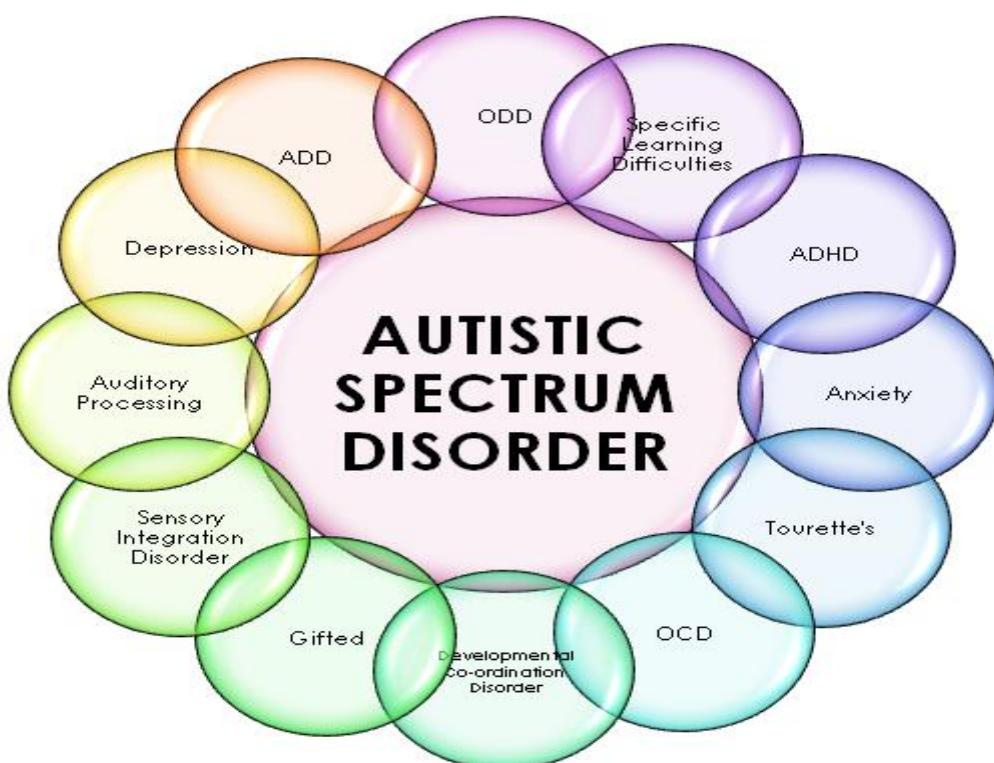




# **KENT COUNTY COUNCIL AUTISM PATHWAY FOR CHILDREN AND YOUNG PEOPLE 0-17**



## KCC 0-17 Autism Pathway - for parents/carers, children and young people

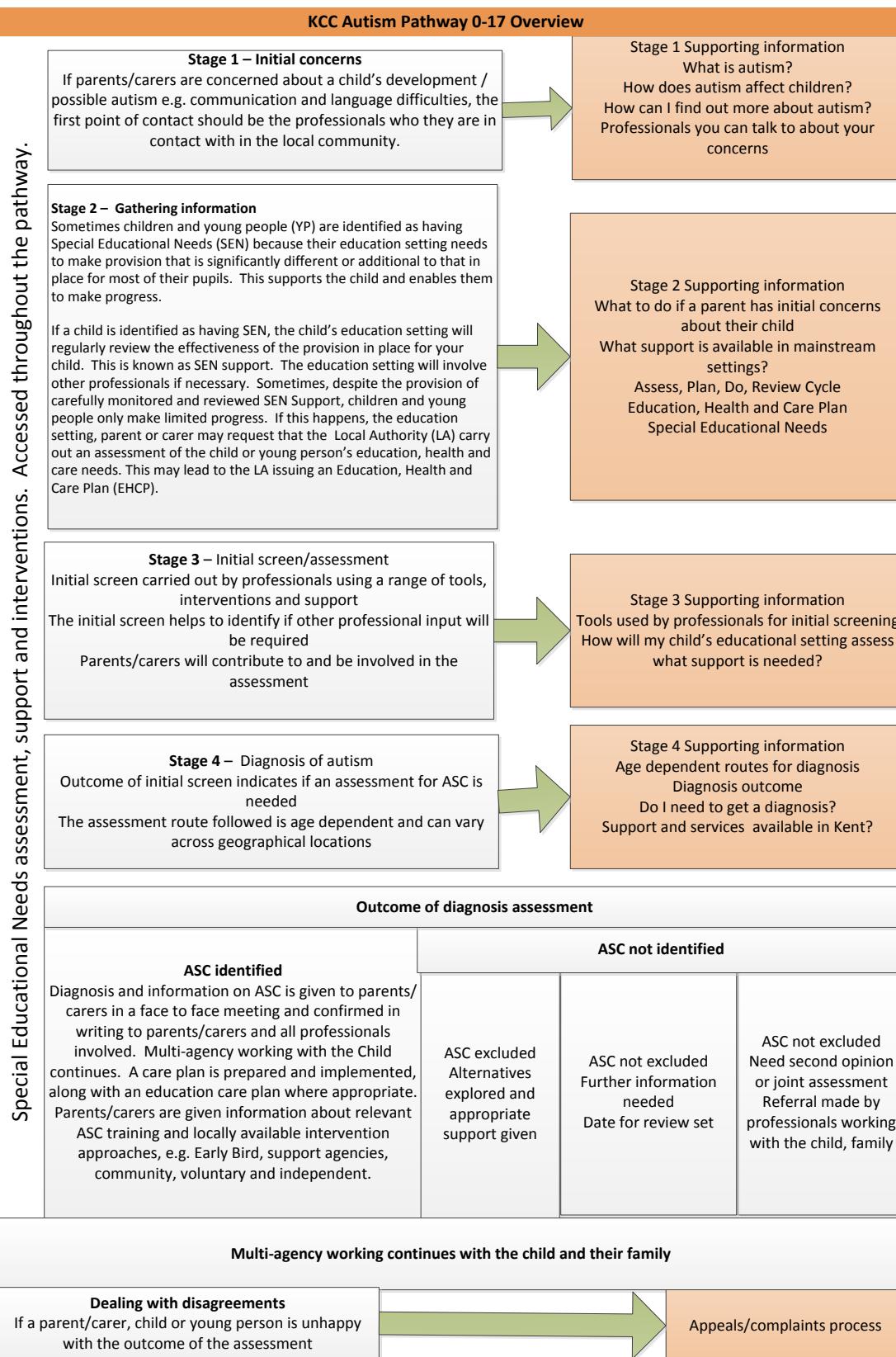
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# The Kent Childrens Autism Pathway Overview





