Students with Autism
Developing engagement, interaction and learning
Foreword

As a parent of three children, to have my youngest diagnosed as being on the autistic spectrum at the age of 10 was devastating. What had I done wrong to cause this? It took me a while of disbelief and grieving to come to terms with the diagnosis; then, as it would with any parent or carer, the desire to learn all I could set in. This book provides vital information that parents/carers need when striving to get the maximum from their child.

Communication with the school as a parent is vital, and works best when there is one mainstay contact. For a child with autism there is no description of what goes on in the school day. To the child, home is not school, therefore the two do not interact, other than homework.

Parents quickly learn many rules and best practices, to get the best from an autistic child at home. From how to get the best answer to a question (e.g. never use “why”), to how to react when you are cross (believe me this takes practice), to using a visual rota for daily and sensory stimulation practices that calm when anxiety levels are raised.

It is important that the appropriate reciprocal practices are used at school to get the best from the child – and all of these are contained within this book. For example, my son finds it hard to work in groups, so careful planning by staff is needed to get the best from him. Also background noise in a classroom distracts my son and gives him headaches; as a result of communication with the staff, my son is able go to a quieter place to complete his task if necessary.

Transition, from year groups and school, is a time when schools and staff internally need to communicate with each other as again consistency in approach reaps rewards. As with all teenagers, puberty means challenges, but doubly so for the child with autism. Peers tend to develop socially faster, which can lead to bullying (however unintentional). An inclusion room, where my son can go at break and dinner, has proved invaluable.

I have seen my son, at times thrive at school, but also experience times of unhappiness – though blessedly these have been resolved with communication between parent, Special Educational Needs Coordinator (SENCO) and staff. At 14 my son is catching up with his peers, rarely needing the sanctuary of the inclusion room, successfully accessing all education and doing well. I know that the next big change will be sixth form and then university, but I also know that staff will work with my son to help him achieve his full potential. This book should prove invaluable to staff enabling them to dip in and out whenever faced with a difficult or new situation.

I know my son can be a challenge to school staff but their support and willingness to adapt to his needs as necessary has paid dividends. I admire them and hope that all children in Medway are as fortunate as mine, as he now looks forward to school.

By Julie Durcan
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Introduction

Thanks to all our contributors, who came together to develop a central collection of information, strategies, ideas and sources of further help to support young people with autism to excel in our learning environments. The following are all tried and tested suggestions. However, it is important to note that, when dealing with individual children and young people, what works for one young person, on one day, may not work for another young person, or on a different day. This booklet has therefore been designed to signpost the reader to a range of advice and information sources.

This booklet aims to provide guidance, helpful advice and signposts to further information and sources of support.

Definition of autism and key features

The term autism describes qualitative differences and impairments in reciprocal social interaction and social communication; combined with restricted interests and rigid and repetitive behaviours. Autism spectrum disorders are diagnosed in children, young people and adults if these behaviours meet the criteria defined in the Diagnostic and Statistical Manual of Mental Disorders (DSM) or the International Statistical Classification of Diseases and Related Health Problems (ICD) and have a significant impact on function.

(NICE Clinical Guideline, September 2011)

Autism was once thought to be uncommon, but recent studies have reported increased prevalence and the condition is now thought to occur in at least 1 per cent of children.

(NICE Clinical Guideline, September 2011)

A wide variety of terms are used to describe autism spectrum disorder. For clarity and consistency, in this booklet the term ‘autism’ is used throughout. This is in keeping with recent publications in this field.

Autism is a lifelong disorder and it can impact on the child or young person, their family and their education. However, with appropriate support, children with autism are able to achieve considerable success within their educational environments; with the significant majority achieving success within their local mainstream school. The following booklet contains ideas to help achieve these successful outcomes for all children and young people with autism. This booklet is also available online, allowing for bi-annual updates to be made where appropriate, visit www.medway.gov.uk/schoolforums.

We wish to thank all our contributors, who helped to put this booklet together. These include representatives from the following organisations: Autism Outreach Service, Children’s Therapy Team, Educational Psychology Service, Greenvale Infant School, Hundred of Hoo Secondary School, Kent Autistic Trust, MAGIC, Paediatricians and the Pre-School Advisory Team. Thanks also go to our parent/carer and student representatives, whose insight has proved invaluable.
‘It’s like my brain was made to be special. Most people, including my mum, say I am a perfectly ordinary person. But my mind is made so that there are no similarities to others’ minds - my brain is so unordinary’.

‘My memory would be quite good if I was able to store things in the right terms – but as I can’t, my memory’s not as good as it could have been. There’s lots in my brain and my mind, but storing it in my memory seems difficult’.

‘This was pretty much my timetable:

• Go to the Head Teacher’s office.
• Take time out for ten minutes.
• Have a fight.
• Swear at the teacher.
• Break.
• Get stressed in maths.
• Swear at the teacher again.
• Hit the teacher.
• Get sent home.’

‘I never feel 100 percent, it’s usually 90 percent. Goes down to about 85 percent, which means I’m mildly angry, 80 percent half angry, 77.5 percent grrrrrrrrrrrrrrrrrrrrrrrr.

‘Voice of the child

Bullying, of course, is not an issue confined to children with Asperger Syndrome but our eccentricities do make us a popular target. It is always said that one should not fight back, as I always feebly did, but to tell a teacher. Which should be an excellent method of dealing with it, if only bullies would play ball by bullying when a teacher is present’.
Supporting children with autism in the early years 0-5

Early Years provision for children with autism should be of a high quality where staff are able to:
• reflect on their practice;
• anticipate situations where children may require additional support;
• be aware of where to seek further advice.

The following strategies may help support children with autism in the early years. Many of these strategies are further explained in the reading list that accompanies this section.

Good practice in supporting children with autism in the early years may include:

**Providing additional opportunities for play and social interaction**

• Introduce new activities that are linked to the child’s special interest. For example, using an interest in animals to introduce painting by using animal shaped sponges to dip into the paint.

• Use objects that the child is interested in to encourage them to a new activity. For example, bring a favoured toy over to the new activity that you want to introduce.

• Make an attention grabbing box or bag that contain a number of the child’s favourite things, that might motivate him/her to communicate. For example, bubbles, squishy toys, puppets and cause and effect toys (such as those that light up or make a sound).

• Develop social interaction through turn taking activities. For example, using “your turn, my turn” with simple activities such as pushing a car down a ramp; or taking turns stirring when making play dough, building a tower of bricks, or pouring water into a funnel. Later, introduce another child to the activity and help them to see that other children are necessary for the game and that this might make it more fun.

• Many children may find child initiated activities difficult and may require support to be shown how to play. The role-play area can be used to model play activities, and help the child develop their play.

**Providing additional opportunities for a child to communicate**

• Motivate the child to communicate by using activities that the child enjoys and then encourage the child to request more of an activity through gesture, signing and/or speech. For example, trampoline, peek-a-boo and bubbles.
• Prompt the child to communicate. For example, encouraging them to make a choice between two items, such as a liked toy choice and one they do not like; placing an item temporarily out of reach so that the child communicates that they want the object; or giving a few puzzle pieces so that the child communicates that they need more pieces.

