

Autism

The Cambridgeshire **Local Offer** for Autism:

A working guide to Local Authority, Health, schools and settings and voluntary sector provision in Cambridgeshire

Latest amendments March 2016

A working document for parents/carers and professionals

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Autism Provision in Cambridgeshire

What is the Autism Local Offer?

Provision for autism in Cambridgeshire is described in the Autism Local Offer. It is being developed with support from parents and carers of children with autism, young people and adults with autism and professionals working in autism. We are committed to providing easy access to information relating to autism for parents, carers and professionals who may not be specialists in this field. This includes how we identify, refer, diagnose, support and provide for children and young people with autism in Cambridgeshire.

The Autism Local Offer is part of the wider Cambridgeshire Local Offer which covers information on provision for Special Educational Needs (SEN) and Disability. All Local Authorities are required to produce their Local Offer. A Local Offer has two main purposes:

- To provide clear, comprehensive, accessible and up-to-date information about the available provision and how to access it; and
- To make provision more responsive to local needs and aspirations by directly involving disabled children and those with SEN and their parents and disabled young people and those with SEN and service providers in its development and review.

What is the Autism Pathway?

The Autism Pathway describes the route a child or young person with possible autism and their family can expect to follow from when concerns are first noticed (at whatever age these become apparent 0-25 years), and covers assessment, diagnosis, support and transition into adulthood. It includes provision from services the local authority, health, schools and other educational settings and the voluntary and community sector. It shows how professionals should work together with the child or young person and their family at the centre of planning and decision making. We have produced a diagram to show an overview of the Autism Pathway.

If you have any recommendations for further improvements to this resource we would be grateful if you could contact teresa.grady@cambridgeshire.gov.uk

The Cambridgeshire Autism Pathway Overview

First concerns and support

If parents/carers of a child or a young person (0-25 years) are concerned about communication and language, social understanding or behaviour, the professionals who they are in contact with in their local community such as their health visitor, GP, children's centre workers, class teacher or college learning support staff can offer help.

They can work with the child and their family or young person to identify difficulties, plan support and review the outcomes. They can signpost to other sources of support and information.

Are the needs being met?

The young person or child, and their family continue to plan and review outcomes together with professionals.

Yes

No

Assessment and diagnosis

- One of the local professionals involved with the child or young person and their family starts the process for an assessment using a **Common Assessment Framework (CAF)** - or sometimes a letter of referral may go direct to a paediatrician.
- Information about the child or young person and family's needs is gathered.
- The child and family/ young person are included fully in the process.

Is there sufficient information to decide which professionals need to be involved in the assessment?

No

The referrer gathers more information

Yes

- Professionals are identified to explore fully the needs of the child or young person and family. They work with the parents/carers and child or young person to create a tailored plan.
- Professionals who are specialists in autism are included in the team and undertake assessments that contribute to a possible diagnosis.
- Other conditions that sometimes exist alongside autism (co-existing) are also explored.

Is a diagnosis of autism made?

Yes

Autism is diagnosed

No

Diagnosis is uncertain. Further assessments may be carried out

No

Additional needs recognised but autism is not diagnosed

Continued support

The professionals continue to work alongside the child or young person and their family.

Further strategies and support around autism are put in place as appropriate.

Any co-existing needs are also addressed.

The professionals continue to work alongside the child or young person and their family

They plan and review together to address additional or complex needs

They may explore other assessments and pathways where appropriate.

- The team of professionals support the child or young person through transitions and identify ongoing and new needs.
- They ensure that follow up assessments with the child or young person and family are organised where necessary.
- Adult Services in Health and Adult Transition Services become involved as the young person approaches 16 years.

What is the Cambridgeshire Autism Strategy Group?

The Cambridgeshire Autism Strategy Group is a multi-agency group with representation from:

- Child Health Services
- Child Mental Health Services
- Children, Family and Adult Services, Cambridge County Council
- Social Care
- Parent and carer service users
- The voluntary sector

The aims of this group include to:

- Support the development of the Local Offer for provision for autism in Cambridgeshire
- Improve early recognition of autism by raising awareness of the signs and symptoms of autism through multi-agency training
- Ensure relevant professionals are aware of the local Autism Pathway and how to access diagnostic services
- Support the smooth transition to Adult Services for young people
- Ensure data collection and audit of the pathway take place
- Inform future commissioning of provision for children and young people with autism
- Engage stakeholders and service users views about service development and auditing current provision

Contact details for the Autism Strategy Group

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What is Autism?

Autism is a lifelong developmental disability that affects how a person communicates with, and relates to, other people and the world around them. It is a spectrum condition, which means that, while all people with autism share certain areas of difficulty, their condition will affect them in different ways. There are two models that are frequently used to describe autism. The first identifies three 'areas' of difference for children and young people with autism. It is referred to as the 'Triad of Impairment'. The three areas are:

- Language and communication
- Social and emotional understanding
- Flexibility of thought and behaviour

The model that we have used for the Cambridgeshire Autism Pathway includes a fourth area, sensory factors (see next page).

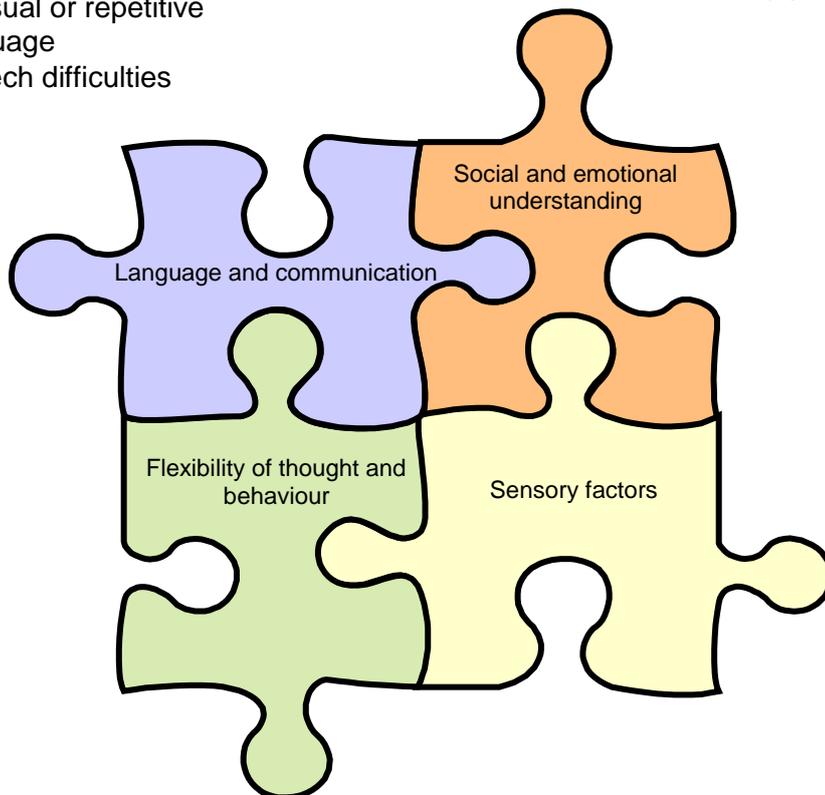
Areas that may be different for children and young people with autism

Language and communication

- Social use of language
- Initiating or sustaining conversation
- Use of facial expression and body language
- Literal interpretations
- Understanding jokes and sarcasm
- Playing make believe or pretend
- Unusual or repetitive language
- Speech difficulties

Social and emotional understanding

- Awareness of others' feelings
- Empathy
- Absent or unusual eye-contact, gestures and expressions
- Difficulties with friendships
- Difficulty working with others
- Spontaneously sharing interest and enjoyment with others
- If distressed may not seek comfort



Flexibility of thought and behaviour

- Disliking change
- Difficulty with problem solving
- Liking rigid routines
- Obsession with particular objects
- Restricted range of interests
- Unusual or repetitive gestures or actions

Sensory factors

- Sensory processing difficulties associated with seeing, hearing, touching tasting and smelling
- Heightened or reduced sensitivity to sounds, tastes, smells, visual and other sensory stimuli
- Difficulties sensing where their body is and maintaining balance

It is important that individual needs are acknowledged and adjustments made to ensure an appropriate environment for example in the home, nursery, school or work environment.