## Glossary

ADHD	Attention Deficit Hyperactivity Disorder
ADOS	Autism Diagnostic Observation Schedule (ADOS) provides accurate diagnosis and assessment of autism
AQ10	A quick referral guide for adults with suspected autism who do not have a learning disability (Autism Spectrum Quotient)
ASC	Autism Spectrum Condition
ASD	Autism Spectrum Disorder
CAF	Common Assessment Framework
CAMHS	Children and Adolescent Mental Health Service
CCG	Clinical Commissioning Group
CHYPS	Children and Young People's Mental Health Services (will replace CAMHS)
Co-morbidity	When two disorders or illnesses occur in the same person at the same time
DISCO	Diagnostic Instrument for Social and Communication Disorders is a diagnostic tool for assessing <b>autism</b> in children and adults
DSM-5	The Diagnostic and Statistical Manual of Mental Disorders is the handbook used by health care professionals in the United States and much of the world as the authoritative guide to the diagnosis of mental disorders. 5 refers to the version number.
EHCP	Education, Health and Care Plan
EHN	Education and Health Need
GP	General Practitioner
High Functioning / High Ability	People with ASC who do not have a learning disability but have a high level of need associated with their autism
IAPT	Improving Access to Psychological Therapy
Intervention	Action taken to improve a condition or situation
IQ	Intelligence quotient – measures a person's level of intelligence
KCC	Kent County Council

KMPT	Kent and Medway NHS and Social Care Partnership Trust
LIFT	Local Inclusion Forum Team
ND	Neurodevelopmental
NHS	National Health Service
SALT	Speech and Language Therapist
SAPT	Specialist Assessments and Placements team
SCD	Social communication disorder
SEN	Special Educational Needs
SENCo	Special Educational Needs Coordinator
SEND	Special Educational Needs and Disability
SLAM	South London and Maudsley NHS Foundation Trust
SRP	Specialist Resource Provision
Triage	Decide the order of treatment/support

## What is the Kent County Council (KCC) Autism Pathway?

The KCC 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. The pathway covers assessment, diagnosis, support and transition into adulthood and long term needs and support.

**The main focus of the document will be to describe the KCC pathway for high functioning children and young people on the autistic spectrum. High functioning or high ability means children and young people without a learning disability and with an IQ above 70.**

Autism within education in Kent is recorded and reported as Autism Spectrum Disorder (ASD) in order to comply with legislative requirements. Within Adult and Children's Social Care teams, the generic term used is Autism Spectrum Condition (ASC).

It is known that service users, carers and professionals have different views and opinions on the terms used to describe autism or being on the spectrum and these viewpoints are fully respected. However, for the sake of consistency in this document, the term ASC will be used as an umbrella term for all the categories listed below:

- Autism Spectrum Disorder (ASD)
- High Functioning Autism
- Higher Ability Autism
- Autism Spectrum Conditions (ASC)
- Asperger Syndrome
- Autistic Spectrum Difference
- Pervasive Development Disorder
- Semantic Pragmatic Disorder
- Social Communication Disorder (SCD)
- Infantile Autism

## What is autism?

Autism is a lifelong developmental disability. Clinical psychologists and psychiatrists use the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) as the criteria for diagnosing ASC and the related diagnosis of Social Communication Disorder (SCD). You can find out more on the following website:-  
<http://www.autism.org.uk/DSM-5##criteria>

Autism affects the way a person communicates and how they experience the world around them. Autism is described as a spectrum condition. This means that while people with autism, including Asperger's Syndrome, share certain characteristics, they will be highly individual in their needs and preferences.