• Copy a child's actions and vocalisations may lead the child to notice the adult.

• Use songs and rhymes to encourage communication, such as, *row row row your boat* and *round and round the garden*. Encourage the child to anticipate the next word or action in the song. Find out from the parents/carers the rhymes that are already being used at home, so that these can be continued.

**Using additional strategies to promote a child's understanding of language**

• When giving instructions, use the child's name (so they know that the instruction is directed at them) and keep to key information. For example, “Alex, shoes” rather than “Alex, it’s now time to get your shoes to go outside”.

• Say what you want the child to do instead of what not to do.

• Show what to do as well as telling.

• Allow the child additional time to process information before giving any additional verbal information.

• Don’t insist on eye contact, as this may make it less likely that a child can concentrate on what is being said, as all their concentration may be focused on maintaining eye contact.

• Avoid language that a child may misunderstand, for example, “let’s get this show on the road” and “you’re pulling my leg”.

• Use developmentally appropriate visual supports when giving information, including signing, gestures, objects, photographs and pictures.
• Help the child to understand the order of activities by using an individualised visual timetable.

• Use a visual timer to show how long an activity will last and provide a visual clue that the activity has finished – for example, sign ‘finished’.

Adapting the early years environment

• Allow children time and a specific space away from the busy nursery/class environment. A chill zone could be a soft play den, a tent or an area that the child finds relaxing and contains objects or toys that the child enjoys.

• Support children to move between activities, prompting them to different areas in the environment if you observe that they are always in one area.

Providing emotional support

• Make key staff/person aware of the child’s needs, so they may anticipate situations where the child may need additional support. All members of staff should be aware of the child’s needs as appropriate, including, dinner staff and office staff.

• Find out from parents/carers the best way to provide comfort when the child is distressed.

• Provide advanced warning, where possible, for the child of changes to the physical environment or changes in staff – for example, “the outside slide can’t be used today because …”.

• Consider if it is always appropriate, or for how long, a child needs to join a large whole group activity, such as story time or assembly.

Developing self-help skills

• Practitioners should be aware that self-help skills such as taking off and putting on shoes, and washing hands may need to be taught in small steps. The use of visual supports may also help prompt the child for what to do next, for example, turn on tap, push soap dispenser, put hands under tap etc.

• Practitioners should be aware that some children may find it difficult to transfer some self-help skills, that have already been learnt at home, to a new environment; and that practitioners may need to re-teach some skills.

• Practitioners should be aware that some children may not yet be ready for toilet training and will need sensitive support whilst wearing nappies or pull-ups. Practitioners working together with parents/carers to identify when a child may be ready for toilet training and agreeing on a routine.

• Set a policy on self-help, toilet procedures and appropriate care plans for children.

Sensory needs in the early years

Please see Sensory needs for children with autism, page 27.
Further Information on aspects listed above can be found in:

**IDP (Inclusion Development Programme) Supporting children on the autism spectrum** - Guidance for practitioners in the Early Years Foundation Stage. See accompanying DVD; page 7, The EYFS and autism; page 44, Supporting children with autism in each of the areas of learning and development.

**Motivate to Communicate** - Simone Griffin and Dianne Sandler 2010. ISBN 9781849050418. This book gives a list of games that can help to encourage communication.


**National Autistic Society Website** - www.autism.org.uk

Planning for changes and supporting successful transitions

Transition from one setting to a new early years environment

Although this is written with pre-school children in mind, many of the following strategies will be useful for older children.

- Transition planning should begin as soon as parents/carers know the setting to which the child will be transferring. This may be between home, childminders, pre-school and school. A transition plan should be put in place in partnership with the parents/carers; and a meeting arranged between all those working with the child.

- It would be helpful for practitioners to use the Autism Medway Transition Package for Early Years that supports the sharing of information such as:
  - this is me / this is my family / my favourite things are…
  - the things I need to do to join in and learn are…
  - helping me understand what is happening…
  - things I find difficult / it works best when…
  - sometimes I get upset when…

- Regular pre-start visits may need to be made by the child before beginning at the new setting. These should be clearly identified on the induction and support plan. It can be helpful for the new key person to visit the child in the established setting and at home.

- The transition pack should be viewed as a working document, to be re-used on each transition. Encouraging a child to look back at their previous transition packs can help develop a view of change as positive, which in turn boosts the child’s confidence in managing future change.

- It is recommended that photographs are taken, and shared with the child, of the new setting, showing layout of rooms and photographs of key staff that will be working with the child.

- It may also be useful for the child to know the routes that can be taken to nursery/school. It might be reassuring for the child to know that different routes can also be taken.
• Adults should indicate clearly to the child when they will be moving to a new setting. For example, marking the dates on a visual calendar when the visits will take place and the actual start date of pre-school/school.

• Any uniform that needs to be worn should have several practice try-on sessions.

Managing transitions in schools

• Help children to identify the things that are going to stay the same, for example playtimes and lunchtimes.

• Ensure children meet their new class teacher, teaching assistant and key adults before transition.

• Ensure children know who their key adult(s) will be.

• Support children to be familiar with the layout of their new school/classroom (the child could use a camera to take photographs).

• Ensure the child has a checklist of equipment to bring each day or to each lesson.

• Provide the child with opportunities to become used to the new uniform.

• Teachers need to be aware that children returning to school after holiday periods may initially tire quickly.

• Ensure friendship groups are considered during transitions and children know which friends will be in their new groups/classes/schools.

• Ensure children know where to go at break if they feel anxious – some schools have an area that can be used as a safe place during unstructured times.
• Provide opportunities for the young person to familiarise themselves with and practice the journey to and from school.

• At the start of the day, provide regular reminders of what to do in each new environment – visual prompts can help with recall and reassurance.

• Make sure the children know where they will be putting their belongings – this may require explicit teaching and modelling.

• Careful preparation will be required for school trips and residential trips.

• The build-up to Christmas, with the associated changes to normal routines, can be very difficult for children with autism in our schools.

• Social stories and tailor made what if cards are very effective strategies to support preparation for change.

• Further ideas can be found in the *Enhancing Access to the Secondary Curriculum* chapter.

**Managing transition to further education/employment**

• The Connexions service has an important role to play in helping young people prepare for their future and accessing ongoing support. Information about this service can be found at: [www.connexionskentandmedway.co.uk](http://www.connexionskentandmedway.co.uk)

• There is further useful information at [www.direct.gov.uk/disabledpeople](http://www.direct.gov.uk/disabledpeople) and [www.skill.org.uk](http://www.skill.org.uk)

• For young people who have needed extra help with their work at school, or have a Statement of Special Educational Needs, the Connexions Personal Adviser may prepare a Moving on Plan. This helps colleges and other training organisations give the right support when the young person starts on a new course.
Inclusion in the primary classroom

All the chapters within this booklet have been written with both primary and secondary age children in mind.

Much of the information contained in the Supporting children with autism in the early years (up to five-years-old) chapter continues to be relevant. However, it is important to note that the primary curriculum can provide more of a formal structure for children and this can present challenges. Although children respond positively to structure, the increasing demands of the primary phase can create some challenges. Using the child’s strengths, interests, meaningful rewards and motivators will help overcome these challenges.

