

Autism Policy

'Inclusion is not about placing children with autism in mainstream schools and ignoring difference by 'treating all pupils the same'. It is about making appropriate provision to meet each child's needs and reasonable adjustments to enable each child to access the whole life of the school.....Without an understanding of autism, staff cannot be expected to know how to adjust the curriculum and school environmentthese adjustments can be very straightforward and simple where staff have an understanding of this hidden disability'

Make School Make Sense (NAS 2006)

Aims and Principles of our policy

That all staff working within our school who come into contact with children identified with ASD, including senior leadership, should have training to help them understand the nature of the condition and its implications for the delivery of appropriate support. This will include understanding the environment and ethos amongst staff required to nurture children with autism.

St Bartholomew's Co of E Primary School needs to acknowledge the diversity and complexity of ASD, the value of early intervention and the varying needs of children at different points of their lives.

St Bartholomew's Primary School will take account of what strategies are working well and any specific approaches and interventions which we provide training on should have a proven track record of success.

That parents/carers have a fundamental role in the development of children with ASD and that families and communities also have a need for greater understanding and knowledge.

Definition

Autistic Spectrum Disorder (ASD)

ASD is defined as a lifelong complex developmental disability that typically appears during the first three years of life and affects the way a person communicates and relates to people.

NAS define autism as:

Autism is a disability which affects the way a child communicates and relates to people around them. Although it is a condition with wide-ranging degrees of severity, all those affected have a triad of impairments (Wing 1996) in:

- Social interaction
- Social communication
- Imagination

In addition to this triad, repetitive behaviour patterns are a notable feature. People with autism may also experience some form of sensory sensitivity or under sensitivity, for example to sounds, touch, tastes, smells, light or colours.

High Functioning Autism (HFA) Due to autism being so wide ranging, this term is often used by professionals but is not officially found in the diagnostic criteria. It was used to describe people whose Social Communication, Social Interaction and Social Imagination is affected by autism, but whose IQ is within the normal range or are cognitively able.

Asperger Syndrome (AS) Asperger Syndrome is a type of autism characterised by social and communication skill deficits, relatively normal language and cognitive development, and the presence of idiosyncratic interests. Individuals with AS often interpret things literally, they can appear socially awkward and have milder symptoms of autistic disorder. Often not understanding conventional social rules, people with AS appear to demonstrate a lack of empathy by making limited eye contact, appearing to be unengaged in a conversation and being confused by the use of gestures. Building and maintain positive relationships can sometimes be difficult due to their difficulties in social communication and interaction.

Asperger Syndrome is typified by:

- Severe and sustained impairment in social interaction
- Restricted, repetitive patterns of behaviour, interests and activities
- Significant impairment in social, occupational or other aspects of functioning

It is important to remember that these definitions are general and that at St Bartholomew's C of E Primary School, we acknowledge and understand that every student is unique with have their individual learning needs that we aim to support and nurture.

Alerting features in Primary School age children

The following features should alert teachers and others to the possibility of ASD and trigger discussion with parents and the possible implementation of the local referral pathway:

Communication impairments:

Abnormalities in language development including muteness, odd or inappropriate intonation patterns, persistent echolalia, reference to self as 'you' or 'she/he' beyond 3 years, unusual vocabulary for child's age/social group. Limited use of language for communication and/or tendency to talk freely only about specific topics.

Social impairments:

Inability to join in with the play of other children or inappropriate attempts at joint play (this may manifest as aggressive or disruptive behaviour). Lack of awareness of classroom 'norms' (criticising teachers; overt unwillingness to co-operate in

classroom activities; inability to appreciate/follow current trends e.g. with regard to other children's dress, style of speech, interests etc.). Easily overwhelmed by social and other stimulation. Failure to relate normally to adults (too intense/no relationship). Showing extreme reactions to invasion of personal space and extreme resistance to being 'hurried'.

Impairment of interests, activities and behaviours:

Lack of flexible, co-operative imaginative play/creativity, although certain imaginary scenarios (e.g. copied from videos or cartoons) may be frequently re-enacted alone. Difficulty in organising self in relation to unstructured space (e.g. hugging the perimeter of playgrounds, halls). Inability to cope with change or unstructured situations, even ones that other children enjoy (such as school trips, teachers being away etc.).

Other factors:

Unusual profile of skills/deficits (e.g. social and motor skills very poorly developed, whilst general knowledge, reading or vocabulary skills are well above chronological/mental age). Any other evidence of odd behaviours (including unusual responses to sensory stimuli (visual and olfactory); unusual responses to movement and any significant history of loss of skills).(National Autism Plan for Children, 2001)

Assessment

Children with ASD have an increased likelihood of also having one or more additional learning difficulties such as dyspraxia or attention deficit disorder, with or without hyperactivity. A substantial percentage of children and young people with autism will also have very significant / severe learning difficulties. Although diagnosis of any medical conditions will be confirmed by professionals from the health services, the assessment of the impact of the child's social communication difficulties, with or without other co-existing conditions, on his or her ability to access the curriculum, whether this is the Foundation Stage or the National Curriculum for children of school age, is a matter for education professionals.