In this resource we use both the terms autism and autism spectrum to refer to this range. Professionals often use the term Autistic Spectrum Disorder (ASD) when referring to a clinical diagnosis of autism, though some parents and professionals prefer to use the phrase Autistic Spectrum Condition (ASC). The National Autistic Society (NAS) advocates using the phrase 'person with autism' or 'person on the autistic spectrum'. Asperger syndrome is a form of autism.

Other difficulties that may accompany autism

Some children and young people with autism may also have other difficulties in the following areas:

- learning ability (difficulty with tasks involving thinking, logical reasoning and problem solving)
- physical difficulties (particularly with coordination)
- mental health problems e.g. anxiety and low mood

Individuality

Each child or young person with autism is an individual. They have a variety of needs and strengths. The severity of autism and learning ability of the individual can vary considerably.

Other factors that lead to differences between individuals include:

- degree of sociability - some seek social contact, while others avoid it
- personality
- nature and intensity of any special interests and activities

It is important to get to know the child or young person's strengths and difficulties and not make assumptions. Support needs to be adapted to meet the specific needs of the individual and the family.

Autism is a lifelong condition that has a great impact on children, young people and adults and their family or carers. Diagnosis and assessment can offer an understanding of why a person is different from their peers, can inform support from education, health and social care services and provide a route into support from voluntary organisations and contact with other people and families with similar experiences. All this can improve the lives of people with autism and their families.

First concerns

Parents or professionals may become concerned about a child or young person's communication and language, social and emotional understanding or behaviour at any age. Sometimes concerns may be noticed in the first few years of life. Other children may appear to manage early on but may struggle later when faced with the social demands of secondary school. Similarly, coping with the less structured learning and living environments of college or university may be a tougher challenge than for other students. At whatever age concerns become apparent, there are professionals in the community to whom the parent or young person can turn to for support.

Who can a parent or carer go to in the local area if they are concerned?

Professionals in the local community are experienced in offering help for children and young people who may have autism or related needs. Parents are encouraged to raise their concerns with any of the local professionals they are in contact with, such as their:

- Health visitor
- GP
- Children's Centre worker
- Early Years provider e.g. childminders and playgroup workers
- Teacher or tutor in the child or young person's school, college or university
- Special Educational Needs Co-ordinator (SENCo) in a school, nursery or playgroup
- School nurse

These professionals will listen to the parents concerns and identify needs. They will also let parents know of other forms of support and advice in the local area such as voluntary and community parent support groups.

What support can be expected?

The professional with whom the child and family are in contact (e.g. health visitor, teacher, Special Educational Needs Coordinator (SENCo) or learning support tutor in the child or young person's playgroup, school, college or university) will start to put in place appropriate support as soon as concerns are noted, whether a diagnosis of autism is eventually given or not. They may use checklists to clarify the child or young person's needs and identify the type of support required.

Checklists to help identify difficulties and actions

Professionals use checklists to help them identify any difficulties that a child or young person may have and the actions that need to be taken. The findings from these are used to make sure that the right support is put in place to match the identified needs. Checklists that professionals might use include:

- The Two Year Old Health Check and Record
- The Early Years Foundation Stage Profile
- The Early Years Graduated Response to Special Educational Needs
- Speech and Language Descriptors (school age)
- Social Communication Descriptors (school age)
- The Strengths and Difficulties Questionnaire (SDQ)
- Sensory Audit

First concerns

Prompts for SENCos and support staff in Early Years settings, schools and colleges

If you are concerned about a child or young person's emotional well-being or behaviour (or a parent/carer or young person comes to you with concerns about their child) consider if they may have social communication difficulties and may be autistic:

1. Complete the **Speech and Language Descriptors** and the **Social Communication Descriptors**. Involve parents with this. These will help clarify the concerns and point to the right responses and actions that can be taken to support the child or young person at home and at school.
2. If there are sensory issues that cause the child or young person distress, discuss these with the child or young person and the parents/carers and carry out a **Autism Sensory Audit** of the environment. Make any reasonable adjustments to the environment.
3. Plan, do and review the impact of short term interventions such as 'Talking Partners' or Social Stories.
4. If despite support being in place the child or young person's social communication needs are hindering their ability to enjoy and achieve in school or at home ask parents permission to begin a **Common Assessment Framework (CAF)**.

Assessment and diagnosis

How does the assessment process start?

A professional with whom the child or young person and family are in contact such as the health visitor, GP, school nurse, Children's Centre worker, Early Years setting or school's Special Educational Needs Coordinator (SENCo) or college learning support staff may suggest that further, more specialist advice is needed.

Alternatively a parent, carer or young person may approach one of these professionals and ask for an assessment to be considered.

Sometimes, despite support being put in place, the difficulties continue to be a barrier to the child or young person's development. In these cases the professional who knows the child well will start to bring information together using a Common Assessment Framework (CAF).

What is a Common Assessment Framework (CAF)?

A Common Assessment Framework is a way of gathering information on a child or young person and their family taking into account a variety of contexts e.g. school, home etc. The professionals working with the child and family or the young person build a profile of their needs and implement a personalised plan. If the needs are quite specific, only one or two professionals may need to be involved. If the needs are more complex, a number of agencies may be included. The parents/ carers are encouraged to be actively involved and are treated as equal partners by the professionals on the team. They are led, initially, by the referring professional (lead professional). For information on the Common Assessment process please go to www.cambridgeshire.gov.uk/caf

Early Support (0-5 years)

If the child is younger than 5 years old when a Common Assessment Framework is started, and the level of need is significant and complex, the referring professional will make a referral to Early Support (0-5 years). Early Support is for children who have complex needs which require ongoing specialist support from across education, health and social care. This includes children who have great difficulty communicating, have sensory or physical difficulties and/or complex health needs. All need additional support with much of their daily lives and it is probable that there will be a long term impact on their development and learning.

For more information on Early Support (0-5years) please go to www.cambridgeshire.gov.uk/early-support

Building a team

For a Common Assessment Framework (CAF) professionals are identified to explore fully the needs of the child or young person and the family. Sometimes this may require just one or two professionals working with the child and family e.g. a specialist teacher and the class teacher. In complex cases it may require more professionals to be involved from the early stages e.g. speech and language therapist, occupational therapist, educational psychologist, disability social worker.

Some of the professionals who may become involved through a CAF are:

Community paediatrician	Community educational psychologist
Occupational therapists	Specialist teachers
Speech and language therapist	Locality family workers
Specialist health visitor or nurse	Disability social workers
Home visiting workers	The voluntary sector e.g. the National Autistic Society
Class teachers/Special Educational Needs Co-ordinators (SENCo) in school	Early Years practitioners

Information on the roles of professionals and the level at which they are likely to become involved can be found in the Cambridgeshire Families Information Directory at www.cambridgeshire.gov.uk/families.

The parents/carers and team of professionals identify a 'lead professional' to coordinate their work and all members of the team use a 'key working' approach.

What is a 'key working' approach?

A 'key working' approach requires all members of the team to ensure they:

- identify a clear single point of contact for the family
- listen and respond to the views of the child and family
- ensure the parents and carers have access to the information that they need to make informed choices
- respond to new or emerging needs of the child and family and involve the right professionals at the right time

- eliminate the need for parents and carers to repeat the same information to different professionals
- agree and share meeting times and dates in advance
- work together to build up a 'profile' of the child or young person

The membership of the team may change over time. If the child or family display new, emerging needs this may mean that professionals with different expertise may be required and others can exit. In addition, individual professionals may move or change job. Whenever there is a change in membership of a team, careful consideration will be given to transferring information, and parents/ carers will be informed.