It is important for teachers to remember that children will continue to require:

• Simple instructions
• Visual timetables to learn routines. Visual timetables help children with autism develop feelings of control over their day, thereby reducing the potential for anxieties to develop. The visual timetables also provide a mechanism to help alert and prepare children with autism to the inevitable changes to routines.

The following resources may prove useful:

• **Inclusion Development Programme (IDP) - Supporting children on the autism spectrum:** School age: All schools have been provided with a copy of this booklet and the accompanying DVD.


• **The Comprehensive Autism Planning System (CAPS) for Individuals with Aspergers Syndrome, Autism and Related Disabilities** Shawn Henry and Brenda Smith Myles. ISBN 978 1 934575 03 1.

• **Socially speaking** – a pragmatic social skills programme for primary pupils. Alison Schroeder. ISBN 185503252X.
Enhancing access to the secondary curriculum

One of the most potentially daunting transitions for our young people is starting at secondary school. Many of the ideas talked about in the Planning for changes and supporting a successful transition chapter will be important in achieving a settled start to young people’s secondary school career.

Often, secondary school timetables are bewildering for students with autism. They will be exposed to a greater number of subjects, even more teachers and support staff, a different room or area for each subject and often with the additional complexities such as two-week timetables.

It is vital that students’ needs are shared with all staff, including supply staff, and that this is repeated at the start of each academic year. A detailed pen portrait should be available for teachers and support staff from day one, if at all possible.

The following strategies may be of use in minimising pressure and distress to students with autism in secondary school

- Visual timetables are almost essential. In addition, enabling daily access to a supportive adult in school, who can help with reminders for PE kit, ingredients for food technology lessons and other organisational hurdles can ensure that students with autism remain well briefed and ready to learn. A copy of timetables and reminders sent home to parents/carers is also essential.

- Parents/carers of children with autism may be very anxious and need regular reassurance. An adult who is designated as the main point of contact, and who is fully briefed of both the child’s needs and family circumstances, may help to ensure consistency of home/school communication.

- If schools do not have a locker system, having an agreed area where items such as PE kit can be kept between lessons, may mitigate against disruption that continuous failure to bring equipment may bring.

- Flexibility around access to the curriculum is essential. If students with autism are struggling with the demands of subjects such as PE, dance or drama, encouraging them to be active observers/peer assessors can develop appropriate and more active participation over time. Considering the use of alternative technologies can be supportive. For example, enabling individuals, pairs or small groups of students to spend at least some of their PE lessons on a Wii Fit has been very successful.
• If a young person is easily distressed in large crowds, movement between lessons can cause huge anxiety and confusion. Permitting students with autism to leave for the next lesson five minutes early with a designated buddy can ensure a prompt and stress free start to lesson.

• Students with autism can often find group work difficult. It will be important for all staff to be aware of the needs of their students with autism and to employ a range of strategies to support these young people to be able to join and participate in work groups; or if more appropriate, to be able to work individually.

• Students with autism will often need access to a pre-agreed safe place, to which they can return where they will be supported by a trusted adult or adults. This facility is often necessary in a secondary environment when the day can be full of unpredictables such as supply teachers, room changes etc. An “Exit” or “Time Out” card can be provided to ensure that this safe place is easily accessed by the young person when it is necessary.

• Social times in secondary schools can be a minefield for teenagers with autism. The sheer size of sites and the often enormous numbers of young people engaging in unstructured activities can present difficulties. However it is almost always possible to provide these students with a more structured, quieter environment. Libraries will often be the venue of choice, but large schools with more resources will be able to allocate more areas as quiet safe areas for vulnerable students. New students with autism may need to be escorted by a sympathetic adult or buddy to begin with. Once again, it is important for support systems to be in place; be clearly communicated to the child and all staff; and be consistently available. Examples of further support systems can be found in later chapters of this booklet.

• Homework can be another area of potential difficulty. It is essential that schools have consistent systems in place to ensure homework tasks are clearly communicated to parents/carers. Two examples of effective systems are pupil homework diaries, checked by a member of staff to ensure that the tasks have been recorded accurately; and IT learning platforms, that contain details of homework tasks for each lesson.

PE lessons

For a student with autism, PE lessons present their own challenges. Whilst some students relish the structure and discipline, for others the demands can be very difficult. The social skills, the co-ordination required to succeed and the physical contact inherent in some games, can be a problem. Also, the organisation necessary to remember to bring kit along with the noise and activity in the average changing room, often renders these lessons extremely challenging for some young people with autism.

Our experience with such students has led us to believe that the following strategies may result in successful inclusion in PE lessons:

• Do not force the young person to participate in the first instance. Often, providing them with a role, such as refereeing, adjudication, or equipment monitoring, can create a feeling of belonging without the pressures of direct involvement in the physicality of the lesson.

• It is usually relatively simple to enable access to a private area to change, and this makes a massive difference to the student’s perception of the lesson. If this is not possible, allowing the student with autism to change after the start of the lesson (when the area is quiet) and leaving the lesson early (before the changing room fills up), will usually help.
• If lockers are not a feature of your school, finding somewhere for the storage of PE kit removes the anxiety of trying to remember it. In most instances, if it is a little smelly by half term, but this is preferable to a distressed child who cannot remember to bring it in.

• Students with autism can often be the last to be picked for teams and this has a serious impact on their levels of self-esteem. PE teachers can pre-pick teams, allowing ability levels and skills to be evenly and fairly distributed.

• If team activities are a challenge too far, individual events, such as some athletics events, table tennis and trampolining, are often more successful.

• We have found the use of Wii Fit extremely successful in engaging students with autism in physical activity, in the rare instances where none of the above has been successful.

• Some of the ideas highlighted in the Sensory needs for children with autism chapter may be useful in reference to PE lessons.

Other considerations:

• New entrants who have come from primary schools where the uniform expectations are less formal (i.e. polo shirts and sweat shirts instead of ties and blazers) often struggle with the stiffness of new and more rigid rules around dress.

• Encouraging parents to purchase the new uniform early in the summer break so that it can be washed several times to remove the stiffness is often helpful. Also, ensuring school shirts are one size larger than is necessary can mean that the student feels less constricted when buttoning up and wearing a tie.

• It is also vital that all staff understand that these students are more likely to struggle with sensory extremes and a degree of flexibility may be needed at some times of the year.
**Transport to school**

For many families with a child with autism, the idea of the journey to the big school can be another source of major anxiety. Often the child themselves will share or pick up on that anxiety, or they may be completely oblivious to the worry which parents/carers are experiencing.

As soon as the secondary placement is confirmed by the local authority, planning the journey to school should be included in the transition plan for the young person. Even if the journey is short and is achievable on foot, it cannot always be assumed that it will be problem-free as skills which may appear to be embedded, sometimes vanish if the child is stressed during the transition process.