Some people with autism are able to live relatively independent lives but others may face additional challenges, including learning disabilities and Attention Deficit Hyperactivity Disorder (ADHD), which affect them so profoundly that they need support in many areas. The condition affects everybody differently and people with autism, just like people everywhere, have all sorts of individual personalities, tastes, outlooks and beliefs.

## How does autism affect children?

In the case of autism, the typical problems are difficulties with communication and finding it hard to be flexible – often including having sensory difficulties that restrict what people are able to do. The difficulties autism creates are described in a variety of different ways, so different descriptions in different places may be used but they all relate to the same condition.

### Social communication and interaction

Autism can make it much harder for someone to talk to and socialise with other people. Exactly how much depends on the individual but generally almost everyone with autism finds social communication a struggle to a greater or lesser degree.

A common early sign of autism is that a child doesn't start to speak at the usual age, or sometimes (though certainly not always) only speaks in 'echolalia' – repeating apparently random sounds or phrases over and over with no apparent interest in their meaning. More as if they were singing a series of notes than saying a sequence of words. Some people with autism never really master language but many eventually do.

Children with autism often talk in a less 'conversational' way than non-autistic children – speaking to ask for what they want or thinking aloud about their interests, but not chatting for the sake of chatting. They can also find it difficult to understand implication, hints or irony, and can take instructions very literally (for instance, being told, 'Don't touch the toilet', and not realising that this means 'Don't drop toys down it either'.)

Autism often involves difficulties in listening and/or concentration skills. A child with autism can sometimes seem either unresponsive or easily distracted. This is because of sensory issues or because their social 'presence' isn't as responsive to other people as an average child of the same age.

People with autism can often find it difficult to read another person's facial expression and body language which can make them seem oblivious or callous. In reality, they have simply missed or misread the signals. The real problem is that autism interferes with both the ability to notice and interpret other people's feelings and also the ability to sense them.

The latter skill is technically described as 'social imagination'. A person who has problems with social imagination can have a hard time understanding that someone

else might have a different perspective from them - or if they know it in theory, they may still struggle to imagine what it might be.

People with autism are often described as lacking empathy but this can be misunderstood. Actually, it's not that people with autism can't 'feel for' others; in fact, some autistic people say that they feel so strongly for others that they seem uncaring - they freeze up, overwhelmed. It can be hard for a person with autism to tell what someone else is feeling, or if they do, how to respond appropriately.

### **Restricted, repetitive behaviours and activities**

People with autism may be prone to developing rituals. They can get very attached to doing things the same way each time and can get extremely upset if their routines are disturbed. As children, their play skills can be limited and they often don't quite know what to do with toys, particularly if the toys are for 'pretend play'.

It's common for children with autism to play in a repetitive way – for instance, rather than pushing a toy car along the floor and making 'brmm-brmm' noises, they sit spinning one of its wheels and watching it go round. Some children may organise their toys in rows rather than playing with them. Their play skills may seem at a younger level than their chronological age. As well as being inclined to rules and rituals, it's common for a person with autism to have difficulty processing the information that their eyes, ears, noses, muscles and skins are sending to the brain.

These sensory issues are basically a question of certain senses being either hyper (over) sensitive or hypo (under) sensitive. Highly sensitive hearing is common, for instance, meaning that certain noises (like dogs barking or babies crying) are unbearable. Likewise, a lot of children with autism get obsessed with spinning objects or flashing lights, which can be a sign of highly sensitive vision.

If a sense is 'turned up' in a child with autism, they will be vulnerable to getting overstimulated and having a meltdown. If it's 'turned down', they may engage in eccentric-looking behaviours to shake it up.

Sensory issues can also cause difficulties in basic care. Food issues are very common with autism. Some of the problem may be about flexibility and anxiety in the face of the unfamiliar but it can also be that they either hate or adore particular textures. For instance, one child may eat nothing but soup and smoothies because the chewing sensation unsettles them. Another may want nothing but raw fruit and veg because they can't get enough of that crunch.

It's also common for people with autism to have problems with proprioception – that is, the body's ability to sense its own position and movements. (Am I sitting or standing? Am I upside-down or right-side-up? Am I falling? What are my legs doing under the table? And so on.)

Children with autism very often love to jump on trampolines, turn in circles, walk on tiptoe or be swung around. All of these are ways of stimulating the vestibular

(movement/balance) system. It is also common for people with autism to have problems processing proprioception and vestibular sensation – that is, the body's ability to sense its own position and movements.

Perhaps because of these difficulties with proprioception, children with autism often have motor issues as well, such as being late to crawl, walk, run and so on, and sometimes being clumsy. It's difficult to move your body around deftly if you can't clearly feel where it is and what it's doing.

Some people with autism are lucky enough to have only mild sensory issues, if any. For others, it's an ongoing strain because it's hard for them to be comfortable outside a highly controlled environment.

### **Mental health issues**

Evidence has been gathered which shows that mental health difficulties are common among people with an ASC. Attention Deficit Hyperactivity Disorder (ADHD) can be diagnosed in approximately a quarter of children with ASC and there are higher levels of anxiety and depression than in other children.

