

POLICY AND STRATEGY FOR THE EDUCATION OF PUPILS WITH AUTISM SPECTRUM DISORDERS

January 2018

Introduction

This document has been developed by the Highland Council Care and Learning Service in collaboration with parents/carers, voluntary sector representatives and NHS Highland. It draws extensively on experience to date and sets out the policy and development strategy of the Highland Council in relation to the education of pupils with autism spectrum disorders (ASD).

The purpose of this document is to provide a framework to support professionals and parents/carers in meeting the educational needs of pupils with ASD. The document takes a broad view of the aims of education and of what may be included in educational programmes.

The aims of education are to prepare young people for a happy, successful adulthood in which they are able to live as independently as possible, to exercise choices in relation to their lives, and to enjoy successful friendships and relationships. As such it aims to support children and young people to become successful learners, confident individuals, effective contributors and responsible citizens.

Rationale

The Council seeks to respond to children diagnosed as having an ASD by building partnerships with colleagues in other agencies and with parents/carers, by establishing the pattern of need and the provision required, by supporting a range of staff development opportunities and by additionally supporting and resourcing enhanced educational provision where this is required.

ASDs are complex and impact differently on each individual. They can have varying levels of impact on functioning in communication, socialisation and thought/behaviour. The impact is independent of intellectual ability. Those with high intellectual levels may function only with considerable difficulties in their day-to-day lives.

Recent studies have estimated the overall population prevalence of ASD in children to be approximately 1.7 in 100 pupils in school (Russell et al 2014¹). Current figures for ASD in the Highlands are estimated at around 650 (2017) and these figures have been fairly consistent since 2012.

This document supports both Highland Council and Scottish Government policies in relation to inclusive education, and assumes that almost all pupils with ASDs will be educated in their local mainstream school. This is consistent with the presumption of mainstream supported by the Standards in Scottish Schools etc Act (2000).

¹ Russell, G., Rodgers, L. R., Ukoumunne, O. C., and Ford, T. Journal of Autism and Developmental Disorders January 2014, Volume 44, Issue 1, pp 31–40 Prevalence of Parent-Reported ASD and ADHD in the UK: Findings from the Millennium Cohort Study

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Note: Throughout this document, the term 'autism spectrum disorders (ASDs)' is taken to include classical autism, atypical autism and Asperger's Syndrome.

1 Autism Spectrum Disorders (ASDs)

- 1.1 Children with an Autism Spectrum Disorder (ASD) exhibit, to a greater or lesser degree, a Triad of Impairments. These characteristics help define autism:
- Language impairment across all modes of communication: speech, intonation, gesture, facial expression and other body language.
 - Rigidity and inflexibility of thought process: resistance to change, obsessional and ritualistic behaviour.
 - Difficulties with social relationships: poor social timing, lack of social empathy, rejection of normal body contact, inappropriate eye contact.
- 1.2 Children with an ASD may also have other difficulties such as Developmental Co-ordination Disorders (DCD), Attention Deficit Disorder (ADD), Attention Deficit Hyperactivity Disorder (ADHD), Dyslexia, Tourette's Syndrome, Obsessive Compulsive Disorder and/or secondary mental health problems. It is common for there also to be accompanying sensory sensitivities, for example to touch, light, smell, noise and/or taste, and these sensitivities may vary in the course of a day or from day to day. Because individuals may have significant competencies and strengths, their ASD may not be apparent in some situations, but individuals of average or above average ability will not necessarily have fewer needs in terms of day-to-day functioning and may have a very significant degree of social difference and difficulty.
- 1.3 The diagnosis of an ASD is ultimately the responsibility of the relevant health professionals but the diagnosis is made in consultation with members of the Highland Council Education and Children's Services working within Integrated, Multi-agency locality teams.
- 1.4 There will be some children who have not yet completed the assessment leading to diagnosis of autism spectrum disorder, or who have some characteristics of ASDs but do not meet the criteria for formal diagnosis. Where this is the case, services will respond to the child's needs. The response will not be constrained by the presence or absence of a diagnosis.

2 The Legal and Policy Contexts

- 2.1 The Education (Additional Support for Learning) (Scotland) Act 2004 and as amended in 2009, places a general duty on the Highland Council to identify and make provision for the Additional Support Needs (ASN) of all pupils for whom the Council is responsible. A considerable volume of material and extensive guidance in relation to good practice for pupils with additional support needs has been issued at national level. Much of this is noted in the National Autism Toolbox <http://www.autismtoolbox.co.uk/>
- 2.2 All children and young people with significant ASN and ASD should have a child's plan that will be proportionate to their needs. Additionally, the ASL Act requires that consideration be given to establishing a planning document, the Coordinated Support Plan (CSP), for those pupils for whom the local authority is responsible for their education, who have:
- High levels of need for additional support in relation to their education
 - Which are likely to last for more than 1 year
 - And will require significant support from both education and another service, to meet their educational needs.