The following strategies may be helpful:

- Even if the new journey is a short one, it will need to be rehearsed so that it is familiar by the beginning of the new academic year.
- Students with autism often lose track of time, so showing them how to time and track their journey may increase their involvement in their planning.
- Parents/carers can do much to alleviate their own, and the young person’s anxieties, by using the time between the confirmation of the secondary placement and the start of Key Stage 3 to rehearse and ensure that the journey becomes familiar.
- If the child transfers as part of a cohort from the same primary school, enlisting the support of peers and their parents/carers, to ensure that none of the young people are isolated during the journey to school, may be useful. This strategy is also positive for other new students.
- Parents/carers may also feel reassured if the child has a mobile phone, where emergency contacts are easily accessible. It is also important to ensure that credit is maintained.
- It may also be appropriate for the secondary school to put the young person in contact with an older buddy, who will support the journey until he/she is comfortable and feels safe.
- “What if” cards provide a useful resource to support children to plan and rehearse for unexpected events, such as losing a bus pass, missing the bus, the bus not turning up, or the child’s normal seat being unavailable.
- It is sometimes appropriate if a route appears particularly challenging for vulnerable students, for the secondary school to ensure that the route is monitored. This can be achieved by a member of staff riding the bus without notice (if schools have access to an on-site PCSO, this can be a positive use of time). This usually has impact in that lively behaviours calm down in expectation of an adult embarking. This quickly becomes the norm and also reassures students who may not feel safe.
**Physical organisation of the classroom**

Students with autism may have:

- Poor organisational skills.
- High anxiety.
- Difficulty with personal space.
- Poor sensory processing.
- Social communication difficulties.
- Difficulties with unstructured environments.
- Difficulties with maintaining attention.

(This is not an exhaustive list.)

In order to minimise many of these difficulties, the physical structure and classroom layout need careful planning and management. This includes:

- Clear defined boundaries within the classroom.
- Furniture and fixtures organisation – tables, chairs, bookcases etc.
- A quiet area within the classroom to reduce auditory overload.
- An individual workstation to reduce visual input and aid concentration.
- Labelled areas for books and equipment, using both pictorial and written form.
- Visual clues/labels to reinforce the learning environment.
- Clear, uncluttered walls to reduce visual distraction and over stimulation.
- Visual timetables to promote independence, offer predictability and create routines.

A classroom that is well organised, structured and offers predictability will provide the highest probability for on-task behaviour for both pupil and adults.

Examples of good practice, including pictures and photographs, can be accessed via the Autism Outreach Service.
The following resources may prove useful:

- **Hopscotch** - A Practical Guide for staff in all schools to develop essential skills for learning. Obtainable from Rochester Healthy Living Centre, Delce Road, ME1 2EL. Phone: 01634 334280.


Communication - it’s not just about language

Approximately 8 per cent of communication is non-verbal. This includes: eye contact, facial expressions, gestures, tone of voice, pitch, intonation and volume – all of which we use spontaneously, without thinking about it. It is only when individuals do not use these things naturally that you may notice a problem. Children with autism may even use conflicting non-verbal behaviour, such as smiling when they feel distressed or angry.

Social communication is also about the way that a person uses the language that they have. For example, a child with autism who has fluent language, may lack ebb and flow in conversation (they talk at you rather than with you), they may talk at length about a topic of interest and not read your non-verbal cues of boredom. Even you walking away may not deter them and they will follow, still talking.

Some children with autism use their language only to communicate their needs, rather than for the pleasure of social interaction. However, some children may not communicate their needs, expecting you to know what they want - because of their difficulty with seeing somebody else’s point of view (Theory of Mind).

Young people with autism present very differently. Some young people may prefer to be alone, whereas others want to interact but are not quite sure how to go about it. For example, the child may latch onto a word in a conversation and go off on a tangent, or make random comments that are not connected to the situation. An example of this is a boy who said, “Onions make you cry, you know?”, in the middle of a maths lesson.

Some young people with autism use language competently, while others are non-verbal. However, all of these young people will have some difficulty with social communication. A common area of difficulty is higher level language, such as taking things literally and not being able to read between the lines; not understanding jokes and sarcasm; and not being able to make inferences from limited information.

Children with autism have described communication as, “like scrambled radio connections”. They have expressed concerns that their communication, “comes out rude when I don’t want it to” and stated, “I know you pass messages with your eyes, I just don’t know what the message is".
It is therefore important that all educational staff take care over the language used. It will be important for adults to take additional time to check their own and the child’s understanding. Making information visual wherever possible is also key.

Further strategies to support young people with autism and the adults working with them are included in many of the other chapters.

The following resources may prove useful

- **Hopscotch** – A Practical Guide for staff in all schools to develop essential skills for learning, Obtainable from Rochester Healthy Living Centre, Delce Road, ME1 2EL. Phone: 01634 334280.

- **Inclusion Development Programme (IDP)** – Supporting children on the autism spectrum: Early Years.

- **Inclusion Development Programme (IDP)** – Supporting children on the autism spectrum: School Age (All schools have been provided with a copy of this booklet and the accompanying DVD).

- **Language for Learning** – social communication resource book. Schools that have accessed the Language for Learning training will have this resource within school. The Therapy Service can be contacted for additional information.
Understanding unwritten social rules

There are unwritten social rules and expectations of behaviour that we all seem to know, but were never taught. This can be known as the hidden curriculum. For example, most pupils would know that to tell the head teacher that her roots need doing is not a good idea (even if that is the honest truth). Or when the teacher tells a pupil to “get out” she means stand outside the door not leave the school. Most pupils would know that they don’t speak to the teacher in the same way as they would their sister. Also, most children would know that they shouldn’t greet their sister’s best friend by saying, “Oh you’re Charlotte, the fat one”.

Individuals who have autism do not come equipped with the same ability to understand the Hidden Curriculum. Therefore they break a lot of social and behavioural rules without intent or even knowledge that they are doing so. This, along with their difficulty in generalising information from one situation to another, means that they make the same mistakes over and over again – at a tremendous social cost.

When individuals with autism make errors in this area it acts as a barrier to social acceptability. Stress levels can be greatly increased by their lack of awareness, which can affect attention and ability to learn. Self-esteem and independence can also be greatly reduced, as many opportunities for error exist when the Hidden Curriculum is not understood. The person’s safety can also be compromised.

The importance of explicitly teaching children the skills required to understand the Hidden Curriculum is therefore considerable. See Communication – it’s not just about language chapter for information regarding children’s difficulties with literal understanding.

Less structured times of the day

There are times in everyone’s day where the expectation and structure is less clear. Individuals with autism tend to thrive in structured environments, and become confused and anxious in unstructured settings. How individuals with autism process environmental and internal information has a major impact on their feelings, thoughts and actions.

Pupils need to know what to expect, but they have trouble anticipating the demands of different settings. This uncertainty often leads to disorganised or ritualistic behaviours to help calm the pupil. Others will internalise anxieties during school hours and wait until they get home to display similar behaviours.
Less structured times are times where there are no specific instructions to follow or tasks to complete. They are times when individuals with autism, left to their own devices, can make very poor choices of things to occupy their time. In addition, their attempts to manage these environments, regardless of whether they are successful or otherwise, require a great deal of energy.

Within the school environment, less structured times most likely include:

- Corridor passing time.
- Cloakroom time.
- Transition time in class when work is completed.
- Transition from one activity/work task to another.
- Toilet time.
- Lunch time.
- Break time.