The presentation of depression and anxiety can differ to that in the general population and can act as a cause for a change in behaviour or functioning. The presentation of these conditions in a person with ASC can be easily missed and the behaviours attributed to the ASC itself. Further detail on other long term conditions (co-morbidities) can be seen in the following section.

Repetitive and routine-bound behaviours may be attempts to reduce anxiety levels. Challenging behaviours e.g. aggression and self-injury may be a response to increased anxiety levels. Although not necessarily a mental health problem, sleep difficulties are also very common.

Diagnosis of psychotic illness can present particular challenges. It needs to be seen as separate to the eccentric beliefs and vivid fantasy life which may form part of a person's ASC. Misdiagnosis of ASC as a psychotic disorder can occur. This could lead to long-term treatment with antipsychotic medication, with limited benefit and the potential for significant side effects.

### **Long Term Conditions with ASC (Co-morbidities)**

A high number of children with ASC also have another medical or psychiatric condition. This is called 'comorbidity', and the conditions are often called 'co-morbid' conditions.

Comorbid conditions can appear at any time during a child's development. Some might not appear until later in adolescence or adulthood. Sometimes these co-morbid conditions have symptoms that affect how well ASC therapies and

interventions work. So it may be beneficial to identify the conditions and treat them separately.

Examples of conditions comorbid to autism spectrum condition are:-

- Anxiety
- Depression
- Attention deficit hyperactivity disorder (ADHD)
- Bipolar disorder
- Developmental co-ordination disorder
- Gender dysphoria
- Obsessive compulsive disorder
- Tourette syndrome
- Sensory problems
- Nonverbal learning disorder
- Sleep disorders

Children are likely to present with ADHD, whilst depression is common amongst young people and adults with ASC.

## How can I find out more about autism?

If you are looking for more information about ASC, you will find that this is readily available online. Key websites are detailed below which will help you begin the process of getting more information.

<http://www.kent.gov.uk/social-care-and-health/health/autism-and-aspergers>

<http://www.kent.gov.uk/education-and-children/special-educational-needs>

<http://www.autism.org.uk/> (National Autistic Society)

<http://www.nhs.uk/Conditions/Autistic-spectrum-disorder/Pages/Introduction.aspx>

<http://www.childautism.org.uk/>

<http://www.kentautistic.com/>

## Initial concerns

Concerns about a child may be noticed in the first few years of life or later if your child struggles to cope with the demands of secondary education or the more unstructured environment of college or sixth form. Your child may also struggle to cope with life outside school, not being able to cope with normal childhood activities and interactions outside the structure of an educational or pre-school setting.

Whatever the age of your child when concerns arise, there are professionals within the community to whom the parent or young person can turn to for support.

## What to do if you are concerned about your child?

If you are concerned about communication and language, social understanding or the behaviour of your child, your first point of contact should be professionals you are in contact with in the local community. Examples of appropriate professionals are listed below. They will be able to work with you and your child to help identify difficulties, help plan support and review the outcomes. They can also signpost to other sources of support and information.

If your child is in school or nursery, it is always better to try and speak to your child's teacher first if you think your child is learning more slowly than they should. They will let you know what they are doing to address your child's area of difficulty.

If your child is of nursery or pre-school age but they do not attend a nursery or other setting, you should still contact the professionals you are in contact with in the local community such as health visitor or Children's Centre worker/Youth Worker or GP.

Community Professionals who can be approached for advice and support are:

- Health Visitor
- Children's Centre Worker
- Youth Worker
- Early Years provider, e.g. childminders and pre-school setting workers
- Teacher or tutor in your child or young person's school, college or university
- Special Educational Needs Co-ordinator (SENCo) in a school, nursery or pre-school setting
- School nurse
- GP

Kent County Council offer 'IASK', which is a service offering support and advice about special educational needs and disabilities. This includes social care and short breaks to help parents of children and young people with special educational needs and disabilities up to the age of 25.

Their trained staff can give legally based advice, information and support on matters relating to special educational needs and disabilities, and social care for disabled children and young people. Details can be seen on the following website - [www.kent.gov.uk/iask](http://www.kent.gov.uk/iask)

## What support can you expect?

The professional will talk with you once you have raised your initial concerns about your child. They will talk to you about your concerns and start to develop an understanding of your child's needs and those of the parent. They will follow an incremental approach to support based on what the parent identifies, their own observations and the complexity and severity of needs.

They may suggest a range of support approaches and these could include one or more of the following:

- Direct support to your child
- Direct support to the parent
- Signposting to other forms of support, information and advice that is available such as parent support groups or I-ASK.
- Support to develop the skills of the people working with your child.

The professional will have access to a range of tools to understand and assess your child's needs. The tools used will be dependent on the age of your child and what behaviour is currently presenting. One of the tools used are checklists.

Checklists are used to help professionals identify any difficulties that a child or young person may have and the action that may need to be taken. The findings from these are used to make sure that the right support is put in place to match the needs identified. Examples of checklists that might be used with an individual child are:-

- Speech and Language Descriptors (school age)
- Social Communication Descriptors (school age)
- The Two Year Old Health Check and Record.