Building a profile of the child

To develop a profile of a child or young person, the professionals, with the child and family, gather the existing information. The parents or carers are invited to share their concerns about their child's development with the professionals and discuss what has and has not worked to date. Whenever possible, this will also be discussed with the child or young person. If the child or young person's needs are found to be significant and complex it may be felt that a diagnostic assessment is needed. This will usually involve the community paediatric team or sometimes the Child and Adolescent Mental Health Service (CAMHS) if there are mental health concerns.

Referrals for a diagnostic assessment

0-5 years

Where the possibility of autism is identified at pre-school age the referrals are made to diagnostic Community Child Health Services, Cambridgeshire Community Service, NHS Trust (CCS).

5-11 years

School-age children up to the age of 11 are also referred to Community Child Health Services, Cambridgeshire Community Services, NHS Trust (CCS).

12-17 years

After the age of 11, when the main presenting needs are mental health (and thresholds are met) the referral route for a diagnosis is through the Child and Adolescent Health Service (CAMHS), Cambridgeshire and Peterborough Foundation Trust (CPFT).

Looked After Children (LAC) and those receiving support from the Youth Offending Service (YOS) who are 12 years old and above and require an assessment for autism can access Child and Adolescent Health Service (CAMHS), Cambridgeshire and Peterborough Foundation Trust (CPFT).

18+ years

Diagnosis for autism post 18 can be made through the Cambridge Branch of the National Autistic Society CLASS (Cambridge Lifespan Asperger Syndrome Service) clinic. For more information please go to www.cambridge-autism.org.uk or if you would prefer to speak to someone please phone 07920 150407.

What happens when a Common Assessment Framework (CAF) is not used and a direct referral is made by a GP?

A GP may make a referral direct to the community paediatrician and not complete a Common Assessment Framework (CAF). Information will be requested from school/pre-school and the other professionals involved before a child is given an appointment. As this can slow things down it is advisable to make a referral through a CAF and to have ensured the following prompts are followed:

AUTISM

Prompts for GPs

When making a referral to a community paediatrician for a child or young person who may be autistic:

1. Invite parents/carers to allow information to be shared between professionals working with their child e.g. nursery, school, health visitor, Children's Centre.
2. Encourage parents to start a file which gathers information in one place which they can share with professionals and avoid having to repeat e.g.
 - Concerns they have noted
 - The child's strengths and successes
 - What helps/makes a difference
 - Copies of development checks or assessments
 - Descriptors (Speech and Language Descriptors and Social Communication Descriptors) that have been carried out by early years settings or schools
 - Anything else they would like professionals to be aware of

The community paediatric assessment

When a request is made for a community paediatric assessment the child and parent will be seen at a clinic within 13 weeks of the requested information being received.

Parents and carers

Your views and experiences with your child are central to the diagnostic assessment. The child's developmental history will be discussed with you.

The paediatric assessment will build on previous information from you and professionals with whom you and your child have been in contact. You may like to keep a Family Information File from which you can share information with others as you feel appropriate.

The community paediatrician will, however, ask to hear the developmental history from you first hand as it can be very helpful to hear it in your own words.

Before seeing a child and parent in clinic, the community paediatrician will:

- have information available from the professional who made the referral (e.g. CAF or referral letter)
- request additional information from the child's school or setting and other professionals who are involved with the child if it is not already available. This may include records of personalised plans showing the support implemented to date and progress made. It may also include social communication descriptors and observations of the child in their school, setting or home
- request additional information from the parent (e.g. questionnaires)

Parents and carers

Diagnosis of autism is a clinical opinion (usually by a community paediatrician) based on careful consideration of all gathered information from parents/carers and the young person, observation of the child or young person and a range of other sources (see below).

The assessment will include some of the following:

- a developmental history taken during a clinic appointment (information from the parent about their child's development)
- observation of the child in clinic
- observations of the child in other settings (e.g. home, school, preschool)
- Occasionally, the use of recognised clinical assessment tools such as the Autism Diagnostic Observation Schedule (ADOS) to gather information about signs and symptoms of autism in a structured way. These are tools that can help in the assessment and should not be used to make or rule out a diagnosis of autism on their own
- reference to internationally recognised diagnostic criteria such as ICD10 and DSM V

The assessment may take place at any point in the child or young person's life. The assessment happens over a period of time which can vary in length depending on the complexity of the particular needs of the child or young person. This is to ensure that there is a comprehensive picture of their strengths and difficulties. The assessment is likely to have taken into account all of these areas:

- learning ability/academic skills
- speech, language and communication
- hearing
- fine and gross motor skills
- adaptive behaviour (including self-help skills)
- mental and emotional health (including self-esteem)
- physical health and nutrition
- sensory sensitivities
- behaviour likely to affect day-to-day functioning and social participation
- social skills

What happens after the assessment?

It can be an anxious time for a family as they await the outcome of the assessment. The outcome, should be discussed sensitively, without delay and in person with parents and, if appropriate, with the child or young person. The reasons for the assessment decision will be explained clearly to parents whether the outcome is a diagnosis of autism or not. A clear, written account of the assessment will also be made available to the parents.

If the assessment can not be completed and shared with parents in a timely way, parents will be given an update on progress and an explanation of why it is necessary for the assessment to take longer. The next steps will be made clear.

Parents will be asked to give their permission for the result of the assessment to be shared with key professionals involved in the child's care, including those in education and social care.

The assessment outcome could be:

- a diagnosis of Autistic Spectrum Disorder (ASD) - or sometimes this is referred to as Autistic Spectrum Condition (ASC)
- a diagnosis of ASD with another condition
- an uncertain diagnosis. This will be followed with a period of 'watchful waiting' with planned reviews
- ASD not diagnosed, but difficulties identified along a continuum of social communication difficulties
- ASD diagnosis not made. Further approaches to identifying and meeting the child or young person's additional needs will be considered

What happens when a child is diagnosed with Autistic Spectrum Disorder (ASD)?

Hearing for the first time that a child has been diagnosed with autism can be a difficult and challenging time for many parents. When a child or young person is diagnosed with ASD one of the professionals involved in the assessment will offer another appointment shortly after the end of the assessment so that they can talk about the diagnosis and ask any questions they may have. Support for the child and family will be tailored to their specific level and type of needs. If not already in place it may include:

- Signposting for emotional and practical support for the parents and siblings as well as the child. For example through the Parent Partnership Service providing Cambridgeshire's SEND Information, Advice and Support Service (SENDIASS), Cambridgeshire National Autistic Society, Pinpoint, and other local parent groups in the area
- Home visits from the Social Communication Home Visiting Team (SCoT) to support the family of pre-school age children
- Involvement of the local authority Early Years Support for Learning Team who provide support to children in early years settings such as playgroups and childminders and the home
- Referral to Early Support (0-5 years)
- Advice and support to schools and other educational settings (or sometimes in the home) by the Educational Psychology Service or Specialist Teaching Team
- An offer of a parent/carer training programme in autism such as the Cambridgeshire Social Communication Interaction and Learning Skills (SCILS) programme, Early Bird or Early Bird Plus
- A visit by one of the professionals to discuss the diagnosis with early years, primary, secondary school or college staff
- Further assessment and support as appropriate for the individual child
- Ongoing approach of assessing, planning, doing and reviewing as appropriate for the individual child or young person

Parents and carers

To find out more about each of the above please see the section on '**Further Support**' or visit the SEND Local Offer at www.cambridgeshire.gov.uk/send

What happens when diagnosis is uncertain?