A useful strategy to reduce the amount of unstructured time experienced by children with autism is to use work boxes and/or to do lists of activities to be completed. Further ideas are included in the Enhancing access to the secondary curriculum chapter.

**Social times**

Social times can be a minefield for young people with autism. Children with autism do not learn to interact with others simply by being placed in a group with them. They need help in understanding the hidden rules of social environments. Children with autism need to be explicitly taught how they can join in; how to wait their turn; and how to learn the rules of games. Peers can be important in helping to teach children with autism to play but they require guidance and support to enable their input to be effective. To mitigate some of these issues, the following ideas may be useful:

- Develop safe, quiet areas where a known adult is available.
- Establish lunch/break time clubs to provide structured opportunities for children to practise and receive feedback on their social skills.
- Set up adult-led structured activities on play grounds and, once the young person is confident in their understanding of the rules and expectations of the activity, encourage gradually increasing numbers of other children to join in. It will be important for adults to remain available, to model social problem solving.
- Having a range of structured activities and equipment available during social times for young people to use.
- Buddying systems.
- Circle of Friends has been found useful. Further information on this approach can be obtained from the Educational Psychology Service.
- Use social times as planned learning opportunities, to actively teach children with autism the social skills they require.
The following resources may prove useful:


- **Asperger's… What does it mean to me?** - Structured teaching ideas for home and school by Catherine Faherty. Publisher: Future Horizon. ISBN 1-885477-59-7.


- **Language for Learning** - Chapter 4. [www.languageforlearning.co.uk](http://www.languageforlearning.co.uk)
Sensory needs of children with autism

Over 80 per cent of children with autism experience difficulties in processing sensory information. They may appear distracted, disengaged or withdrawn, which could affect their learning. Some simple strategies or equipment can help these children reach the Calm-Alert State – this is the optimum window for learning and has been seen to improve attention, engaging, focussing and learning.

To help you identify certain strategies for a particular child please refer to Hopscotch - A practical guide for staff in all schools to develop essential skills for learning, or follow the child's therapy programme.

An example of some of the strategies may include:

• Small pieces of equipment used while the child is working in the classroom or nursery (e.g. a Move ‘n Sit cushion, Chewy Tube, fidget toy).
• Physical activities which can be carried out at the desk prior to fine motor activities (e.g. chair press ups, joint compression and self hand massage).
• Sensory diets, programmed into the class timetable including wall press-ups, or wearing a weighted rucksack during break time.

All these strategies will help the child reach a calm-alert state. These strategies may need to be carried out several times a day and could be integrated into the class timetable.

Fine motor skills

If a child has sensory processing difficulties, you may find that the child’s fine motor skills are affected. Please refer to Hopscotch – A Practical Guide for staff in all schools to develop essential skills for learning.

Toileting

Young people with autism may present with on-going toileting issues. Although it is important to ensure there are no underlying physical causes for such difficulties; Of similar importance is the consideration of the physical environment of the school toilets.
Lunchtimes

School dinner halls can be challenging for all children. The smell of the canteen and the sounds of clattering plates, clinking of cutlery, scraping of chairs and conversation bouncing off hard surfaces make them extremely noisy, busy environments – especially for children with sensory processing difficulties.

Some children with autism are rigid in their eating habits, sticking to a restricted range of food. Some children will need more time to chew and swallow their food.

It is important that lunchtimes should be kept stress-free, enjoyable and as calm as possible for children with autism. It may be useful to have a separate, small supervised eating area, or to allow the child to access the dinner hall early, before it gets busy.

Sense sensitivity

Some children with autism experience discomfort and associated anxiety in relation to sense sensitivity. Sound and touch are just two of the senses in which children can experience hyper-sensitivity. Sometimes these difficulties are not always apparent. Parents/carers can play a useful role here, providing information on potential sense-sensitivity issues to school staff. Hopscotch – A Practical Guide for staff in all schools to develop essential skills for learning provides useful information and support ideas.

Sensory needs in the early years

- Staff need to be aware of a child’s sensory needs. For example, a child may be sensitive to noise levels; certain or unexpected noises; the intensity of lighting; certain smells or intensity of smells, such as the nursery at lunchtime; certain textures; and environment with lots of highly coloured, busy display pictures (finding it difficult to concentrate).

- Children with autism often misinterpret the sensory information received from the environment; they may over or under react to sensory information. For some children, senses might be heightened, but for others they might be dulled. For example some children may, avoid people touching them; dislike touching messy play activities; be sensitive to certain clothing textures; avoid certain food textures; be sensitive to certain lights; be intolerant to certain smells and noises; chew on objects or lick surfaces; lay on hard surfaces; want to constantly hold objects; not feel pain.

- Many children may have difficulties with balance and body awareness.

- Children may need a variety of sensory experiences to help them interpret the environment and to be ready to engage, interact and learn.

Early years practitioners will need to:

- Observe the child in the setting and be aware of possible difficulties.

- Keep a diary/notebook of observations.
Practitioners may discuss and consult with their setting SENCo/inclusion advisor/advisory teacher about a referral for a sensory assessment from Portage. Early years’ practitioners, who have attended Portage training, may complete the Portage Sensory Referral form that is available on completion of this training.

Following a Portage Sensory Assessment, a number of movement or body awareness activities may be suggested by the Development Service or the Sensory Outreach Team.

Many of the Children’s Centres have sensory rooms that may be booked for children and their parents. Children’s Centres with sensory rooms in Medway include: Bligh, Deanwood, Delce, Lordswood, Wayfield and Woodlands.

**Sensory needs in the school age years**

Reference has been made to sensory needs in a number of chapters. In particular *Enhancing Access to the Secondary Curriculum* contains a number of useful ideas.

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**The following resources may be useful:**

- **IDP Autism**, the environmental sensory checklist
- **Hopscotch** - A practical guide for staff in all schools to develop essential skills for learning.
  Obtainable from Children’s Therapy Team, Rochester Healthy Living Centre, Delce Road, ME1 2EL.
  Phone: 01634 334280
Meeting the emotional needs of children with autism

Unmanaged anxieties can lead to further anxieties developing and over time increase the risk of depression and/or anxiety disorder diagnoses. High numbers of adolescents and young adults with autism have diagnoses of depression and/or anxiety disorder – The National Autistic Society suggests that one in three adults with autism has suffered from depression and/or anxiety.

When working with young people with heightened anxiety, it is important for self-management systems to be explicitly taught. The young person should be supported to:

- recognise and communicate their feelings;
- identify anxiety triggers;
- reduce/remove triggers where possible;
- practice self regulation/self-management techniques, such as the Five Point Scale.

Young people with autism often express their emotions, such as fear or anxiety, as anger or withdrawal. It is therefore important for adults to consider the underlying emotional response of the child, not just the presenting behaviour.

The following areas can present young people with autism with particular emotional challenges.

- Coping with traumatic and/or sad events – this includes bereavement/loss issues and can result in unexpected change. For children with autism, this can include the loss of something, or someone that is important to them. Useful information can be found in *Death, Bereavement and Autistic Spectrum Disorders*, The National Autistic Society.