Further details of the CSP process can be found at:

https://www.highland.gov.uk/downloads/file/11/co-ordinated_support_plan

- 2.3 The Standards in Scotland's Schools etc. Act 2000 defines the general aims of education for all pupils. It states that the duty of an education authority is to secure that the "education is directed to the development of the personality, talents and mental and physical abilities of the child or young person to their fullest potential". This Act also places a duty on The Highland Council to provide education for all pupils in mainstream schools other than in exceptional circumstances.
- 2.4 Within the terms of the Equality Act (2010), children and young people with ASD may be considered to have a disability and therefore a 'protected characteristic' and as such, their carers and other family members affected by their disability may have additional rights. Parents or carers can request the Highland Council carry out an assessment of the needs of their child if they consider that this may be necessary and Council staff will consider such requests and respond as appropriate.
- 2.5 The Children (Scotland) Act 1995 placed duties on Local Authorities to provide services which safeguard and promote the welfare of children in its area who are "*in need*", and which promote the upbringing of such children within their family (Section 22). Children "*in need*" include both disabled children and other children affected by a family member's disability. Section 23 of the Act states that the local authority must assess the needs of a child who is disabled or affected by disability when requested to do so by the child's parent or carer. The Act requires that services should be designed to minimise the effect on a child of their disability or of any other person in his or her family. Under Section 24, the carer of a child in need may request that the local authority undertake an assessment of their ability to provide care for that child.
- 2.6 The common goal of all services is that children and young people with ASDs should have the opportunity to lead lives which are as normal as possible. Through the Highland Council's Children's Services Plan (For Highland's Children) and the individual Child's Plan, Highland Council and NHS Highland are working in partnership to address the challenge of improving access to mainstream and specialist services, making provision consistent throughout the Highlands and creating services to meet the assessed needs of each individual.

3 Policy and Principles

- 3.1 The principles which underpin the Highland Council's policy and practice for the education of children and young people with an ASD are:
- Involvement of young people in decisions which affect them.
 - Partnership with parents/carers.
 - The Presumption of Inclusion in a mainstream school.
 - Appropriate provision for individuals, with an appropriate and flexible curriculum.
 - Early identification of needs and effective intervention.
 - Assessment, planning and support undertaken within the Highland Practice Model.
 - Multi-agency working for the integration of services, including partnership with voluntary organisations.
 - Building capacity through staff training and support.
- 3.2 With appropriate support, teaching and understanding, the vast majority of pupils with ASDs will thrive and will develop their individual talents and skills in mainstream classes.

Some may require some time outwith their mainstream classes/classroom in order to receive the specific teaching and support which they require to progress. Some may require placements in specialist provisions – special schools, units or resourced provision in mainstream schools.

- 3.3 Formal education may be difficult for some pupils with ASDs, and school staff may also find the inclusion of pupils with an ASD difficult at times - particularly if behaviours are very challenging. It is important to stress that behaviours which may seem to indicate that a pupil is not able to manage their own behaviour in an expected manner may be due to high levels of anxiety or sensory issues and may later be diagnosed as resulting from an ASD. Classroom and behaviour management strategies require to be adapted to the needs of the individual pupil, taking into account an understanding of the functional basis of the behaviours and what the child is communicating through them.

4 Partnership with Parents and Carers

- 4.1 The Highland Council recognises that parents/carers are the earliest, longest serving and most continuous carers and educators for almost all children. In some situations the most significant carer for a child may be a foster parent, grandparent, older sibling or other carer. Collaborative working with parents/carers is vital, both during assessment and diagnosis, and following diagnosis parents/carers need continuing support and information to enhance their understanding of the child's difficulties and of the nature of the child's needs. It is expected that all will work together in the best interests of the child or young person.
- 4.2 Close liaison between school staff and parents/carers is essential if children are to gain maximum benefit from teaching programmes and to ensure that appropriate and coordinated support is given both in school and at home. It is vital therefore that parents/carers are consulted and kept involved in all assessment and decision making processes. They should be offered opportunities to take part in staff development activities to enable all staff to appreciate the parental perspective and the child's needs.
- 4.3 The Care and Learning Service will actively encourage and enable parents/carers to participate fully in decisions about their child's education by informing and consulting with them and by taking account of information which parents/carers contribute. Equal value should be placed on the different areas of expertise, knowledge and skill that teachers, parents/carers and other professionals bring to the partnership.
- 4.4 It is important to ensure that the child's school offers a welcoming environment for parents/carers and that appropriate time and priority is given to discussing any issues in a positive way. Sufficient time should be available to named persons and lead professionals who have co-ordinating and/or management responsibility to carry out this important function. Commonly used methods of communication and liaison include:
- A home-school book, used on a daily or weekly basis (or perhaps less frequently) to share information between parents/carers and staff in school.
 - Meetings, planned on a flexible basis, to ensure that the approaches used at home and in school are consistent and that the same goals and targets are given priority in both settings.
- 4.5 An equal, active and successful partnership between parents/carers and their child's school is supported by:

