staff)</p> <ul style="list-style-type: none"> ❖ Awareness of key features of ASD. ❖ Able to think about adapted environment. ❖ Able to reinterpret odd or difficult behaviour. 	<p>LEVEL 2 (Mainstream staff in 'Autism Friendly' schools & some class teachers)</p> <ul style="list-style-type: none"> ❖ Understanding of ASD. ❖ Understanding of practical, environmental and pedagogic implications. ❖ Capacity to collaborate in devising, implementing and monitoring appropriate IEP's. 	<p>LEVEL 3 (SENCO's & CT's in 'Autism Friendly' schools)</p> <ul style="list-style-type: none"> ❖ Good understanding of ASD. ❖ Knowledge of key methodologies. ❖ Capacity to act upon understanding of practical environmental and pedagogic implications. ❖ Capacity to devise, implement and monitor appropriate IEP's/behaviour plans. 	<p>LEVEL 4 (Key staff in all Special Schools/Units)</p> <ul style="list-style-type: none"> ❖ Significant and detailed understanding of ASD. ❖ Detailed knowledge of key methodologies. ❖ Confident capacity to devise and implement appropriate IEP's. ❖ Knowledge and understanding of challenging behaviour and capacity to utilise theory to devise behaviour plans. 	
SUPPORT SERVICE ROLE I (Supporting individual children and schools)		<ul style="list-style-type: none"> ❖ 'Outreach' contact on agreed basis. ❖ Lead on devising appropriate IEP's. 	<ul style="list-style-type: none"> ❖ Collaborative devising of IEP's. ❖ Support to 'attached' LSA's. ❖ Problem solving. ❖ Assessment of individual children. ❖ Running eg 'Circle of Friends' sessions. 	<ul style="list-style-type: none"> ❖ Collaborative ❖ Consultative ❖ Developmental 	
SUPPORT SERVICE ROLE II (Training) Who? – EPs, SEP(ASD), Adv.Ts(ASD), NAS, University Dept's	<ul style="list-style-type: none"> ❖ One session ASD awareness raising. (Rolling programme) based on Academic Councils). 	<ul style="list-style-type: none"> ❖ Staff training, whole school eg 'autism friendly' schools. ❖ One day training courses school/academic council. 	<ul style="list-style-type: none"> ❖ Training on key methodologies. ❖ Extended training course, in collaboration with University, leading to certification/diploma. 	<ul style="list-style-type: none"> ❖ Specific and detailed training on key methodologies. ❖ Detailed training on learning theory and ABA. ❖ Extended training course in collaboration with University – leading to certification/diploma. 	

4. RECOMMENDATIONS FOR CONSIDERATION

4.1 Establish an ASD management group

To oversee the day to day management of, particularly, the ASD training and support services within education; and also to maintain links with other relevant services, disciplines and organisations.

4.2 Develop multidisciplinary identification and assessment

To work closely in with the Joint Assessment Teams to identify probable ASD children. To work closely with Health to develop assessment protocols which gain acceptance and ultimately implementation, County wide.

4.3 Establish an early intervention programme *[Standards Funding approved 1 year from September 2003 hence need for funding from base budget from 2004]*

To ensure that the Education department, in close collaboration with other services, develops a high quality intensive early intervention programme for appropriate children and families.

4.4 Develop an inclusive continuum of provision as follows:

4.4.1 Autism 'friendly' schools

The framework set out in Appendix 2 begins to define what is meant by this term. Much more detailed definition would clearly be needed, including, for example, criteria for pupil inclusion, funding thresholds and mechanisms.

4.4.2 Resource Bases in mainstream primary schools

A resource base should be able to offer a range of support ranging from: specific in class support; small group withdrawal work; to individual teaching. As in 4.4.1, clear definitions are needed regarding pupil admission; relationship to the broad inclusion agenda; funding arrangements; location and prevalence.

4.4.3 Resource Bases in mainstream secondary schools

As above.

4.4.4 Identify & develop ASD pupil needs and support within Special school sector

There is a growing trend, particularly within the SLD sector, towards increasing identification of groups of children with specific types of need and hence more specialised intervention. ASD is an area where there are high levels of expertise in some parts of the county and at particular ages. Co-ordination and development of such expertise is desirable.

4.4.5 Staff training and development programmes set out for the next two/three years

A detailed programme should be set out based on the broad principles contained in Appendix 2.

4.4.6 Establishment of specialist LSAs (SSAs) to support ASD children with statements in mainstream schools *[Standards Funding approved 1 year from September 2003 hence need for funding from base budget from 2004]*

In order to maximise inclusion it is envisaged that the LSAs supporting ASD children in mainstream schools require more than generalised training. It is proposed that a number of centrally appointed LSAs, working directly to the Advisory Teachers (ASD), would receive extended higher level training to enable them to offer short term packages of support to their mainstream colleagues.

4.5 **Integrated database**

There is a high need for a coherent county wide database in order to adequately audit need and plan services. This could possibly be achieved through selective integration/data sharing of the JAT and Education databases.