Sometimes there can be uncertainties when diagnosing autism. The professionals will continue to work alongside the child or young person and their family. They will plan and review together to meet any additional needs. The professionals who are specialist in autism may suggest a period of 'watchful waiting' and offer to see the child again. For other reasons it may be difficult to confirm a diagnosis of autism, particularly when:

- children younger than 24 months
- children or young people with a developmental age of less than 18 months
- children or young people for whom there is a lack of available information about their early life (for example some looked-after or adopted children)
- children or young people with a complex coexisting mental health disorder, sensory impairment or a motor disorder

Further assessment for co-existing needs

If there are significant co-existing needs, other relevant professionals will be called upon to offer advice if they have not already been involved e.g. for:

- visually and hearing impaired children and young people a referral to the Sensory Impairment Service (Cambridgeshire County Council)
- learning needs a referral to SEND Services (Cambridgeshire County Council)
- behavioural needs a referral to Locality Teams and SEND services (Cambridgeshire County Council)
- epilepsy a referral to a neurologist, Cambridgeshire Community Services (CCS)
- sensory issues a referral to an occupational therapist, Cambridgeshire Community Services (CCS)
- mental health needs including signs of depression, anxiety, Attention Deficit, Hyperactivity Disorder (ADHD), attachment disorder, Obsessive Compulsive Disorder (OCD) a referral to The Child and Adolescent Mental Health Service (CAMHS), Cambridgeshire and Peterborough Foundation Trust (CPFT) at www.cpft.nhs.uk

Information on these services can be found in the Families Information Directory at www.cambridgeshire.gov.uk/families

Referrals to Child and Adolescent Mental Health Service (CAMHS)

For children and young people with signs of significant mental health needs a referral to Child and Adolescent Mental Health Service (CAMHS) can be made by one of the professionals currently working with the child and family through the Single Point of Access (SPA). The information from an existing Common Assessment Framework (CAF) is passed on and, if available, any other clinical assessments. This ensures that the all relevant history is received and that other professionals and services who have been involved previously are identified. CAMHS offer assessments for the mental health needs of the child or young person and, where appropriate, provide interventions which may include specific medication for certain difficulties. This may include an assessment for autism in children that are already being seen for their mental health needs. For more information on CAMHS and the Single Point of Access (SPA) pathway please go to www.cpft.nhs.uk.

What happens when ASD is not diagnosed but there are difficulties with social communication and interaction?

Although a child or young person may not receive a diagnosis of ASD, they may still have a range of needs relating to communication, social and emotional understanding and behaviour. Sometimes, not having a clear diagnosis can be equally difficult for a parent to come to terms with. Those professionals most in contact with the child and family will continue with a cycle of 'assess, plan, do and review' in line with the **SEND Code of Practice (2014)**. For more information please visit www.gov.uk/government/publications/send-code-of-practice-0-to-25. The child and family are at the centre of this process. If the school, college, nursery, playgroup or children's centre setting continues to have concerns about the child or young person they can request a consultation with the community educational psychologist, early years area Special Educational Needs Coordinator (SENCo), or specialist teaching team. For example, when there has been an unexplained change in the child or young person's behaviour. Although the CAF may be closed after an assessment it can be re-opened again to address these new or changing needs.

What happens when autism is not diagnosed but there are other additional needs?

If the child or young person does not have autism they may still have additional needs. Those professionals most in contact with the child and family will continue with a cycle of 'assess, plan, do and review' in line with the **SEND Code of Practice (2014)**. For more information please visit www.gov.uk/government/publications/send-code-of-practice-0-to-25. The child and family are at the centre of this process. They may explore other assessments and interventions where appropriate. This may involve new professionals from other specialist areas.

Parents and carers

Second opinions

The Parent Partnership Service providing Cambridgeshire's Special Educational Needs and Disability Information, Advice and Support Service (SENDIASS) and the Patient Advice and Liaison Service (PALS) can advise parents/carers what to do if they are unhappy with the outcome of the assessment for autism.

Who to contact	When	Contact Details
Patient Advice and Liaison Service (PALS)	When parents and carers are concerned about a service/ decision from the Health Service	www.nhs.uk
SENDIASS	When parents, carers and young people require general advice and signposting about services/decisions	www.cambridgeshire.gov.uk/pps Tel: 01223 699214 Email: pps@cambridgeshire.gov.uk

Autism Pathway

Educational provision

Mainstream early years settings, schools and colleges

The majority of children with special educational needs, including those with autism, will have their needs appropriately met in their local mainstream early years setting, school or college. All schools and settings are expected to have a good understanding of the child's special educational needs, a positive attitude, and an appropriate level of expertise. Each must publish information on their website of their offer for children or young people with special educational needs.

Best practice guidance and accreditation

It is reasonable for parents/carers and young people with autism to expect schools and settings to be able to demonstrate how they meet or are working towards meeting best practice standards. An example of best practice guidance is that provided by the **Autism Educational Trust (AET) National Autism Standards for Schools and Educational Settings**. These standards enable educational settings to evaluate their practice in addressing the needs of pupils on the autism spectrum. There are 4 areas identified covering 43 standards in total. The areas are:

- The individual pupil (how to understand and address their strengths and needs)
- Building relationships (with staff; parents/carers and peers)
- Curriculum and learning (adjustments to the way in which activities are presented, selection of priorities and modifications to the timetable)
- Enabling environments (how to create good classroom and school environments for pupils with autism).

Additionally, some special schools and centres may seek to gain **National Autism Accreditation**. This is an externally moderated two year programme. The accreditation process provides a unified standard of excellence and a systematic framework for continuous self-examination and development of provision for young people with autism.

For further information contact the Autism Education Trust (AET) at:

www.autismeducationtrust.org.uk/

Below are some of the resources available to support schools and settings:

Guidance and tools for schools and settings	How to find
Autism Education Trust (AET) National Autism Standards for Schools and Educational Settings	www.autismeducationtrust.org.uk
Autism Education Trust (AET) Professional Competency Framework	www.autismeducationtrust.org.uk
Speech, Language and Communication Inclusion Development Programme (IDP) Early Years	http://webarchive.nationalarchives.gov.uk
Autism Inclusion Development Programme (IDP) Early Years	http://webarchive.nationalarchives.gov.uk
Development Matters 2012. Guidance for revised Early Years Foundation Stage (EYFS)	www.foundationyears.org.uk
Early Support: Information About Autistic Spectrum Disorders	http://councilfordisabledchildren.org.uk/what-we-do/networks-campaigning/early-support/resources/information-resources
Speech, Language and Communication Inclusion Development Programme (IDP) Primary and Secondary	http://webarchive.nationalarchives.gov.uk
Autism Inclusion Development Programme (IDP) Primary and Secondary	http://webarchive.nationalarchives.gov.uk
Think Autism	www.gov.uk/government/publications/think-autism-an-update-to-the-government-adult-autism-strategy

How do schools identify difficulties and put support in place?

Autism is not always diagnosed before a child starts school. Sometimes it is the parents/carers who first approach the school or setting with concerns about their child's development. They may feel that their child does not respond in the same way as older siblings or as peers their own age. Sometimes it will be the school who first notices that the child or young person is having difficulties. In both cases there should be early discussion between the school and parents/carers and child or young person to explore the needs and identify the support required. In the case of a young person, they may express concern directly to a member of staff.

Listening to early concerns.

A discussion around early concerns needs good listening based around conversations that are structured to:

- explore concerns
- identify aspirations
- plan responses
- review progress

With the help of parents/carers and the child or young person, the school will gather information, carry out observations and complete checklists. These will help identify the specific needs of the individual child. Examples of checklists include:

- The Speech and Language Descriptors
- The Social Communication Descriptors
- The Strengths and Difficulties Questionnaire (SDQ)
- The Autism Sensory Audit

The findings from the checklists indicate the responses and actions that need to be put in place to support the child or young person at school and at home.

Below are some of the actions that schools and settings commonly take to support children with communication and interaction difficulties, including autism.