- The inclusion of information about support for learning in the school's handbook for parents.
- The expectation that schools will initially discuss any concerns with a child's parents/carers and will not involve specialist services unless parents/carers give their informed consent.
- Active encouragement of parents/carers to contribute their knowledge and information about their child to assessment and planning processes.
- Reports being presented to and discussed with parents/carers wherever possible before being circulated to other professionals. Any errors of fact should be amended, and when there is a difference of opinion between the professionals and parents/carers, this should be noted in the report or plan.
- Reports being presented to parents/carers in advance of any meetings where the contents are likely to be discussed.
- The provision of training for both parents/carers and professionals.
- The provision of clear information for parents/carers about the Highland Practice Model.
- Making information on services available. http://www.highland.gov.uk/info/886/schools_-_additional_support_needs/
- Highlighting how equipment and other resources (e.g. books, videos) can be made available.
- Routinely involving parents/carers in compiling and reviewing Child's Plans.
- Providing information for parents/carers about specific educational settings which may be appropriate for their child.
- Encouraging parents/carers to access parent training programmes, workshops and support groups throughout the Council area.
- Considering and evaluating new developments in the field of ASD.
- Taking into account the views of parents/carers and young people affected by ASDs.
- Informing parents when visiting specialists are due to go into schools, so they can prepare their child in advance of the visit.

4.6 It is much easier, quicker and more satisfactory to avoid disputes by involving parents/carers fully in planning for their child from the outset and by recognising and giving appropriate weight to their perspectives and understanding. The convening of a Solution Focused Meeting to generate solutions is often a powerful way to carry out joint planning. If both parents/carers and school staff are aware of school and Highland Council policy they will be able to understand the steps which are being taken and the support which is being given. Significant disputes, including initiation of the formal appeals procedures under the Additional Support for Learning Act can often be avoided by listening to concerns, responding promptly and taking appropriate action.

4.7 Parents/carers and young people who wish to have support at any point can have a supporter or advocate present at meetings and/or discussions.

4.8 If a parent/carer expresses concern that appropriate assessment and/or support is not being given to their child, the following processes are recommended:

Stage 1: The Named Person or Lead Professional for the child should be able to advise on appropriate action at any stage. However, if the concern is an educational one, then in the first instance parents/carers should be advised to approach the school and to discuss their concerns with (for primary pupils) the Head Teacher or Additional Supports Needs Teacher, and (for secondary pupils) the Depute Head with responsibility for ASN, or Principal Teacher of Additional Support Needs. These school staff will ensure that recommended procedures are being adhered to. For children in a private nursery or a partner centre, the head of centre should be contacted.

Stage 2: A further referral to the Early Years Head of Centre or Head Teacher may be made to try to achieve a satisfactory solution. The Head Teacher/Head of Centre should take responsibility for organising a meeting to try to address parental concerns. Parents/carers may wish to take someone to the meeting in a supportive role. At this stage parents and/or staff might also wish to consider involving the independent mediation service provided to the Council. Details of the independent Mediation Service can be found at https://www.highland.gov.uk/info/886/schools_-_additional_support_needs/1/support_for_learners

Stage 3: If all school/centre-based dialogue has been exhausted and a conclusion satisfactory to the parents/carers or young person has not been reached, then the parents/carers or young person have the right to invite the Area ASN Manager to investigate. The Head Teacher/Head of Centre may wish to request the assistance of the Area ASN Manager at any stage.

Stage 4: If there is still no satisfactory resolution, parents/carers may wish to use the Council's formal complaints procedure:

http://www.highland.gov.uk/info/670/consultations_complaints_and_compliments/368/make_a_complaint . However if the dispute is about the education for a child with ASN, parents must also be offered access to the procedures introduced by the Additional Support for Learning Act 2004. These procedures can include independent mediation, independent dispute resolution and/or referral to an ASN Tribunal. (Information on these formal processes can be found at https://www.highland.gov.uk/info/886/schools_-_additional_support_needs/1/support_for_learners

- 4.9 If a serious disagreement occurs, notions of blame should be avoided. All partners, including parents/carers, need to be seen as part of the solution rather than any partner being seen as the cause of the problem.
- 4.10 If for any reason there cannot be active collaboration with parents/carers and for children over the age of 12, who are considered to have capacity to be involved in their own decision making, the pupil and other key people should be involved in identifying targets and goals, the programmes which will help to achieve these, and the best interests of and long-term aims for the young person.

5 Appropriate Provision

- 5.1 In order that pupils with an ASD can thrive and achieve maximum gain from their time in school, curriculum and other provision must be flexible and must respond to the pupil's needs. This process starts from the pupil's earliest education, at the pre-school stage. The earlier a child's difficulties are recognised and given appropriate help, the better the likely outcome. To support this process, each Area of Highland have 'Autism Champions' within the Care and Learning Service. This is a network of professionals who have been supported to complete training on ASD at a Post-Graduate or Masters Level. They are able to provide advice, support and training across Highland in each locality and support the more specialist work of the Educational Psychology Service, Autism Practitioners within the Family Teams and other specialist voluntary sector partners.
- 5.2 **a) Early Identification and Intervention**
The assessment for a possible diagnosis of ASD is undertaken by a Neurodevelopmental Disorders Team - NHS staff in liaison with school and other Council staff (eg. SALT, Educational Psychologists, etc). Most children will be assessed and diagnosed in their locality while some may need further assessment by a central team based at the Pines in

Inverness. Where there are associated problems, the diagnosis may take place over a period of time and will include evaluating the child's responses to interventions. It is important that help and support are in place in the school for all pupils with ASN and it should be emphasised that for all children an integrated package of appropriate support in school and for their family does not depend on a finalised diagnosis or written report.