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

## AUTISM PATHWAY – EDUCATIONAL PROVISION

### Support in 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. Some children and young people with autism make good progress with minimal additional support whilst others require a high level of individualised support to be able to make similar progress. How much support a child or young person needs can vary over time.

All schools and settings are expected to have a good understanding of your 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 pre-schools, schools and settings to be able to demonstrate how they meet or are working towards meeting best practice standards. Educational settings are able to work towards externally moderated accreditation of the standards they maintain in supporting pupils and students with ASC.

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.

[www.autismeducationtrust.org.uk/](http://www.autismeducationtrust.org.uk/)

There are specific standards and guidance in place for schools who provide support to children with special educational needs. These are the Best Practice Guidance to Mainstream Core Standards. These standards will determine how support is provided, which tools can be used and what the actions are in relation to the outcomes and needs identified.

Further information on the Mainstream Core Standards can be found on  
<http://www.kelsi.org.uk/special-education-needs/special-educational-needs/the-mainstream-core-standards>

<http://www.kelsi.org.uk/early-years/equality-and-inclusion/equality-and-inclusion>

Some of the resources available to support schools and settings are detailed below:-

Guidance and tools for schools and settings	How to find
Autism Education Trust (AET) National Autism Standards for Schools and Educational Settings	<a href="http://www.autismeducationtrust.org.uk/">www.autismeducationtrust.org.uk</a>
Autism Education Trust (AET) Professional Competency Framework	<a href="http://www.autismeducationtrust.org.uk">www.autismeducationtrust.org.uk</a>
Speech, Language and Communication Inclusion Development Programme (IDP) Early Years	<a href="http://webarchive.nationalarchives.gov.uk">http://webarchive.nationalarchives.gov.uk</a>

Autism Inclusion Development Programme (IDP) Early Years	<a href="http://webarchive.nationalarchives.gov.uk">http://webarchive.nationalarchives.gov.uk</a>
Development Matters 2012. Guidance for revised Early Years Foundation Stage (EYFS)	<a href="http://www.foundationyears.org.uk">www.foundationyears.org.uk</a>
Early Support: Information About Autistic Spectrum Disorders	<a href="http://councilfordisabledchildren.org.uk">http://councilfordisabledchildren.org.uk</a>
Speech, Language and Communication Inclusion Development Programme (IDP) Primary and Secondary	<a href="http://webarchive.nationalarchives.gov.uk">http://webarchive.nationalarchives.gov.uk</a>
Autism Inclusion Development Programme (IDP) Primary and Secondary	<a href="http://webarchive.nationalarchives.gov.uk">http://webarchive.nationalarchives.gov.uk</a>
Think Autism	<a href="https://www.gov.uk/government/publications/think-autism-an-update-to-the-government-adult-autism-strategy">https://www.gov.uk/government/publications/think-autism-an-update-to-the-government-adult-autism-strategy</a>
NAPLIC – professionals supporting language and communication development	<a href="http://www.naplic.org.uk/">http://www.naplic.org.uk/</a>

### What training is available in autism for schools and settings?

Autism awareness training is available locally through the District special schools. Each of the 12 districts in Kent has a special school which acts as the hub from which specialist teachers work. Autism training is run from these hubs and is provided by the specialist teachers.

There are different levels of training available. The level of training provided to each school or pre-school is determined by the need of the school, e.g. numbers of children with autism who attend the school and numbers of staff requiring training. Basic autism awareness training is also provided through accessing the LIFT process.

### Support provided within schools and settings

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

Action
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
Provide frameworks for writing e.g. step-by-step templates, mind maps, bubble diagrams.
Have clear plans for unstructured times of the day e.g. break-time, 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 your 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 pupil's likes and interests.

Many schools and pre-schools will already have systems in place to share information on all pupils e.g. my unique story, 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.

Schools and pre-schools explain the systems they have in place to support their pupils with SEN in their SEN Policy which may be available on the school's website. If this information is not available on the website, please contact the school or pre-school directly as they will have an SEN policy available.

## Kent Early Help Notification (EHN)

In Kent the Common Assessment Framework has been replaced by the Early Help Notification (EHN). EHN is used to access social care support for your child outside of the school environment.

Practitioners should work together with other services and agencies to identify the needs of families early. Wherever possible, those needs should be dealt with by practitioners and services already known to the family taking a holistic approach and providing support through their own resources or networks.

Where it is thought that intensive support provided or commissioned by Early Help and Preventative Services ([EHPS](#)) is required, practitioners should request support using the Early Help Notification form with consent from the family. It is vital to explain the steps of the process to the whole family, gain their consent to share information and to their involvement and participation in the process.

The Early Help Notification form should be completed as part of a robust discussion with the family including children and young people.

The Kent Family Support Framework (KFSF) is the model used by Early Help and Preventative Services (EHPS) in Kent to support families whose needs are defined as intensive.

The Kent Family Support Framework provides a clear pathway for Notification, Screening, Assessment, Planning, Outcome Tracking and Reviewing of Early Help cases.