- Sex and relationships – this involves understanding the changing physical, emotional and social environments related to adolescence. Some young people with autism respond to such confusing changes with inappropriate social responses, for example displaying sexualised behaviour. The explicit teaching of relationship rules is therefore important. Useful information can be found on the National Autistic Society website [www.autism.org.uk/17079](http://www.autism.org.uk/17079)

- Self-harming behaviour – for young people with autism such behaviour can be sensory seeking and/or anxiety reducing. It is important for young people to be explicitly taught replacement behaviours to provide the required sensory stimulation and/or anxiety...
management. Cognitive behaviour strategies, differentiated to meet the needs of children with autism, can be useful in helping young people learn more appropriate anxiety management techniques. Useful information on self-harming issues can be found at the following websites:

- **www.challengingbehaviour.org.uk** The Challenging Behaviour Foundation provides training and workshops, as well as producing a series of fact sheets discussing a range of behavioural issues.


- **www.medway-magic.org**

  - School phobia/attendance issues – these are frequently linked to anxiety and/or sensory issues. Working with families, gradual reintegration programmes and cognitive behavioural approaches can be key in supporting young people with autism to be able to successfully return to school. The Autism Education Trust (AET) has a number of useful resources for students and teachers, including:
    - tools for teachers supporting pupils with autism
    - a guide for supporting children through transition
    - *The Den* - a new, interactive area for teenagers with autism.

  - Sleeping difficulties – staff should be aware that these could cause learning, attention and attendance issues.

  - Eating difficulties – these may be exacerbated by emotional difficulties and family stress. The Community Nursing Team for Children and Young People with Learning Disabilities work with parents/carers of children with autism – supporting with challenging behaviour, sleep difficulties, eating difficulties etc. They are based at Residence 13, Medway Hospital and can be contacted on **01634 830000**.

Staff working with children with emotional needs should be mindful of the timely need for specialist advice and intervention. Good safe-guarding practice is important and staff must be aware that children with autism may experience difficulties communicating concerns and worries, including those caused by abuse. It is therefore important for signs of distress to be carefully noted, monitored and reported as appropriate.

It is important to consider the importance of supporting the needs of the family, as supporting the family will often go a long way towards meeting the emotional needs of the child.
Counselling young people with autism

Young people with autism tend to think logically and are likely to experience difficulty with empathy and insight. Young people with autism may feel isolated, have low self esteem, low confidence and struggle with relationships (family, socially, romantically, professionally and educationally). Other difficulties may manifest themselves as anger, violent behaviour, self-harming, suicidal thoughts and low mood. These must be managed in a professional, non-alarming manner; and safeguarding procedures should be followed where appropriate. It is very important that counsellors have the skills to recognise autistic traits, to have an understanding of the effects and how they can support the young person within ethical frameworks. It is important to note that not all young people with autism are the same, just as not every non-autistic child is the same. A big element to the therapeutic process with any client is the relationship. The counselling sessions give the young person with autism the opportunity to feel listened to and understood, as the focus is completely on them for the session. Young people with autism view and manage the world differently to other young people. Counsellors are trained to work with difference. There needs to be a clear understanding of what the differences are and how these can affect the therapeutic process.

Counselling can be accessed from:

- The Strood and Hoo Community Counselling Service. This service will take self-referrals as well as staff, parent/carer, social care, school health and CAMHS referrals. Providing the young person is Year 9 and above and considered Gillick competent, parental consent is not sought (counsellors assess the competency). Otherwise, consent is sought from parents/carers and a discussion around the young person’s needs and difficulties takes place. For more information contact: Paula Johnson on 077123 99798.

- Onside, Silverbank Park.

The following resources may be useful:


Challenging situations
(or situations that challenge)

How often do we hear adults say “he just won’t comply”, “he just refuses” or “she sticks to her own agenda”. Children with autism could easily say the same about adults.

Having autism does not automatically mean that a pupil will present with challenging behaviour. However, due to the difficulties associated with autism, pupils are more vulnerable to developing behaviour that presents as a challenge to peers and adults. When a child is in their height of anxiety/anger/stress, he/she loses the capacity to think. Allow time for the child to calm down before trying to communicate verbally. These behaviours tend to manifest themselves during unstructured times and/or unexpected changes.

Invariably it is a breakdown in communication that results in challenging behaviour. Therefore, it should be the aim of those supporting the child to understand what message this behaviour is communicating, and this means making sense of his or her autism.

Professor Rita Jordan says “It is not enough for an educator to note a child’s behaviour, without some understanding of what it might mean in a particular case; a child who hits another child may be attempting to play chase, rather than displaying an act of aggression. Similarly, a child who interprets language literally is unlikely to be attempting to act as the class clown but is displaying signs of a distressing confusion and an inability to compute context”. (British Journal of Special Education Volume 34: Number 1, page 13: March 2008.)

The first step is to understand the behaviour and the next step is to plan a way forward. The plan needs to be focused and managed in a clear and consistent way, so that new skills are developed and learnt. Children will need support to generalise skills from one situation to another.

The following resources may be useful:


- The comprehensive autism planning system (CAPS) for individuals with Aspergers syndrome, autism and related disabilities. Shawn Henry and Brenda Smith Myles - ISBN 978 1 934575 03 1.

- Cross refer to Emotional needs and communication and unstructured times.
Working with parents/carers

When autism is diagnosed, families and carers can experience a variety of emotions, shock, denial and concern about the implications for the future. They may also have a profound sense of relief that others agree with their observations and concerns. When working with parents/carers, it is important to remember that they may require time and space to come to terms with the diagnosis and what it will mean for the future of their child and their family. This is likely to be an on-going process, with particular relevance at points of transition and each development stage.

In order to fully support pupils it is extremely important that good communication between schools and parents/carers is established and maintained.

If parents/carers feel they are involved in their child's learning community, and have confidence in that community, then the pupil is likely to be more confident and less anxious. From the outset, parents/carers should be given the name of a key contact for their child. The use of a home-school contact book to communicate information and positive messages can be useful.

School staff can help parents/carers support the work of the school by making available and explaining:

- weekly timetables;
- homework arrangements;
- target setting (individual education plans, provision mapping, strategies to support targets etc);
- alternatives for unstructured times;
- names of key people;
- termly support groups (for parents/carers to share knowledge);
- friendship circles.

It would be beneficial to establish joint targets and home-school agreements. If parental support and home-school communication expectations are not clear, parental anxiety levels can be raised. It may be useful to suggest parents/carers contact a local parent/carer support group to help them. Such groups can have the trust of the parents/carers and can offer support to the school. Some organisations offer training to parents/carers and are working in partnership with Medway Council.
A diagnosis of autism: from a parent/carer perspective

When parents/carers receive a diagnosis of autism for their child, it is common to feel a mixture of emotions. Some parents/carers report that receiving a diagnosis is a relief and a positive experience because all their suspicions were confirmed. Parents/carers also report that receiving a diagnosis is devastating, a grieving process, depressing, heart-breaking and extremely upsetting.

Once a diagnosis of autism is made, the family often experience a period of adjustment. Parents/carers need time and space to come to terms with the diagnosis and what it will mean for the future of their family.