Medical diagnosis should aim to:

• Identify whether the child's social communication difficulties meet the criteria for a diagnosis of an ASD

• Clarify if there are any other difficulties co-existing and how these are affecting the child

• Give parents information about support available in the area

ASD can result in, or co-exist with, a vast range of difficulties. In schools and settings, children may present with some (few or many) of these difficulties without a confirmed diagnosis. The diagnosis, per se, is not therefore an indication of level of need. It will, however, help to clarify the type of strategies that are most likely to be effective.

Strategies

Through the different phases of their education children will need a variety of strategies and interventions to bring about successful learning. This might include a range of groupings including mainstream classrooms, small groups and/or one-to-one work.

School/setting policies should include reference to behaviour management, risk assessment and reasonable adjustments that will be made in order to ensure the ongoing education of children with ASD.

Staff supporting and working with a child with an ASD will:

- · Create co-operative learning opportunities with peers
- · Focus on shared interests, use interests and strengths

• Ensure that both staff and peers allow the child to develop as much independence as possible

· Keep facial expressions and gestures simple and clear

• Give a clear indication of the amount of work required, teach what 'finished' means and what to do next

• Provide accurate, prior information about change/expectations

External Support Services and Agencies

St Bartholomew's Primary School will access (where appropriate) further support and guidance from external agencies, such as Autism Outreach Services and Speech and Language Therapy Services.

Progression Framework (Autism Education Trust)

The progression framework is a progress tracking designed by the Autism Education Trust which monitors and evaluates progress made by an autistic pupil across 7 main areas of autism. The content of the Framework is divided into 7 main areas based on the findings of the literature review and consultation

(www.autismeducationtrust.org.uk). These relate closely to autism 'differences' as described within other AET materials, and the impact of these on the pupil's social, emotional and learning needs, their independence and community participation. The main Progression Framework areas are:

- Social Communication
- Social Interaction
- Social Imagination / Flexibility
- Sensory processing
- Emotional understanding and self-awareness

- Learning
- Independence and community participation.

The content of each area has been drawn from a review of relevant literature and informed by the experience of the project team from their work in schools. The Progression Framework does not attempt to replace other specialist assessments that may accompany specific approaches or interventions that might be used with pupils on the autism spectrum. Nor does it replace National Curriculum progress information. The content aims to address skills and understanding that pupils may find difficult as a consequence of their autism but also strives to recognise and build on the pupil's strengths and interests and to improve their overall wellbeing. Most importantly, it aims to alert the practitioner to the fact that pupils may need support in these areas and that their progress is dependent on this support. Where possible, the content of the Framework lays emphasis on supporting the pupil to understand both their own and others' behaviour, what might be expected within certain situations and how this might be of benefit to them. It encourages practitioners to support pupils' independence through the development of skills such as self-regulation, self-expression and problem solving.

Where appropriate, St Bartholomew's Primary School will make use of the progression framework document with learning intentions identified that link directly to pupils' Small Step Targets and EHCP outcomes (where relevant). This will be monitored closely by staff to track progress made across the 7 broad areas of autism.

Transition

St Bartholomew's Primary School recognises that transitions for pupils with ASD can be a difficult time. St Bartholomew's aims to provide the right structure that allows the pupil to understand the transition process and reduce anxiety. Transitions are unfortunately unavoidable as a pupil moves through their education and beyond and it is the aim of the school to provide the appropriate structure and support whilst building their independence and resilience of the pupil so that can manage further transitions as they enter adulthood. Although transitions and transition plans are often based on an individual's needs and priorities within a wide range of specific situations, the School adopts the following guidelines, taken on guidance from the National Autistic Society:

Changing year groups

A change in classroom, teacher, teaching/learning support assistant or peer group can make autistic pupils anxious as it will mean a change to their routine. Here are some things you can do before the end of the school year to help prepare them for change:

• arrange a one to one meeting for them with their new teacher

• plan a time for them to visit their new classroom when there are no other pupils there

• identify a buddy from their new peer group

• make sure that their new teacher has an understanding of their individual needs and any strategies that are used to support them in the classroom.

Moving schools

A successful transition from one education setting to another needs good communication between both schools. It's important that education staff:

• personalise the process to meet the needs of pupil they are working with

• plan well in advance, involving the autistic child or young person, the team around them and their parents/carers

• arrange visits to the new education setting so that the pupil can become familiar with the environment and teaching staff

• encourage them to take photographs whilst visiting, they can then have a visual record of their new school and teacher

• organise peer support, eg a friendship group or buddy system.

Training

Autism Education Trust

St Bartholomew's Primary School are committed to supporting the continued professional development of all staff through appropriate in-service training. Training is provided for individual members of staff to enable them to fulfil their role. This includes specialist training related to autism and associated language, communication and interaction difficulties:

Making Sense of Autism

Good Autism Practice

Extending Good Austism Practice

The School SENDCo has received training from Autism Education Trust in Leading Good Autism Practice

Review

This policy will be reviewed every 3 years