5.3 **b) The Staged Approach**

The purpose of the Staged Approach for children with ASDs and their families is to clarify the referral pathways for children at different stages of development and to guide families and professionals towards standardised processes for diagnosis, assessment of needs and further interventions or support planning. The general aims are that services respond to early signs and that children and families get access to information, advice and support as quickly as possible.

5.4 The starting point of the Staged Approach is usually an early years' health or education professional expressing concern or responding to parental concern about their child and referring them to their local Community Paediatrician who will undertake a General Developmental Assessment. If it is indicated that the child may have an ASD, the Community Paediatrician will initiate the multi-agency neurodevelopmental assessment process. This involves key local practitioners working closely as a team in partnership with the family. Sharing information between families and the team is an essential part of this process, with permission sought from the family at the outset.

5.5 An essential component of the integration of services within the Highland Practice Model, is identifying a lead professional who will co-ordinate an integrated approach around the child and/or their family. It is important to make sure each family is clear about who this is and how to contact them. A key purpose of identifying the lead professional is to reduce the stress, confusion and feelings of loss of control which can come from having many people involved.

5.6 The major objective is to build the capacity of each of the services, and of families, to competently and confidently support children with ASD, in order to maximise their potential at school and in the community.

5.7 **c) Flexible Individualised Curricula**

All children and young people with an ASD are individuals with their own strengths, interests and needs. They have the right to develop their personality, talents and mental and physical abilities to their fullest potential in the most normal and least restrictive environment.

5.8 It is useful to distinguish a range of different types of provision that together will enable appropriate educational support and provision to be provided for all children and young people across the range of complexity and severity of need. Although these types of provision can be separately described, the most successful educational approach will be a flexible one within which any particular placement provides an environment which enables the pupil to learn, meets (in collaboration with other services) the individual needs of the pupil and their family, and which works towards enabling the pupil to function in an increasingly inclusive environment with confidence and to exercise appropriate choices.

5.9 In order to respond satisfactorily to the full range of needs of children and young people with an ASD, a range of educational provision is available in Highland:

- **Mainstream placement in playgroup, early learning and childcare centre,**

primary or secondary school. Staff working in the placement will be supported by being given basic training and some consultancy from specialist outreach services.

- **A supported placement in mainstream early learning and childcare centre, primary or secondary school.** Awareness training will be given to all staff, with more specialist training for frontline staff. Regular support is available from various professionals with relevant specialisms. A key person who is involved in providing some of the support to the pupil (usually the class teacher or Pupil Support Assistant is identified in the school.
- **Resourced mainstream primary or secondary school.** The school has extra staffing in order to provide for a group of pupils who will benefit from the curriculum of a mainstream school while requiring the curriculum and routines of the school to be significantly adapted in response to their autism spectrum disorders. Autism awareness training is given to all school staff, with additional training for staff working directly with these pupils. Individual staff will have the opportunity to attend specialist short courses and will be supported to undertake specialist long course, distance learning study in relation to autism spectrum disorders. These pupils may require some access to an ASN base or similar facility.
- **Resourced base provision in a mainstream primary or secondary school.** Some pupils will benefit from the curriculum of a mainstream school but are unable to learn effectively in full class or subject groups. They require to undertake the majority of their learning in a quiet learning base as part of a small group of pupils. Awareness training will be provided for all staff in the school, together with specialist training for staff working directly with pupils with an ASD. Support will be offered to staff wishing to undertake specialist short courses or specialist distance learning long-course study in relation to autism spectrum disorders.
- **Split placement.** Some pupils will benefit from part-time attendance in their local, mainstream school together with part-time attendance in a local specialist facility. Awareness and specialist training will be offered to staff in both settings.
- **Full-time local day specialist provision.** Pupils with severe autism spectrum disorders and other complex needs, including severe or profound learning difficulties, may be educated in special schools or bases. Staff in these bases will be offered a progression of increasingly specialist training.
- Some **specialist residential schools** offer school-term or full-time provision for pupils with autism spectrum disorders. There are no such schools within daily travel time of the Highland Council area and so pupils can only attend such provision on a residential basis.

5.10 d) Individualised Educational Programmes (IEPs)

Pupils with ASDs will generally have a child's plan as their needs (at whatever level) will need to be kept under review and considered within a planning format that is proportionate to their needs. They may also have an IEP and/or a Communication Passport. These detailed documents will always form part of a Child's Plan. Within the IEP, targets will be set which are specific, measurable, achievable, realistic and have a time-scale set for their achievement. Criteria which state how success will be measured are included to ensure that pupil, staff and parents/carers will be clearly aware when the targets have been met. The targets set out what will be achieved in the short-term (4-6 weeks), medium-term (a school term), and long-term (a school session). Vocabulary

used in the IEP should be able to be understood by all involved.