Top tips for teaching staff

• Offering a listening ear to parents/carers who want to talk. Ensure that parents/carers feel listened to instead of talked at.

• Ask what works well at home: you may be able to use the same technique in school.

• Have an understanding/appreciation of the emotional impact a diagnosis can have on parents/carers.

• Parents/carers who have children with autism sometimes feel helpless and feel they lack control when it comes to their child’s education. Keep parents/carers informed of strategies and interventions that are used in class.

It will be important for professionals to be sensitive to the fact that a diagnosis can still have an emotional impact upon parents/carers, even if it was made many years ago. Periods of transition or new assessments can force parents/carers to revisit some very painful issues and realities once again. As such, parents/carers will require on-going emotional support beyond the period of diagnosis.

Role of the Family Liaison Officer (FLO) / Home-School Support Worker

FLOs and Home-School Support Workers play a key role in many of our schools, providing both generic and autism specific support. Some examples of good practice in their support of children with autism and their families include:

• Informal coffee mornings.

• Setting up/running support groups and inviting speakers on specific topics of local interest.

• Supporting transitions to/from school.

• Being an approachable and trusted ‘point of contact’ for families.

• Help filling in forms and accessing support, such as holiday clubs.

Children’s centres

Sure Start Children’s Centres provide information and services for families with young children aged from birth to five years in the local community. They provide a variety of support and services to local families, including those with children with autism.
Useful parent/carer group contacts

Autism specific:
- **Kent Autistic Trust** - offers telephone support and information; face to face discussion of problems and possible ways to solve them; helps parents/carers work with Education, Social Services and Health; and promotes awareness of and support for autism. Contact details: 01634 405168, email jo@kentautistic.com

- **Medway Autism Group & Information Centre (MAGIC)** – a support group for parents/carers of children with autism, run by parents/carers of children with autism. MAGIC offers a point of contact for information on all aspects of autism and co-existing conditions. MAGIC also offers events and activities for children with autism. Some of the facilities that MAGIC offers are: access to information on autism via the internet; book loans on autism free of charge; advice on available benefits and where to get help; a place to meet other parents/carers and professionals in comfortable surroundings; information on the best places to visit for children with autism and available concessions; and organising fun events that are developed for children with autism. Contact details: 01634 292015, email: office@medway-magic.org

- **The National Autistic Society (NAS)** - a UK charity providing information, support and services for children with autism and their families. The NAS runs local support groups. More information can be found on their website: www.autism.org.uk

- **Medway Autism Outreach Service** – provides training for parents/carers on topics such as: gaining insight in to the world of autism; using comic strip cartoons; and using social stories. Contact details: 01634 334166 (for booking training only. All other parent/carer queries to go via their child’s school.)

Other organisations:
- **Medway Parent Carers Forum.** Contact details: Phone: 07813 123984 or email: medwaypcf@googlemail.com
- **KIDS** Contact details: 01634 577657
- **Medway Carers’ Centre.** Contact details: 01634 577340. email: medwaycarers@aol.com

English as an additional language

Children with autism for whom English is an additional language will have similar needs to those of children with autism for whom English is their first language. However, for parents/carers it is important that time is taken to explain educational and medical terminology and the use of an interpreter considered.

The National Autistic Society website offers translation of information on autism in 29 different languages. There is also an over the phone interpretation service offering 150 languages.

The Autism Education Trust provides information on documents relating to autism that have been translated into different languages. These include documents on *Transition* and *Choosing a school for your child*.

Signpost to resources:
Following diagnosis, there are a variety of professionals who may be able to support the child, the school staff, and the family. It is important that school staff, and schools as a whole, see themselves and are valued as part of a multi agency team who support children with autism.

Children and families may have difficulties connected with their autism at home, which are not visible in school and vice versa. By working in partnership, schools and other agencies/professionals are able to support children and their families, as well as model good communication and collaboration.

When the possibility of a diagnosis of autism is being discussed, please refer to the Social communication diagnostic pathway leaflet.

**Autism Outreach Service support**

The team consists of two specialist teachers who provide outreach to schools so that they can successfully include pupils with social communication needs – including those with a diagnosis of autism. The team work in a collaborative capacity with various agencies and parents/carers to enable a coherent, consistent approach.

Referrals usually come from schools, but other agencies are able to contact the service with concerns.

The service runs autism forums for schools to attend throughout the academic year. From this, the Autism Outreach Service tries to determine the level of support required and offer advice and access to a wide range of resources. Schools are also offered a range of training options, including: training on basic autism awareness; the TEACCH approach; Comic Strip Conversations; Social Stories; autism observations; transitions; teaching assistant training; and mid-day meal supervisor training. The service includes Language 4 Learning and Team Teach – Positive Handling tutors. Schools can also ask for bespoke training.

The service runs drop in sessions and phone in sessions at allocated times. In addition, schools and other agencies are able to contact the service via email or phone.

Contact details:
Medway Autism Outreach Team
Woodlands Place
Woodlands Road
Phone: **01634 334136.**
**Child and Adolescent Support Team (CAST)**

The Child and Adolescent Support Team works with children and young people, aged from birth to 18 years, and their families where support is needed regarding emotional well-being issues. It is an early intervention service and may be able to offer support around issues such as anxiety, self-harm, self-esteem, eating disorders and sleeping problems. CAST typically work with young people and their families over a period of four to six sessions.

Currently, only professionals can refer to CAST. The service undertakes its own assessment based on the Solihull Approach Assessment.

Contact details:
**The Elaine Centre**  
Clifton Close, Strood  
Rochester  
ME2 2HG  
Phone: 01634 337368.

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**Child Adolescent Mental Health Services (CAMHS)**

The Child and Adolescent Mental Health Service (CAMHS) tier 3 is an NHS service for children up to the age of 18 years. The CAMHS multi-disciplinary team provides a specialist mental health service for children and young people, and their families, presenting with severe and enduring mental health difficulties; and requiring medium to longer-term out-patient interventions.

Referrals are received from professionals via the Single Point of Access telephone line. A duty worker is also available to discuss/answer questions over the phone and there is a consultation service to advise other professionals.

Contact details:
**Medway CAMHS Out-Patient Service**  
Canada House  
Barnsole Road  
Gillingham  
ME7 4JL  
Phone: 01634 583000.

Single Point of Access referral  
Phone: 01634 337368.

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**Community nursing team for children and young people with learning disabilities**

The team works in the home, school, clinic and wider community setting, working in partnership with parents, families and multi-agencies. The service aims to assist individual children to meet their optimum physical, emotional and intellectual potential.

Some of the services and interventions offered include:
• post diagnostic counselling;
• safeguarding;
• assessment of the physical, social and emotional needs of the individual;
• managing behaviours associated with learning disability;
• teaching and developing appropriate social skills;
• health education and promotion;
• continence promotion;
• teaching and supporting others to meet the health and medical needs of the child/young person;
• family and carer support;
• immunisation and vaccination;
• hands-on nursing and emergency care within the school environment;
• transition planning.

The team is a mix of learning disability nurses and paediatric nurses. They work with children and young people who have a moderate to severe/profound learning disability from 0-18 years of age. Referrals can be made by parent/carer or professionals.