## **Early Help Triage**

The Early Help Triage team process all new Early Help notification forms.

This process includes:

- Checking of information on the notification form and if insufficient, unclear or inconsistent requesting further information by contacting the referrer
- Gathering further information relating to the family from KCC systems to form a holistic view of the needs and strengths of the family
- Considering safeguarding issues and where necessary, liaising with the referrer and Specialist Children's Services
- Advising the referrer of the outcome of the Triage process and providing advice and guidance, where appropriate

The referrer will be advised by email of the outcome of the Triage process. Where appropriate, support from a District Early Help Unit or a commissioned service will be recommended.

Practitioners may contact the Early Help Triage team – [earlyhelp@kent.gov.uk](mailto:earlyhelp@kent.gov.uk) or 03000 419222

## **Early Help Assessment and Planning**

The District Early Help team will, where appropriate, allocate to an Early Help unit. Alternatively, open access support from a children's centre or youth hub or a commissioned service may be provided. Advice may include signposting or guidance.

The unit worker will contact the referrer to discuss the request prior to contacting the family and continue to liaise with the referrer throughout the process. The worker will meet with the family to undertake an assessment and agree an outcome focused family plan which will be reviewed regularly with the family and key agencies supporting the plan.

### **Early Help Review and End of Involvement**

Following regular reviews of the outcomes, the worker will discuss and agree with the family to end their involvement. Where ongoing support is agreed, the worker will liaise with the relevant service or agency to ensure an effective transition to universal services and explain the outcome to the referrer. Early Help typically provides short-term interventions averaging 20 weeks.

Further information on the Early Help Notification process can be found at the following website:- <http://www.kelsi.org.uk/special-education-needs/early-help-and-preventative-services/Early-Help-Toolkit>

### **Special Educational Needs**

The Special Educational Needs and Disability Code of Practice (2015) provides a definition of Special Educational Needs:

"A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- Has a significantly greater difficulty in learning than the majority of others of the same age, or
- Has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions."

(Special educational needs and disability code of practice: 0-25 years, January 2015, p.15-16)

Some children and young people with ASC will require special educational provision to be made for them.

### **How educational settings assess what provision is required for children and young people with ASC**

Nurseries, schools and colleges regularly assess and monitor the progress that children and young people are making in all areas of their learning and development. The class teacher or pre-school SENCo will adapt their teaching and provide additional support in response to these assessments to ensure that all children and young people in their classes are making progress. Through high quality teaching, adapted to respond to individual needs, teachers are able to meet the needs of the vast majority of children in their classes.

Sometimes, despite these adaptations and support, children and young people do not make progress (or good enough progress). At this stage the teacher will consult with the school or nursery's Special Educational Needs co-ordinator (SENCO).

The SENCO will work with you, the class teacher and sometimes professionals from other agencies, to assess whether your child has SEN. For some children, it will be clear that they require special educational provision during their early years, but for others, their needs will emerge as they progress through school.

### **What to do if you are worried about your child's progress – identifying special educational needs**

If you are concerned about your child's progress in nursery or at school, the first person to contact is your child's class teacher. If, following discussion with the class teacher, there is still concern, contact the nursery or school's SENCO.

High quality teaching, adapted for individual pupils, is the first step in supporting children and young people who have, or may have SEN. Where there are concerns about your child's progress in any area of their development, the teacher and SENCO, in discussion with you and your child, will consider if special educational provision is required.

This process should start with identifying desired outcomes and the views and wishes of you and your child. This will help to identify what support is needed and whether it can be provided by adapting the school's core offer or whether something different or additional is required.

Once the support to be provided has been decided, a date for reviewing progress should be agreed. You, your child and teaching staff should be clear about the help your child will receive to reach the outcomes identified.

If your child is identified as having SEN, the educational setting should take action to remove barriers to learning and put effective special educational provision in place.

### **SEN Support in educational settings - the graduated approach**

SEN support should take the form of a four-part cycle where earlier decisions and actions are reviewed and amended as the understanding of your child's needs and how best to support them grows. This cycle is known as the graduated approach.

### **Step 1: Assess**

The subject, key worker or class teacher, working with the SENCO, should carry out a clear analysis of your child's needs. They will use assessment data, the teacher's experience of working with your child; your child's previous progress, attainment, and individual development in comparison to their peers. They will also include the views of you and your child. Information from other services supporting your child can also be used.

### **Step 2: Plan**

When it has been decided to provide your child with SEN support, you will be formally notified by your child's educational setting.

The SENCO and teacher should consult with you and your child about the provision to be put in place as well as the expected impact on progress, development and or behaviour. You should be given a date to meet to review what has been agreed.

The support or intervention provided and teaching strategies identified should be selected to meet the outcomes identified for your child.

### **Step 3: Do**

The class or subject teacher will remain responsible for working with your child on a daily basis. They should work closely with any teaching assistants or specialist staff involved. The SENCO should provide the teacher with further advice and guidance in working with your child.