5.11 Communication styles and needs will vary considerably between individual young people. Ways should be found to elicit the views of the child or young person at all times and in particular, in relation to the Child's Plan. Strategies such as Talking Mats, comic strip conversations, or mind-maps may help the pupil to establish a means of communication with others. Where language is limited, non-verbal communication and behaviour can be observed and interpreted, to enable the feelings, likes, dislikes of a child to be recorded.

5.12 e) Transitions and Changes of Routine

Regular review of the child's situation will provide opportunities for planning and managing transitions. The Education (Additional Support for Learning) (Scotland) Act 2004 requires by law that the Highland Council must:

- Seek and take account of relevant advice and information from other agencies no later than 12 months (6 months for pre-school children) before a child or young person who has additional support needs is expected to have a change in school education.
- Pass information to other agencies no later than 6 months (3 months for pre-school children) before a child or young person who has additional support needs is expected to have a change in school education.
- For both of these duties the consent of the parents/carers and young person must be obtained before taking action.

5.13 Particular attention needs to be given to any transition and/or change of routine for pupils with ASD because one of the major challenges for young people with ASD is dealing with the unfamiliar and the unpredictable. Moving from one establishment to another needs careful preparation if difficulties are to be minimised and problems avoided – nursery-primary, primary-secondary, secondary-post-school opportunities. Parents/carers and staff from the establishments involved and from the multi-agency team, should liaise well in advance of a transition taking place and should take appropriate measures to ensure that the young person knows exactly what will be involved in the change and what to expect.

5.14 Strategies need to be in place to avoid unnecessary stress. Establishments need to be aware of and prepared for any particular sensory sensitivities the young person may have.

5.15 There is potential for unfamiliar situations of any kind to be difficult for pupils with ASDs – school outings, supply teachers, visitors to school, assessments, in fact any change to the usual routine. These need to be planned and the pupil and the others involved, prepared well in advance, so that potential difficulties will be minimised. Involvement in trips and activities is at least as important for pupils with ASDs as for other pupils and so need to be planned well in advance. (It should be noted that any decision not to include a pupil with an ASD may be an infringement of the Equality Act and will not be consistent with The Highland Council's policy on Inclusion.)

5.16 Prior to children moving between establishments, the Area ASN Manager (ASNМ) must be notified well in advance so preparations can be made. When this affects access to buildings or alterations to internal areas, the ASNМ will need to be notified **three years** in advance in order to allow the necessary action to be taken. Even when there are no building adaptations necessary it is important to make contact with the receiving establishment to identify the measures necessary for a successful transition **two years** in advance to allow the training and development needs of staff to be met. **One year** in

advance the receiving establishment must be notified, together with the ASNM who will need to consider staffing, equipment and other specific needs.

- 5.17 Transitions from nursery to primary school and from primary to secondary school require careful planning and the involvement of staff from the receiving school. These staff require to know what is likely to upset the pupil and if there are particular steps which can be taken to minimise any difficulties and smooth the transition. Aids such as Communication Passports, which detail a pupil's likes and dislikes as well as highlighting their strengths, should be passed to new staff before they meet the pupil, so they can ensure that individual preferences are taken account of. These aids are also useful for transfers between classes and they can be useful in helping supply teachers and others to respond appropriately to the pupil's needs so that potential difficulties and unnecessary distress to the pupil are prevented or minimised.
- 5.18 The transition from school to the world of further education, training or employment also requires particular consideration so that college and other staff have the knowledge they need to meet the student's needs in the different context, and the young person has the confidence to cope with the change from the previous routine. Careful planning, consultation and collaboration with college staff and/or prospective employers are vital if the transition to this very important stage is to succeed. Potential career options need to be discussed sensitively as some careers which the young person might desire may not be realistic or sensible options. Wherever possible, post school staff should meet the pupil in school before transition and school staff should take time to ensure the transition is prepared for in adequate time to maximise the pupil's success in the new environment (see Appendix 1).
- 5.19 Information and support at post school transition can be accessed at the following link to the hi-hope transitions page <http://hi-hope.org/directory/listing/transition> . This also includes a link to the transition protocol, autism toolbox and information about opportunities for training and employment. A further helpful resource is the Principles of Good Transition 3, which has an autism supplement. This can be found at the following link <http://www.autismnetworkscotland.org.uk/files/2017/01/Autism-Supplement.pdf> .
- 5.20 It will be important to request the input from Skills Development Scotland and where appropriate, adult Community Care Services well in advance of the pupil leaving school, to ensure appropriate support services are involved and fully informed, to support the transition process.