Contact details:
Residence 13
Perimeter Road
Medway Hospital
Phone: 01634 830000.

**Educational psychology support**

Educational and child psychologists are professionally trained to Masters or Doctorate level and use evidenced-based models of psychology and child development. They work with children, young people, schools, families and other professionals in a wide range of contexts within the community. Educational and child psychologists support the learning, social, emotional and behavioural development and mental health needs of children and young people aged up to 19-years-old. They also have specialist skills in areas such as autism, speech and language and behaviour. All Medway Council educational and child psychologists are registered with the Health and Care Professions Council (HCPC).

Each educational setting has a linked educational and child psychologist, and receives a core allocation of time without charge. Settings can purchase additional time to supplement this, enabling support to be developed in line with the priorities at the school/community and improve preventative work and the targeting of support arrangements. Educational and child psychologists attend In School Review (ISR) meetings in their schools. These are consultation meetings held in each school every other term to discuss children causing concern. Intervention strategies and various ways of understanding the child’s difficulties can be discussed at the ISR. Where appropriate, individual work with a child (with parental agreement), staff training, systematic interventions, group work or teacher consultations can be negotiated through the ISR.

Contact details:
Medway Educational Child and Community Psychology Service
Gun Wharf
Dock Road
Chatham
ME4 4TR
Phone: 01634 335647/334138.
The Individual Children’s Support Service (ICSS)

The Individual Children’s Support Service supports pre-school children who have complex additional needs. This service covers the area of Medway and comprises of three distinct services: The Portage Home Visiting Service; The Portage Sensory Service; The Advisory Teacher Service.

The Portage Home Visiting Service is a home teaching scheme for pre-school children, living in the Medway area, who show a significant delay in more than one area of development. This may be a baby who has identified needs at birth or a toddler who is for some reason progressing more slowly than other children of their age.

The Portage Sensory Service is unique to Medway Portage Service and comprises of the specialist Portage Baby Massage and Baby Yoga Groups, the more formal Portage Sensory Development Service and the Portage Sensory Outreach Service. These interventions are for pre-school children who have identified needs. This may be a baby who has identified needs at birth (in the case of baby massage/yoga) or a toddler/pre-school child who is for some reason finding it significantly more difficult to process sensory information than other children of their age.

The Advisory Teacher Service supports educational planning for individual children. Each Advisory Teacher has a caseload of children.

Inclusion Team support

Medway Inclusion Team offers advice and guidance to schools and parents/carers regarding pupils who are at risk or have been excluded from school. Members of the team are able to work with pupils on a 1:1 basis to prevent exclusion. The team also organises and supports pupils on a Managed Transfer to prevent exclusion and offers advice to schools regarding alternative educational provision. The team is also responsible for children that have been withdrawn by a parent/carer to be educated at home. The team is able to offer advice and guidance to parents, schools and other agencies regarding home education issues and exclusion from school.

Contact details:
Inclusion Team
Level 4, Medway Council
Gun Wharf
Dock Road
Chatham
ME4 4TR
Phone: 01634 332572.
Integrated Prevention Service (IPS)

The Integrated Prevention Service offers targeted and individual support for young people showing risks through their behaviour at home, in school or in the community, and works with partners to ensure young people’s and their families’ needs are met. The team has specialisms in youth offending, parenting and family conflict.

IPS works with families who do not meet the threshold for Children’s Social Care or families that need continued support as a social care case prepares for closure.

The service is for any family with a young person under 19-years-old and offers a bespoke programme for the family, based on the family’s individual needs. Programmes include: Self-Esteem, Social Competence, Anger Management, Crime and Anti-Social Behaviour Awareness, Victim Empathy, Personal Safety, Fire Awareness, Healthy Living and Bullying.

Contact details:
Integrated Prevention Service
67 Balfour Road
ME4 6QX
Phone: 01634 336272.

Medway Youth Trust (MYT)

Medway Youth Trust delivers the Connexions Service in Medway on behalf of Medway Council. It offers free, impartial and confidential advice, guidance and support to all 13-19-year-olds; and for those up to the age of 25 with learning difficulties or disabilities. MYT can help young people with careers, work, learning, money, health, relationships, housing, their rights, free time and travel. Personal advisers can be found in every academy and secondary school in Medway and in town centre Connexions Access Points.

Connexions personal advisers are specially trained to help young people, listen, talk things through and offer advice. They can also arrange for more specialist help if required. They offer free help and support to find out about courses, talk about career options, volunteering or job/training opportunities. Connexions personal advisers can also talk in confidence about health, relationship, drugs, housing and benefits issues.

Contact details:
Central Office
205 – 217 New Road
Chatham
ME4 4QA
Phone: 01634 334343.
Email: enquiries@mytconnexion.org.uk
Onside/Silverbank Outreach Service

Onside provides a range of support services for young people aged between 11 – 16 years who are eligible to attend school in the Medway area.

Onside therapists can offer support with:
• Family relationships/breakdowns.
• Abuse: emotional, physical or sexual.
• Inability to control anger.
• Illness or death of family member or friends.
• Concerns about sex or sexual relationships.
• Being bullied or the victim of crime.
• Feeling depressed, suicidal or self-harming.
• Worries related to studying or exams.
• Drugs or alcohol issues – and anything else that might be troubling young people.

Onside can offer:
• Art Therapy.
• Counselling/Psychotherapy.
• Cognitive Behavioural Therapy (CBT).
• Creative Arts Therapy.
• Play Therapy.
• Reflexology.
• Therapeutic Gardening.

Contact details:
Onside
The Elms
Silverbank
Churchill Avenue
Chatham
ME5 0LB
Phone: 01634 338802.

Parklands Resource Centre

The Disabled Children’s Team is based in a purpose-built resource centre. It offers a range of group work services to parents/carers of disabled children. Details can be obtained by contacting the centre directly. The centre also carries out individual interventions with children and families where social work assistance is required.

Contact details:
Parklands Resource Centre
Oxford Road
Gillingham, Kent
ME7 4BY
Phone: 01634 338500/338502.
Email: parklandscentre@medway.gov.uk
Therapy support

(Speech and language therapists, occupational therapists, dietician and physiotherapists)

Key therapy services are available for any child experiencing difficulties related to having autism and/or sensory processing problems. Referral into any therapy service will require the school to have undertaken and have evidenced preparatory work.

Pre-referral requirements should include:
• Language for learning.
• BEAM/FIZZY (early years and primary age).
• Hopscotch – *A Practical Guide for staff in all schools to develop essential skills for learning*.

There must be three difficulties that affect the child’s ability to function in everyday life, such as writing, dressing and toileting, before making a referral to the Physical Therapy Team.

If therapy programmes or strategies are provided, there is a commitment from the school to follow these programmes.

If small equipment is recommended to assist in a child’s learning, the school would be required to fund this.

All therapy services will include training to schools as part of their core services and will offer a rolling programme and bespoke training as needed.

Contact details:

**Children’s Therapy Team**

**Rochester Healthy Living Centre**

**Delce Road**

**ME1 2EL**

Phone: 01634 334280.