### **Step 4: Review**

The effectiveness of the support and interventions and their impact on your child's progress should be reviewed regularly. As part of this review, the educational setting should talk to you and your child regularly and, taking account of your views, set clear outcomes, review progress towards them and agree any changes to the support in place for your child. Educational settings should meet with you to review support at least three times each year.

Regular review of the support in place for your child will feed in to the continual assessment and understanding of your child's areas of strength and difficulty. This enables support and intervention to be adjusted as your child develops.

### **What SEN support may include**

SEN support could include specialist teaching, small group or individual interventions or support from an additional adult in the classroom or during break times.

Sometimes your child may get help from a specialist such as:

- educational psychologists (qualified professionals registered with the Health Care Professional Council working within the education system and the community to promote the emotional wellbeing of children and young people)
- child and adolescent mental health services (CAMHS)
- specialist teaching and learning services or SEND support services (for example teachers qualified to work with specific needs such as ASC, blindness, deafness and communication problems)
- therapists such as speech therapists or occupational therapists.

You will be included in any decision to consult with or refer to a specialist.

### **Local Inclusion Forum Team (LIFT)**

Sometimes a school or Early Years setting may need to seek additional advice, training or support from the Local Inclusion Forum Team (LIFT) at a LIFT meeting. Schools or pre-schools must gain parental consent before discussing a child or young person at a LIFT meeting.

At the LIFT meeting, the school or pre-school setting will have the opportunity to discuss your child's SEN with colleagues from other schools, an educational psychologist and representatives from district based specialist outreach providers, including specialist teachers. The aim of the discussion is to find solutions to problems, drawing on the knowledge, experience and expertise of everyone in the group so that schools can make better provision from within their existing resources.

The most common outcomes from a LIFT discussion are:

- Advice, support and ideas from the discussion at the meeting to take back and try
- Access to training programmes or the opportunity for bespoke training
- Support from another school or pre-school setting
- Specialist intervention from a specialist teacher, special school outreach teacher, educational psychologist, equality and inclusion advisor support or other district based SEND provider
- A recommendation that the school or pre-school should consider a referral to Early Help
- A recommendation that the school or pre-school consider seeking advice from appropriate health professionals.

You can get more information about the LIFT process at:-

<http://www.kelsi.org.uk/special-education-needs/special-educational-needs/local-inclusion-forum-teams>

## Statutory Assessment of a child's education, health and care needs

### Requesting an Education, Health and Care (EHC) needs assessment

If a situation arises when, despite the school or pre-school having made their best efforts to identify, assess and meet the SEN of your child, your child has not made progress towards meeting their identified outcomes; you and the school or pre-school should consider requesting that we carry out an EHC needs assessment. This assessment will provide the local authority with the information it needs to decide if it is necessary to make provision for your child in accordance with an EHC plan.

The purpose of an EHC plan is to make special educational provision for a child or young person that will secure the best possible outcomes for them.

The following people have a specific right to ask a local authority to conduct an EHC assessment for a child or young person aged between 0 and 25:

- a child's parent
- a young person over the age of 16 but under the age of 25
- a person acting on behalf of a school or post-16 institution

Other people (such as foster carers, health or social care professionals, early years practitioners, youth offending teams or probation service, those responsible for education in custody, school or college staff or a family friend) can bring a child or young person who has (or may have ) an SEN to the attention of the local authority. This should be done with the knowledge of, and where possible, the agreement of the child's parent or the young person

### Considering whether an EHC assessment is necessary

The EHC assessment process puts children, young people and families at the centre of the assessment and planning process. We will make sure you have time to prepare for meetings and give you time to share your views. You can come to any examinations or assessments your child needs. Sixteen to twenty five year olds should be especially involved in the planning.

It is important to note that your child must have identified special educational needs for an EHCP to be carried out. If your child presents with health or care needs rather than specific special educational needs, these will be supported by other services. The professional working with you and your child or young person will signpost to these services.

We will consider a wide range of evidence when deciding if an EHC assessment is necessary. This will include:

- evidence from your child's educational setting

- evidence from clinicians, other health professionals and other agencies about what has been done to meet your child's physical, emotional and social development

The whole process of EHC needs assessment and EHC plan development, from the point the assessment is requested until the final plan is issued, must not take more than 20 weeks (subject to some, specific exceptions).

We must decide whether or not to carry out the EHC needs assessment and inform you (and your child if they are older than 17) within a maximum of six weeks from receiving a request for an assessment. If we decide not to carry out an EHC assessment, the reasons for this decision will be provided. We will also tell you about the right to appeal this decision, how to do this and the time limit for doing so. The school or pre-school setting will be consulted during this process.

If we decide to carry out an EHC needs assessment, you and your child will be fully included from the start and told when you will be able to give your views and provide information.

When the assessment is complete, we will decide whether an EHCP is needed.

If we decide not to issue a plan, you must be informed within a maximum of 16 weeks from the request for the assessment. You will also be informed about your right to appeal this decision, how to do this and the time limit for doing so.

If we decide that an EHCP is needed we will draft the plan and send it to you and your child for consideration. You will have 15 days to comment and/or express a preference for an educational institution.

We will consult with the governing body, principal or proprietor of the educational institution before naming them in the EHCP. The institution should respond within 15 days.