Action	In place
Explain any changes in routines or systems in advance	
Use visual timetables to show what will be happening during the day/week	
Set explicit and clear expectations. Use unambiguous language	
Always tell the pupil what to do, not what not to do.	
In lessons, set tasks with clear goals and provide step-by-step instructions with visual clues on worksheets, posters, whiteboard etc	
Provide frameworks (scaffolds) for writing e.g. step-by-step templates, mind maps, bubble diagrams, cloze procedure etc.	
Have clear plans for unstructured times of the day e.g. breaktime, lunchtime, before and after school, movement between lessons.	
Use visual aids to support a child to gauge and communicate how they are feeling e.g. emotional barometers, traffic light signs etc.	
Provide access to temporary personal working spaces that offer a degree of separation e.g. by screens, booths in the classroom. These can be used for specific time-limited tasks or for positive time-out.	
Expect to teach the child social skills e.g. what to do when praised, how to ask for help, enter a room and greet people, sustain a conversation, make and sustain friendships with their peers, and how to regulate their own behaviour.	
Allow ample time for learning social skills through rehearsal and practice	
Use simple step-by-step visual illustrations to describe and rehearse an event or social interaction. Comic strips, sequential photographs or pictures etc. can be created for a wide range of situations.	
Use immediate and individualised reward systems based on the pupils likes and interests e.g. collecting stickers, extra time on the computer	

Many schools will already have systems in place to share information on all pupils e.g. learning profiles, communication passports. Staff, parents/carers and the young person can create these together to give key information on strengths, needs, likes and dislikes.

Does my child have Special Educational Needs?

If a child or young person requires support that is additional or different to the range of support offered in the classroom (universal support), they may be identified as having Special Educational Needs and, with parental agreement, placed on **SEND Support**. A person-centred approach will be adopted to meet their needs. Parents/carers and the child or young person will be invited to actively participate in identifying aspirations. A regular cycle of 'Assess, Plan, Do, Review' will be put in place by the school/setting in collaboration with parents/carers and the child or young person to support them in meeting their short and long term goals.

Further support (targeted support) will be arranged by the school/setting to address specific areas of need as appropriate. This will sometimes take the form of time-limited interventions. Interventions will have clear goals, objectives and review arrangements. The school will describe their use of interventions in their **Information Report** on their website. Schools are likely to use a Provision Map to set out their offer of interventions.

There are a range of resources to support school-based interventions with children and young people with autism. For information on evidence based interventions please see the **SEND Guidance 0 – 25** available from:

http://www.cambridgeshire.gov.uk/info/20136/special_educational_needs_and_disabilities_local_offer/531/about_special_needs_and_disabilities/2

Can the school get advice and support?

Your school will use its best endeavours – that means to do its very best - to give your child (and family) the support they need. This could include working in partnership with you and any specialists who are supporting you and the family (such as the community educational psychologist, speech and language therapist, early years or specialist teaching teams). It may also involve links with locality teams, social care and health services, where appropriate. A school or setting can request a consultation from the local authority SEND Services (specialist teaching teams, early years support for learning teams or community educational psychologists). These teams offer advice on providing for children and young people with special educational needs, including autism. The Families Information Directory holds details of support services visit www.cambridgeshire.gov.uk/families

Will my child need an Education, Health and Care Plan?

Some children with the highest level of need will require an Education, Health and Care Needs Assessment which may lead to an Education Health and Care Plan. For more information on the thresholds for this level and the processes involved, please go to

www.cambridgeshire.gov.uk/ehcplan . If you would like help to access this information, please contact the Statutory Assessment and Resources Team (START) on 01480 372600 or the Parent Partnership Service providing Cambridgeshire's SEND Information, Advice and Support Service on 01223 699214.

Will my child need to attend a special school?

Most children and young people with autism, including those with an EHC Plan, will benefit from and have their needs fully met at their local mainstream school. All schools are expected to ensure they offer an inclusive environment that is adapted to meet needs. Some children and young people, however, have an exceptionally severe level of autism. They may also have other challenging and complex needs. These children and young people may require alternative provision to mainstream education, either part-time or full-time, short term or long term. Cambridgeshire local authority has a small number of special schools and specialist centres across the county. To attend a special school or centre a child will have a Statement of Educational Need or an Education, Health and Care Plan (from September 2014). Decisions for placement are made by a local authority panel based on level and complexity of need.

Information from parents, young people and all professionals working with and supporting the child is taken into consideration when a placement is being considered and they will be included in decision making. The Parent Partnership Service providing Cambridgeshire's SENDIASS or other voluntary agencies can support parents through the process.

Information on special schools and specialist centres across Cambridgeshire is available in the Families Information Directory at www.cambridgeshire.gov.uk/families

What training is available in autism for schools and settings?

Autism training for schools is available locally through the Autism Education Trust.

Cambridgeshire Local Authority is the training hub for the Autism Educational Trust Eastern Region. This training has a very good evidence base and has been shown to equip school staff with the knowledge and skills needed to support children and young people with autism. There are three levels of training:

Level 1

Level 1 is a 90 minute basic awareness training delivered by a specialist teacher / community educational psychologist and parent. This level is suitable for teaching and non-teaching staff who need an understanding of autism in their role (including office staff, governors, caretakers, drivers and escorts).

Level 2

Level 2 is a one day training course for all staff who directly support a child with autism, delivered by specialists in the field, at venues across the region. The course looks more specifically at classroom based strategies and is suitable for teaching assistants, lunchtime staff and teachers.

Level 3

Level 3 is a two day training course for SENCOs, other managers involved in supporting children with autism and those who may wish to pursue a training role. As with Level 2, this training is delivered by specialists in the field at venues across the region. Entry to Level 3 is via Level 2 or equivalent.

For more information please contact AutismTrainingAA3@cambridgeshire.gov.uk

Further support

Parents can expect appropriate support to be available for children and young people with communication, social and behavioural needs including autism from the first early concerns through assessment and afterwards. The level and type of support will depend on the individual needs of the child and family and this may change over time. Information on provision for children with special educational needs and/or disability is published in the Cambridgeshire Family Information Directory which can be found at www.cambridgeshire.gov.uk/families.

Some examples of provision from the local authority, health, social care and voluntary agencies particularly relevant to children on the autistic spectrum and their families are listed below. If you have any queries about the support available please do not hesitate to contact the provider or phone the Parent Partnership Service providing Cambridgeshire's SENDIASS on 01223 699214.

Children's Centres

If parents/carers are worried about their child and think that they are not developing in the same way as children of a similar age, they can speak to a health visitor or family worker at a local Children's Centre. Further information, addresses and contact details can be found at www.cambridgeshirechildrenscentres.org.uk/

Children's Centres may offer the following:

- Health services – midwives and health visitors
- Family support services – trained staff who can support, advise and provide information
- Family events and activities
- Early years education/child care and advice about costs
- Employment, training and benefits advice
- Information for parents/carers and families
- 'Drop-in' sessions with professionals such as a Speech and Language Therapist or an Occupational Therapist. These sessions offer the opportunity to discuss any concerns about a child's social, communication and interaction development. Parents and carers do not need a referral to attend one of these sessions. Information on venues and contact details is available from local Children's Centres or on www.cambridgeshirechildrenscentres.org.uk

Early Support (0-5 years)

Early Support (0-5 years) is a family-centred approach for children who have complex needs and who are likely to need long-term specialist support from across education, health and social care. Information on Early Support in Cambridgeshire can be found at www.cambridgeshire.gov.uk/early-support.

Home visiting

There are a range of ways that families can access support in the home for their child and their family. This includes family workers from the Locality Teams and home visitors such as Portage and the Social Communication Team (SCoT). The latter two are part of the Early Support response for children with significant and life long needs.

Title	Who is eligible	What is offered
Family workers	Families of a child (0-19) with special educational needs and/or disabilities who require emotional and practical support for caring for their family.	Tailored support for the family linked to a plan.
Early Years home visitors for social communication (SCoT)	Families of a child 0-5 years with significant and life-long speech and communication needs.	A home visitor will work jointly with parents, primarily in the home for up to 5 hours per week spread over 2 visits. A structured programme is offered to support learning and development.
Early Years home visitors (including Portage)	Families of a child 0-5 years with significant and life-long complex needs, including those with autism.	A home visitor will work jointly with parents, primarily in the home on a fortnightly or monthly basis on targeted areas.