6 Integrated Approaches

- 6.1 It is vitally important that appropriate approaches are used when working with children and young people with ASDs. If a diagnosis is given early in a child's life, the process of planning begins before entry to school or to pre-school provision. Child's Plan meetings should have information from all the relevant personnel. The parents/carers and Named Person in education and health will always attend these meetings and it is often useful for others to attend, such as the Additional Support Needs Teacher, Speech and Language Therapist, support worker etc.
- 6.2 **a) Training**
Training in understanding ASD is offered to all staff in schools and staff should assume that at some point they will be expected to work with a child or young person with autism spectrum disorder. Where appropriate, parents/carers should be given the chance to be involved in training with staff from all agencies, supporting them and their child. In

particular it is good practice for parents/carers to be involved in initial training, thus sharing their expertise with school staff who are getting to know their child and his/her needs, likes and dislikes. More specialist training will be offered to those staff who have a particular interest or are already working with pupils with ASD. The levels of training offered within Care and Learning are:

- ASD awareness for parents, ASPIRE
A multi-agency delivered programme to help parents understand their child's behaviour and the effect of their ASD on daily functioning.
- Awareness Level - 90 minute introduction to the impact of ASD
- Foundation Training - Level 1
Level one Foundation Courses are often multi-agency in both delivery and participation. This is reviewed and adapted annually in order to ensure that it remains relevant to current needs. It is mandatory training for all ASN staff in schools at all levels and is also available to any other member of staff in children's services. It is provided for all newly qualified teachers and all staff in schools where there are known to be children and young people with ASD.
- ASD Training - Level 2
Following on from Foundation 1 training. Workshops on sensory seeking behaviours, restricted diets, behaviour, Social Stories and other workshops are included in this more in-depth training programme, offered to all ASN Teachers, all staff working with children and young people with ASD and those working in specialist provisions.
- ASD Training - Level 3
Autism specific Certificate/Diploma courses provided by the Universities of Birmingham and Strathclyde, often completed as distance learning by staff in specialist provisions and/or those in specialist teams or those with a special interest in this area of work.

6.3 **b) Support for Learning**

Appropriate support is vital and often Pupil Support Assistants will play an important part in the day-to-day support which the child or young person receives. In primary schools the Head Teacher will co-ordinate the day-to-day support which the child receives in the school situation. The Area Additional Support Needs Officer and the Head Teacher will also ensure that appropriate training and support is available to those staff who have direct involvement. In secondary schools, the Principal Teacher of ASN or senior management team member with responsibility for support for learning will be responsible for co-ordinating pupil support and for ensuring that staff involved receive appropriate training and support. In some schools there will be a member of staff who has responsibility for having an overview of all pupils affected by ASD and for maintaining links with families and other agencies.

6.4 **c) Highland Council Psychological Service (HCPS)**

The Highland Council is required by Education and Social Work legislation to provide psychological services. HCPS staff are based in six centres across the Highland Council area. The Service is part of the Council's ASN Structure and includes both educational psychologists and pre-school teachers for children with additional support needs.

6.5 Most requests for service from HCPS come from early learning and childcare centres, schools and community paediatricians. If parents are concerned about some aspect of

their child's education it is usually best in the first instance for them to discuss this with the child's school or early years setting, but parents/carers can contact the Psychological Service directly to ask for help and advice
https://www.highland.gov.uk/info/886/schools_-_additional_support_needs/36/psychological_service

Educational psychologists offer assessment, intervention, consultation, advice, training, research and development work. They may be a partner to a child's plan and if they are already involved with the child, they may coordinate the information about a child's learning and development from other educational personnel as part of the assessment and diagnostic process.

- 6.6 When reports are written by a member of the Psychological Service about a child or young person, a copy is given to parents/carers, except in a few legally specified situations (for example where there is a possibility of serious harm to an individual). Discussion should take place to ensure parents/carers and pupils are fully informed and have an understanding of the content. In some situations the interests of an individual child or young person may be different from those of his/her parents, school or other persons or groups. The final responsibility of educational psychologists and pre-school teachers is to work in the interests of the child or young person.

6.7 d) Pre-School Education Services

The specialist pre-school home visiting teachers (PSHVTs) are part of the Highland Council Psychological Service. They work with pre-school children with additional support needs and their families. The service is offered to those pre-school children with significant ASN whose needs and difficulties may significantly and adversely affect their educational progress and development in the future. The PSHVTs can work with children in their own homes, playgroups and early learning and childcare centres, providing direct teaching intervention, advice, support and training to parents/carers, Early Years Practitioners and support staff to help them support the child.

- 6.8 PSHVTs work in close partnership with parents/carers, teachers, Early Years Practitioners, early learning and childcare centres and other key professionals, and are regularly involved in assessment and planning for children with complex needs. In each area of the Highland Council, members of the Psychological Service work closely with Community Paediatricians and Allied Health Professionals to identify and to plan services for pre-school children.

- 6.9 When a PSHVT has been working with a young child and family, they will support the child during the transition into a playgroup, early learning and childcare centre or school. This support may include:

- Giving information and advice to enable the nursery to understand the child's needs.
- Providing training to staff.
- Spending time working with the child alongside the partner centre, nursery or school staff.
- Visiting staff working with the child on a continuing basis for a period of time to provide advice and support.

- 6.10 The following procedures are in place in relation to pre-school children with ASDs:

- When a Pre-School Home Visiting Teacher is involved, they will liaise with the school or early learning and childcare centre to put in place the structures and supports needed for a smooth transition.