More information on family workers and the home visitors including relevant contact details can be found in the Families Information Directory at: www.cambridgeshire.gov.uk/families

Parent and carer programmes

There are a range of parent and carer courses and activities currently being offered in Cambridgeshire. For information on availability in your area, and costs where applicable, please go to the www.cambridgeshire.gov.uk/parenting or contact the Families and Childcare Information helpline on 0345 045 1360.

Examples that are available at different times and in different parts of the county include:

- **Stepping Stones:** A parenting programme to promote positive relationships between parents and their children. It provides appropriate and effective strategies for dealing with a range of childhood behaviour problems and common development issues
- **Social Communication Interaction and Learning Skills (SCILS):** A parenting programme for parents of a preschool child who has significant and complex social communication difficulties or a diagnosis of autism
- **Cambridgeshire National Autistic Society parent courses:** A series of one-day family support seminars for families of children and young people with autism, including Aspergers Syndrome. They provide information, advice and support to families. Details can be found at www.cambridge-autism.org.uk/
- **Early Bird/ Early Bird Plus:** These are courses for parents and carers whose child has received a diagnosis of autism spectrum disorder and is pre-school age (Early Bird) or 4-8 years (Early Bird Plus). The programme aims to support parents and carers in the period between diagnosis and school placement, empowering and helping parents to facilitate their child's social communication and behaviour in the home

Short Breaks for disabled children

Short breaks form part of a range of services, which support disabled children aged 0-19 and their families to give:

- disabled children and young people enjoyable experiences away from their primary carers, contributing to their personal and social development and reducing social isolation
- parents and families a necessary and valuable break from caring responsibilities
- families with disabled children support to enable them to do more things together as a family

For more information on short breaks please see the Cambridgeshire Short Break Duty Statement on www.cambridgeshire.gov.uk/short-breaks or contact the Disabled Children's Early Help team on 01480 379 800 or email short.breaks@cambridgeshire.gov.uk

Activities and groups for children and young people

The following websites and groups can provide information on activities, support and events across Cambridgeshire for all children and young people including those with additional needs or disabilities including autism:

Who/ What	Contact details
Special needs Community Information Point (SCIP)	 www.cambridgeshire.gov.uk/scip Email: scip@cambridgeshire.gov.uk  : 01480 379827
NAS National Autistic Society	 www.cambridge-autism.org.uk Email: nascambridge@nas.org.uk  : 07920 150407
Pinpoint	 www.pinpoint-cambs.org.uk Email: information@pinpoint-cambs.org.uk  : 01480 499043
Cambridgeshire.net	 www.cambridgeshire.net

Benefits and other financial help

Parents and carers and adults with autism may be entitled to benefits to help with the extra costs as a result of autism. These include Disability Living Allowance (DLA), Personal Independence Payment (PIP) (for over 16s), Carer's Allowance and Child Tax Credit.

Gov.uk (www.gov.uk) contains up-to-date information about all welfare benefits.

Contact a Family offer benefits advice and information on conditions and support groups - www.cafamily.org.uk.

The National Autistic Society runs specialist welfare rights service. Parents can contact it for personal advice and support at welfarerights@nas.org.uk or by calling 0800 8000 4104.

Papworth Trust provide free advice and information on benefits, grants and applications for families with disabled children and adults with disabilities in Cambridgeshire. Details can be found at www.papworth.org.uk or by calling 0800 952 5000.

Independent living and housing

Supported housing is managed by District Councils; support provided varies between schemes.

Who	What	Contact details
Cambridgeshire County Council	General information on housing and links to district councils	http://www.cambridgeshire.gov.uk/send
Cambridgeshire County Council - Adult Social Care	General information on housing and accommodation for adults with autism	www.cambridgeshire.gov.uk/careandsupport

Living near Local Authority borders

Families living near Local Authority borders may find that some services will be provided by one Local Authority and other services by another. The Cambridgeshire Local Offer at www.cambridgeshire.gov.uk/send will be the 'front door' into information from Education, Health and Social Care in Cambridgeshire. Details of services in other Local Authorities can be found by accessing their Local Offer which will be published on their website.

Professionals working with a family who is receiving support from more than one Local Authority must ensure that communication channels are clarified and agreed between the family and other professionals. A key worker should be identified who can coordinate the work of those involved. The key worker could be an early years practitioner, health visitor, school SENCo, speech and language therapist, a chosen advocate of the family or any other professional with whom the family is in regular contact. This person may change over time and any changeover should be planned in advance so that families do not have to repeat the same information and so that there is no loss of continuity.

Support for siblings

As part of the development and review of the Local Offer for autism, parents and carers asked us to emphasise the need for professionals in Early Years, schools and other educational settings to be particularly mindful of the needs of siblings. It is helpful if conversations with the family are structured in such a way that the needs and aspirations of the whole family are considered and supported as appropriate. Further advice is available from the national and local organisations below.

National and local organisations

The National Autistic Society is a UK charity for people with autism (including Aspergers syndrome) and their families. They provide information, advice and support and campaign on behalf of people with autism.

The NAS produces information sheets aimed at supporting families, including help for brothers and sisters. Parents can request them from the Autism Helpline or print them from the NAS website.

	National Autistic Society (NAS) Autism Helpline 0808 800 4104 (Monday to Friday, 10 am – 4pm)
	c/o Chitra Sethia Autism Centre, Cambridge Road, Fulbourn, CB31 5EF
@	Direct from the website or autismhelpline@nas.org.uk
W	www.nas.org.uk

NAS Branch in Cambridgeshire

The group meet monthly on a Monday evening and is open to anyone with Autism Spectrum Disorder or their family.

	07920 150407
	c/o Chitra Sethia Autism Centre, Cambridge Road, Fulbourn, CB21 5EF
@	nascambridge@nas.org.uk
W	www.cambridge-autism.org.uk

Support for adults with autism who live in Cambridgeshire

NAS Cambridge has two Autism Support Managers, working in partnership with Cambridgeshire County Council. They work with adults across Cambridgeshire providing support, information and help with accessing things like work, leisure, vocational, volunteering opportunities.

For more information:

www.nascambridge.org.uk/adults/cambridgeshire-autism-support-managers

Pinpoint

pinpoint is a Cambridgeshire charity supporting and informing parents of children with special educational needs, disabilities or additional needs. It is run for parents by parents. Pinpoint holds regular events and meeting for parents of children of all ages with any disability or additional need, including autism. Parents can get involved in shaping services and developing information for parents, as well as meet other parents in a similar situation.

	01480 499043
@	information@pinpoint-cambs.org.uk
W	www.pinpoint-cambs.org.uk

Parent Partnership Service providing Cambridgeshire's SEND Information, Advice and Support Service (SENDIASS)

SENDIASS offer confidential and impartial advice and support to make sure that parents, carers and young people get information and guidance on SEND matters, eligibility and entitlements.

	01223 699214
@	pps@cambridgeshire.gov.uk
W	www.cambridgeshire.gov.uk/pps

Families and Childcare Information Team

The Families and Childcare Information Team provides access to online information for all families with children 0-19 years and up to the age of 25 for those with Special Educational Needs or disabilities (SEND).

If you would prefer to speak to someone contact the Families and Childcare Information helpline.

	0345 045 1360
@	fis@cambridgeshire.gov.uk
W	www.cambridgeshire.gov.uk/send

Transitions

Preparing for times of change

Transitions (times of significant change) can be difficult for all children and young people but can be especially so for those with autism or additional needs. The professionals working alongside the child or young person and their family will identify ongoing and new needs prior to the transition and ensure support arrangements are in place.

Below are some points of change that will need special consideration:

- into Reception
- into Key Stage One
- from primary to secondary school
- into Key Stage Four
- into further education
- to a new teacher or support professional
- to a new school
- to independent living
- to training or employment
- to adult services

We have listened to children and young people with autism, their families and those who work with and support them. They recommend the following guidance at times of change of phase of education:

- prepare well in advance, even several years beforehand for a move to further education, training or employment
- ensure that parents and young people have enough information to make informed choices
- arrange advance visits. Take photographs that can be used to create a booklet to talk about and rehearse the new situation
- ensure information on strengths, difficulties and effective support is shared in advance with all those who will be contact with the child or young person
- plan the first weeks following change very carefully and ensure the child or young person has a 'buddy' and named member of staff or work colleague to support them
- ensure any unstructured times during the day are well planned and that the child or young person has a 'safe-place' to go to e.g. for break and lunch

- ensure channels of communication with parents are agreed e.g. home-school booklet, email contact, mobiles
- use structured approaches to conversations with children, young people and families – as part of excellent communication at all times.