- Where appropriate, awareness-raising training will be arranged from an ASN Teacher, an Autism Practitioner, Education Psychologist or through the team based at the Pines.
- A child's plan will be created and a meeting to facilitate the pupil's entry to nursery or to school.
- If it is considered advantageous for the child, a split placement between special or autism specific provision and the child's local playgroup or nursery may be arranged. The named person/lead professional will encourage shared target setting and sharing of information both to support the family and to ensure coordinated planning for the child.
- Some additional support time may be provided to assist in meeting the child's needs, although this will be considered by the Area ASN Manager on a case by case basis.

APPENDIX 1

Transitions

People affected by ASD are particularly vulnerable to stress at times of change. It is essential that transitions are carefully planned for.

Where a placing request is considered by parents and the young person to be appropriate, it is helpful if this is made as soon as practicable.

If the transition process is well managed, it will make new experiences positive for all involved.

Examples of transition:

- Home into pre-school provision
- Pre-school provision into school
- Class to class (when year groups change)
- Primary to Secondary
- Secondary to post school provision

Also significant:

- Daily journeys to and from school
- Moving from one room to another e.g. from classroom to gym or between subjects
- Regular transitions to other places e.g. swimming pool
- Different members of staff
- Indoors to out of doors
- Escorted trips out of school for out of the classroom learning experiences

Home - Early Learning and Childcare Centre

- Parent/carer visits, provision with or without the child. Photos can be taken of the entrance, different areas and staff members.
- Child visits, ideally when no other children in building and not too many adults. May need more than one. Possible, pre-school home visiting teacher to accompany.
- Visit with other children present for short time.
- Attend any of the organised visits for the new intake.
- Possible phased start building up to full sessions.

In preparation for the above:

- Early meeting with parent/carer, ideally in the home
- Identify any training needs
- Contact with pre-school home visiting service
- Meeting to plan transition which may include Parent/Carer, Ed. Psych, PSS, S<, SW, Nursery, Playgroup, ASN staff as applicable.
- Support needs identified and Child's Plan created.

Establish effective methods of communication between staff and family/carer.

- Issues usually considered:
 - Visual Structure.
 - Social communication skills.
 - Strengths.
 - Special interests and preferences.
 - Dietary issues.
 - Toileting and self help.
 - Health.
 - Sensory issues.
 - Fears and phobias.
 - Positive, individualised behaviour plan.

- Familiarity with route to building.

Early Learning and Childcare Centre into School (P1)

- Parent/carer visits, provision without child.
- Parent/carer visits, provision with child when no other children present.
- Photos of areas, entrance, classroom, staff etc.
- Primary staff observe child in pre-school setting.
- Visit with children 'working' in classroom.
- Visit at a less structured classroom time allowing exploration of the room.
- Possible phased start building up to full sessions.
- Child to visit school again on in-set day or arrive early on the first day at school.
- In preparation for the above:
 - The professionals should organise an early meeting with the parent/carer and key staff. This meeting may include parents/carers, Early Years Practitioner, ASN, CT, HT, pre-school HV teacher
 - Contact between Pre-school HV Teacher and school staff
 - Identify any training needs and alert Area ASN Manager.
 - Support needs identified and flagged up to Area ASN Manager.
 - Child's Plan created, with IEP if required
 - 'About Me' book created or updated.
 - Environmental audit e.g. workstation, room layout, quiet area.
 - Alternatives planned for social times, if needed.
 - Establish effective methods of home/school communication.
 - A further meeting of professionals with the parents/carers may be held to plan the details of the transition process.
- Issues usually considered:
 - Visual Structure.
 - Social communication skills.
 - Strengths.
 - Utilising special interests/learning style.
 - Presentation of curriculum
 - Dietary issues. Consideration of lunchtime on school.
 - Toileting and self help.
 - Health.
 - Sensory issues.
 - Positive, individualised behaviour plan/protocols agreed.
 - Familiarity with route/entrance to building.
 - Where possible and positive friendships have developed, attempts should be made to continue these.

Primary to Secondary

- P6 review to discuss plan for transition during P7 year. Representative from Secondary to attend.
- Parent/carer should be involved in transition planning and make visit to Secondary school.
- Depending on individual needs, visits to Secondary may start early in P7 year.
- First visits without any pupils present. Meet a key member of staff. Photos of school/areas taken.
- Key member of secondary staff to visit primary. Information gathering and observation before the summer term.
- Early summer term, meeting with parents/carers, primary staff and key person from secondary to discuss details of support strategies and the possible need for a flexible P7 curriculum.
- Prepare pupil for class visit to secondary school. Familiar member of staff from primary

to accompany.

- Consideration of class groupings e.g. size of group, familiarity supportive peers. In preparation for the above:
 - Training needs for staff in secondary identified. Request made for training if required.
 - Visual structure in place e.g. map of the school, photos of staff, colour coded timetable.
 - Strategies to assist personal organisational skills e.g. organising books, materials and equipment.
 - Special arrangements for breaks and lunchtimes should be considered
 - Establish effective methods of home school communication.
 - Fears and phobias.
 - Sensitivities.
 - Health.
 - Positive behaviour plan.
 - Homework arrangements.
 - Transport arrangements.
 - Buddy system/peer awareness
 - IT requirements.
 - Dietary issues.

Secondary to Work/College/Apprenticeship/Supported Placement

This will depend very much on the pathway taken and at what time (S4/5/6)

- Before subject choices are made at S2 consideration should be given to whether the pupil will require a reduced curriculum. Pupils who have already been on a reduced curriculum require a clear understanding of what each subject involves before making their selection in discussion with the school's key teacher for ASD.
- Skills Development Scotland to be involved at a very early stage (no later than S3).
- Liaison with parents/carers, Guidance staff and Sfl staff at earliest opportunity (S3).
- School staff with their knowledge of the pupil should seek out appropriate work placements and ensure that personnel involved in these work placements have adequate information and understanding of the pupil they are to receive. This should be supported by a member of staff who knows the child well. There should be a clear protocol of how people should respond in specific situations.
- Early multi-agency child's plan / transitions review meeting in S4 (supported by appropriate agencies).
- Initial visit to placement (Work/College/Apprenticeship etc) with appropriate personnel and parents/carers.
- Additional support needs identified (adult key worker, support accommodation, travel).
- Training and advice for establishment, place of work, college etc
- Subsequent visit(s) to placement (Work/College/Apprenticeship etc) to establish routine (travel, arrangements for breaks and lunchtimes, mentor in the work place).
- Key person identified to co-ordinate in new placement.
- Review of placement.
- Consideration should be given to planning well in advance of any out of school transitions. Assessment of individual social and independence skills requires to be made to ensure an appropriate action plan is put in place to develop the pupil's independence and reduce anxiety e.g. independent travel, going to shops, asking for help.

SKILLS DEVELOPMENT SCOTLAND'S ROLE IN THE TRANSITION FROM SCHOOL TO POST-SCHOOL PROVISION

Parents/carers are naturally concerned about the future needs of their children. It is important for planning to begin some time before your child is due to leave school so that the best possible support can be arranged. The following information is about Careers Scotland's role in helping children make successful transitions from school.

At School

Skills Development Scotland provides information and guidance on career, training and further education opportunities. Every secondary school in Highland has a SDS Adviser working in partnership with the school staff to help prepare pupils for life after school.

Leading up to the transition from school Skills Development Scotland welcomes the opportunity to meet with parents/carers and young people – to talk about plans for the future and provide information about post school provision. At the same time the SDS Adviser will arrange to see children through the school, to begin to explore and develop ideas about jobs and training.

To help SDS make a careers recommendation and work out a realistic plan for continuing careers education and training, it is vital that they fully appreciate children's views, parent/carers' views, and the views of the other people involved.

After School

Alongside the NHS Highland Adult Services, SDS is the primary agency for helping young people with additional support needs move on from school. The SDS plays a major part up to, and immediately beyond the school leaving date. However, for those young people who require an additional level of support, the careers adviser may call upon a Key Worker who will continue to work with the young person and their family until they are securely settled in the post-school world.

Key Workers are based at offices throughout Highland and:

- Meet the young person at times and places suitable to them
- Get to know them *as individuals* - encouraging them to explore their ideas and work goals
- Work closely with friends and family –recognising that they often have a crucial role in enabling young people to become valued member of their communities
- Work with other agencies on behalf of the young person

APPENDIX 2

An ASD friendly school should:

- Make sure all teachers are aware of their duties under the Additional Support Needs Code of practice to identify children's needs, including those with ASDs.
- Have a key person, who can provide guidance on ASDs and ensure that all staff who come into contact with a child with an ASD are aware of the particular needs of that child.
- Encourage staff with knowledge and experience of children with ASDs to share their expertise with other school staff.
- Keep an up-to-date bank of information on ASDs which is easily accessible for use by staff and parents.
- Have a policy on working with children with an ASD and keep up-to-date records of staff ASD training. Make sure that all new and supply staff are given the opportunity to have training.
- Ensure that the whole staff are informed to at least Level 1 – Autism Awareness. Refer to Highland Council 'Policy and Strategy for the education of pupils with ASD' when writing school policy.
- Make sure a named member of staff or ASN teacher who knows about ASDs is available to discuss any concerns the child with an ASD may have and help the child to contribute as fully as possible to the development of their provision.
- Ensure the curriculum of the child with an ASD is tailored to meet their needs.
- Provide opportunities for children with an ASD to generalise skills learned in one setting/lesson to other situations/settings.
- Recognise that Information and Communication Technology can be a particularly effective medium for children with an ASD.
- Modify the school environment to take account of the difficulties with sensory stimuli experienced by some children with ASDs.
- Work closely with parents and families, consulting them about the planning process, plans, behaviour protocols etc. and inviting them to join in with ASD training where appropriate.
- Support families by ensuring that out-of-school activities include provision for children with ASDs.
- Be aware of and use networks between Children's Services across the Highland Council & NHS Highland and the voluntary sector so that there is a free flow of information regarding individual children with an ASD, and sharing of up-to-date information regarding ASD policy and practice.
- Work closely with adult services to ensure a smooth transition to post-16 provision for pupils with an ASD.