Other times of transition, or change that will need careful consideration and possibly specialist support include:

- moving to a new home
- moving in or out of hospital care
- moving in or out of Looked After care
- through a change in family circumstance
- through bereavement

Parents and young people are invited to discuss these changes with the professionals who they are most in contact with (e.g. health visitor, GP, school nurse, Children's Centre worker, early years setting or school's Special Educational Needs Coordinator (SENCo) or college learning support staff). They will work alongside the child or young person and family to plan actions to help them through the changes. They will also be able to signpost to any other specialist support where relevant. Information on specialist support at these of change can be found on the Cambridgeshire Local Offer www.cambridgeshire.gov.uk/send.

For information on transition events run by Pinpoint please see their website www.pinpoint-cambs.org.uk or contact them by email at information@pinpoint-cambs.org.uk or telephone 01480 499 043.

The route through to adulthood

Support will start early in school to prepare for life in adulthood. During Year 9, young people with Statements of Educational Needs or an Education, Health and Care Plans (EHC Plans) will meet a local authority adviser e.g. an additional needs adviser (ANA) or guidance adviser (GA). The adviser will liaise with the young person, their family and carers, the school and other professionals who will work together through the EHCP planning process to identify what is important to the young person and how best to work together to achieve it. For young people who are likely to require social care support in adult life, a referral will be made to adult social care and the appropriate team will start discussions from the age of 16 as part of the EHCP.

If your son or daughter has a children's social worker they will have a key role in ensuring that any social care support provided is focussed on thinking about and planning for the future. The appropriate identified Adult Social Care Team will provide support as young people turn 18.

Information on what happens at transition can be found on http://www.cambridgeshire.gov.uk/info/20136/special_educational_needs_and_disabilities_local_offer/533/age_16_-_25/2

Young People without a Statement of Educational Needs or EHCP

Young people without a Statement of Educational Needs or an Education, Health and Care Plan will be supported by their school's Special Educational Needs Co-ordinator (SENCo). Parents/carers are invited to contact their SENCo via the school. They are also invited to contact adult social care who can provide advice regarding an assessment and their eligibility for social care support post 18 years of age.

Young people will continue to receive support in Higher Education if they are eligible for a Disabled Student Allowance (DSA). For further information on the DSA please see www.gov.uk/disabled-students-allowances-dsas.

Diagnosis and support for autism in adulthood

An Adult Autism Diagnostic and Care Pathway for people with autism is currently in development by the Adult Autism Consortium. It will describe the route through assessment and diagnosis in adulthood and how to access support.

The Autism and Adult Support team supports people with Autism Spectrum Disorder (ASD) from the age of 18 who may be considered vulnerable in their communities, but do not have another diagnosis which would mean their needs could be met by any of the other adult social care teams for example Physical Disability, Learning Disability or Mental Health.

Where a young person has a diagnosis of autism and will require support from Health Services in adulthood, the Children's Health Services will refer them to the Adult Health Teams.

For those young people over the age of 18 years who do not already have a diagnosis of autism or are not already involved with Children's Health, the route to Adult Health Services for autism is through the young person's GP.

If a young adult with autism has concerns and is attending further education, university, or is in training or employment, they should talk with their GP. They can also contact their Student Union Counselling Service or University/ College Support Department or the National Autistic Society. They will be put in contact with people who will be able to listen and signpost them to specialist advice and support.

Information for people with **autism as adults** is available on www.cambridgeshire.gov.uk/careandsupport

Events to support transition to adulthood

Pinpoint hold 'Transition to Adulthood' events for young people, parents and carers. Information on when and where these are next taking place can be found at www.pinpoint-cambs.org.uk

We are currently working to integrate the Autism Pathway 0-25 years and the Adult Autism Pathway. We are working with young people and families to respond to the Government's new strategy for improving the lives of adults with autism, 'Think Autism' (April 2014). The full strategy is available at:

www.gov.uk/government/publications/think-autism-an-update-to-the-government-adult-autismstrategy

National Autistic Society has produced a summary of Think Autism which can be found at www.cambridge-autism.org.uk. For further information please contact their campaigns team at campaign@nas.org.uk

The Chitra Sethia Autism Centre

The Chitra Sethia Centre at Fulbourn Hospital, provides:

- A diagnostic service for adults, known as the CLASS (Cambridge Lifespan Asperger Syndrome Service) Clinic
- Parent/carer support groups for both parents of children and adults, hosted by the local National Autistic Society Branch. Further information can be found at <http://www.cambridge-autism.org.uk/>
- Family support for families of children with an autism spectrum disorder, including a regular drop in facility
- Support, advice and information for adults with autism through two Autism Support Managers who work across Cambridgeshire
- A Cambridgeshire meeting space for autism organisations, groups and family advice and information seminars
- Links across the geographical area to raise awareness of autism

In the future the Centre hopes to provide:

- Adult post diagnostic support through information, advice and signposting services
- Voluntary and supported employment opportunities

Workforce development

Training for professionals

The Local Authority is working with partners across services to develop a common approach to Special Educational Needs Competencies (the level of knowledge and skills expected of all staff) in Special Educational Need and Disability including autism.

An awareness of special educational needs including autism is included in the Cambridgeshire County Council Induction Programme for new staff.

In addition, services within Health and the Local Authority organise continuing professional development in autism through in-house training. Schools can access three levels of autism training through the Autism Education Trust (AET). Cambridgeshire County Council is the training hub for the AET Eastern Region. For more information please contact AutismTrainingAA3@cambridgeshire.gov.uk.

And finally

This document is intended as an initial guide to provision for autism in Cambridgeshire. We welcome your thoughts and comments on provision for Cambridgeshire children and young people with autism and their families. We are keen for young people, parents, carers and professionals across services to become involved in decision making about current and future provision. To find out some of the many ways to get involved please go to www.cambridgeshire.gov.uk/send or contact one of the services at the end of this section.

We look forward to hearing from you

Signs and Symptoms of Autism

0–4 years old or equivalent developmental age

Social interaction and reciprocal communication behaviours

Spoken language:

- Language delay (in babble or words, for example less than ten words by the age of 2 years).
- Regression in or loss of use of speech.
- Spoken language (if present) may include unusual:
 - non-speech like vocalisations
 - odd or flat intonation
 - frequent repetition of set words and phrases ('echolalia')
 - reference to self by name or 'you' or 'she/he' beyond 3 years.
 - Reduced and/or infrequent use of language for communication, for example use of single words

Responding to others:

- Absent or delayed response to name being called, despite normal hearing.
- Reduced or absent responsive social smiling.
- Reduced or absent responsiveness to other people's facial expressions or feelings.
- Unusually negative response to the requests of others (demand avoidant behaviour).
- Rejection of cuddles initiated by parent or carer, although may initiate cuddles themselves.

Interacting with others:

- Reduced or absent awareness of personal space, or unusually intolerant of people entering their personal space.
- Reduced or absent social interest in others, including children of his/her own age – may reject others; if interested in others, may approach others inappropriately, seeming to be aggressive or disruptive.
- Reduced or absent imitation of others' actions.
- Reduced or absent initiation of social play with others, plays alone.
- Reduced or absent enjoyment of situations that most children like, for example, birthday parties.
- Reduced or absent sharing of enjoyment.

Eye contact, pointing and other gestures:

- Reduced or absent use of gestures and facial expressions to communicate (although may place adult's hand on objects).
- Reduced and poorly integrated gestures, facial expressions, body orientation, eye contact (looking at people's eyes when speaking) and speech used in social communication.
- Reduced or absent social use of eye contact, assuming adequate vision.
- Reduced or absent joint attention shown by lack of:
 - gaze switching
 - following a point (looking where the other person points to – may look at hand)
 - using pointing at or showing objects to share interest.

Ideas and imagination:

- Reduced or absent imagination and variety of pretend play.

Unusual or restricted interests and/or rigid and repetitive behaviours

- Repetitive 'stereotypical' movements such as hand flapping, body rocking while standing, spinning, finger flicking.
- Repetitive or stereotyped play, for example opening and closing doors.
- Over-focused or unusual interests.
- although able to speak in sentences.

Unusual or restricted interests and/or rigid and repetitive behaviours

- Repetitive 'stereotypical' movements such as hand flapping, body rocking while standing, spinning, finger flicking.
- Repetitive or stereotyped play, for example opening and closing doors.
- Over-focused or unusual interests.
- Excessive insistence on following own agenda.
- Extremes of emotional reactivity to change or new situations, insistence on things being 'the same'.
- Over or under reaction to sensory stimuli, for example textures, sounds, smells.
- Excessive reaction to taste, smell, texture or appearance of food or extreme food fads.

5–11 years old or equivalent developmental age

Social interaction and reciprocal communication behaviours

Spoken language:

- Spoken language may be unusual in several ways:
 - very limited use
 - monotonous tone
 - repetitive speech, frequent use of stereotyped (learnt) phrases, content dominated by excessive information on topics of own interest
 - talking 'at' others rather than sharing a two-way conversation
 - responses to others can seem rude or inappropriate.

Responding to others:

- Reduced or absent response to other people's facial expression or feelings.
- Reduced or delayed response to name being called, despite normal hearing.
- Subtle difficulties in understanding other's intentions; may take things literally and misunderstand sarcasm or metaphor.
- Unusually negative response to the requests of others (demand avoidant behaviour).

Interacting with others:

- Reduced or absent awareness of personal space, or unusually intolerant of people entering their personal space.
- Reduced or absent social interest in people, including children of his/her own age – may reject others; if interested in others, may approach others inappropriately, seeming to be aggressive or disruptive.
- Reduced or absent greeting and farewell behaviours.
- Reduced or absent awareness of socially expected behaviour.
- Reduced or absent ability to share in the social play or ideas of others, plays alone.
- Unable to adapt style of communication to social situations, for example may be overly formal or inappropriately familiar.
- Reduced or absent enjoyment of situations that most children like.

Eye contact, pointing and other gestures:

- Reduced and poorly integrated gestures, facial expressions and body orientation, eye contact (looking at people's eyes when speaking) and speech used in social communication.
- Reduced or absent social use of eye contact, assuming adequate vision.
- Reduced or absent joint attention shown by lack of:
 - gaze switching
 - following a point (looking where the other person points to – may look at hand)
 - using pointing at or showing objects to share interest.

Ideas and imagination:

- Reduced or absent flexible imaginative play or creativity, although scenes seen on visual media (for example, television) may be re-enacted.
- Makes comments without awareness of social niceties or hierarchies

Unusual or restricted interests and/or rigid and repetitive behaviours

- Repetitive 'stereotypical' movements such as hand flapping, body rocking while standing, spinning, finger flicking.
- Play repetitive and oriented towards objects rather than people.
- Over-focused or unusual interests.
- Rigid expectation that other children should adhere to rules of play.
- Excessive insistence on following own agenda.
- Extremes of emotional reactivity that are excessive for the circumstances.
- Strong preferences for familiar routines and things being 'just right'.
- Dislike of change, which often leads to anxiety or other forms of distress (including aggression).
- Over or under reaction to sensory stimuli, for example textures, sounds, smells.
- Excessive reaction to taste, smell, texture or appearance of food or extreme food fads.

Other factors that may support a concern about autism

- Unusual profile of skills or deficits (for example, social or motor coordination skills poorly developed, while particular areas of knowledge, reading or vocabulary skills are advanced for chronological or mental age)

Older than 11 years old or equivalent developmental age

Social interaction and reciprocal communication behaviours

- **Spoken language:**
- Spoken language may be unusual in several ways:
 - very limited use
 - monotonous tone
 - repetitive speech, frequent use of stereotyped (learnt) phrases, content dominated by excessive information on topics of own interest
 - talking 'at' others rather than sharing a two-way conversation
 - responses to others can seem rude or inappropriate.

Interacting with others:

- Reduced or absent awareness of personal space, or unusually intolerant of people entering their personal space.
- Long-standing difficulties in reciprocal social communication and interaction: few close friends or reciprocal relationships.
- Reduced or absent understanding of friendship; often an unsuccessful desire to have friends (although may find it easier with adults or younger children).
- Social isolation and apparent preference for aloneness.
- Reduced or absent greeting and farewell behaviours.
- Lack of awareness and understanding of socially expected behaviour.
- Problems losing at games, turn-taking and understanding 'changing the rules'.
- May appear unaware or uninterested in what other young people his or her age are interested in.
- Unable to adapt style of communication to social situations, for example may be overly formal or inappropriately familiar.
- Subtle difficulties in understanding other's intentions; may take things literally and misunderstand sarcasm or metaphor.
- Makes comments without awareness of social niceties or hierarchies.
- Unusually negative response to the requests of others (demand avoidant behaviour).

Eye contact, pointing and other gestures:

- Poorly integrated gestures, facial expressions, body orientation, eye contact (looking at people's eyes when speaking) assuming adequate vision, and spoken language used in social communication.

Ideas and imagination:

- History of a lack of flexible social imaginative play and creativity, although scenes seen on visual media (for example, television) may be re-enacted.

Unusual or restricted interests and/or rigid and repetitive behaviours

- Repetitive 'stereotypical' movements such as hand flapping, body rocking while standing, spinning, finger flicking.
- Preference for highly specific interests or hobbies.
- A strong adherence to rules or fairness that leads to argument.
- Highly repetitive behaviours or rituals that negatively affect the young person's daily activities.
- Excessive emotional distress at what seems trivial to others, for example change in routine.
- Dislike of change, which often leads to anxiety or other forms of distress including aggression.
- Over or under reaction to sensory stimuli, for example textures, sounds, smells.
- Excessive reaction to taste, smell, texture or appearance of food and/or extreme food fads.

Other factors that may support a concern about autism

- Unusual profile of skills and deficits (for example, social or motor coordination skills poorly developed, while particular areas of knowledge, reading or vocabulary skills are advanced for chronological or mental age).
- Social and emotional development more immature than other areas of development, excessive trusting (naivety), lack of common sense, less independent than peers.

Parents and Carers

If you would like to speak to someone about autism or provision for autism here are some useful contact details.

Cambridgeshire County Council Children, Families and Childcare Information Team	Provides access to online and telephone information for all families with children 0-19 years and up to the age of 25 for those with SEND.	<p> www.cambridgeshire.gov.uk/families</p> <p>Email fis@cambridgeshire.gov.uk</p> <p> 0345 045 1360</p>
Cambridgeshire Branch of the National Autistic Society (NAS)		<p> www.cambridge-autism.org.uk</p> <p> 07920 150407</p>
Cambridgeshire County Council Parent Partnership Service (PPS) providing SEND Information, Advice and Support Services (SENDIASS).	An impartial information and advice service for parents and carers of children and young people with special educational needs. It promotes positive outcomes through partnership between parents, schools, local authority officers and other agencies	<p> www.cambridgeshire.gov.uk/pps</p> <p>Email pps@cambridgeshire.gov.uk</p> <p> 01223 699214</p>
Pinpoint	Pinpoint is an independent information and parental involvement organisation run for parents by parents in Cambridgeshire. They offer events and meetings where parents of children with additional needs and or a disability can meet together to discuss current issues, share experiences and information and meet service providers. Pinpoint gathers parental feedback to inform current and future provision	<p> www.pinpoint-cambs.org.uk</p> <p>Email information@pinpoint-cambs.org.uk</p> <p> 01480 499043</p>