Following this consultation period, the draft plan will be amended where needed and then issued as a final EHCP. The local authority will notify you and your child about how you can appeal the contents of the plan if this is required.

The EHCP will include the following information:

- The views, interests and aspiration of you and your child.
- Your child's special educational needs
- Any health needs that your child has that are related to their SEN
- Any social care needs that your child has that are related to their SEN
- The outcomes sought for your child and shorter term targets
- The SEN provision required by your child
- Any health provision reasonably required by the learning difficulties or disabilities which result in your child having SEN

- Any social care which must be made for your child (when under 18) resulting from section 2 of the Chronically Sick and Disabled Persons Act 1970
- Any other social care provision reasonably required by the learning difficulty or disability which results in your child having SEN
- The name and type of the educational setting your child attends
- The details of any personal budget
- The advice and information gathered during the assessment (as appendices)
- When your child is in Year 9 or above, the EHCP will include the provision required to help them to prepare for adulthood.

KCC are responsible for making sure all the services involved in the delivery of provision are brought together and that the plan is well co-ordinated.

You can find out more about how KCC supports children and young people with special educational needs and/or disability and their families at:  
<http://www.kent.gov.uk/education-and-children/special-educational-needs>

### **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 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. Kent local authority provides/has access to a good range of special schools – 20+ Special schools and 50+ Specialist Resource Provisions (SRPs) across the county.

You can find out more about this by contacting the Kent County Council special education needs support teams – contact details are contained in the following website:

<http://www.kent.gov.uk/education-and-children/special-educational-needs/who-to-contact>

### **Information on special schools and specialist resourced mainstream provisions**

Information on special schools and mainstream specialist resourced provisions across Kent is available in the Kent Local Offer:

[http://www.kent.gov.uk/search?mode=results&queries\\_keyword\\_query=schools](http://www.kent.gov.uk/search?mode=results&queries_keyword_query=schools)

### **Accessing early intervention support as a parent/carer**

There are some children who present with a range of social communication difficulties who may need a more informal level of support. For example, attending a holiday club in the school holidays. This type of support can be accessed directly by you and does not require an assessment or formal referral from a professional.

You may feel that you need advice or information on the type of support that is available for your child and for you as parents and carers. You can find out more about this on page 30 of this document.

Kent County Council helps fund a range of these through the provision of grants.

## Diagnosis

Within Kent, diagnosis for ASC is commissioned by Clinical Commissioning Groups (CCG) with a range of providers. Because each CCG is responsible for a specific geographical location, there may be some differences in the way diagnosis is accessed and provided.

### Referral for a diagnostic assessment

There is a wide range of support for children, young people and parents/carers where a formal diagnosis is not required.

However, where a diagnosis may inform ongoing interventions, the route to formal diagnosis is dependent on the age of your child or young person.

It is important to note that whatever route the Health professional considering a diagnosis takes, they will seek information on the range of interventions already put in place and how well they are working in order to determine the best route and if a diagnosis is required.

National guidance is available which states who can diagnose and how this relates to the age of your child. However, for all ages it is recommended best practice for two professionals to jointly diagnose.

Under the age of 11 it would generally be a Paediatrician and Speech and Language Therapist who carry out the diagnosis. Over the age of 11, it would generally be a clinical psychologist and Speech and Language Therapist who carry out the diagnosis.

You can see more information on this at: National institute of Clinical Excellence - Autism spectrum disorder in under 19s: recognition, referral and diagnosis Clinical guideline [CG128]

### Who to ask for a diagnosis based on the age of your child

**0-5 years** - Where the possibility of autism is identified at pre-school age the referrals are made via the GP to a Paediatrician. A developmental assessment is usually carried out prior to GP referral for pre-school age children. Early Years LIFT would also be an option at this point.

**5-11 years** - Initial concerns should be discussed with the school who would identify what support options are best for the presenting needs within the resources of the school and support you to access support outside of school. The school age LIFT process would also be an option at this point.

If a referral for diagnosis was required after these options had been exhausted, then a referral could be made by the school to the Paediatrician. Where a child is not attending school then a GP may be appropriate health professional to speak to.

**8-11 years** - Initial concerns should be discussed with the school who identify what support options are best for the presenting needs within the resources of the school. They would support the parents to access support outside of school. The school age LIFT process would also be an option at this point.

If a referral for diagnosis was required after these options had been exhausted, then a referral could be made by the school to:

**East Kent (Thanet, South Kent Coast, Canterbury and Coastal and Ashford)** – referrals are to the ASC assessment provider Psicon rather than directly to the Paediatrician. You can get more information about Psicon on the following website:- <http://www.psicon.co.uk/>

**West Kent and North Kent (Dartford, Gravesham and Swanley)** - the referral is to the Paediatrics team at Kent Community Health NHS Foundation Trust. For children in Swale, the referral is to Medway NHS Foundation Trust Community Paediatric service. You can get more information about KCHFT at:- [www.kentcht.nhs.uk/service/community-paediatrics](http://www.kentcht.nhs.uk/service/community-paediatrics) and Medway Trust at [www.medway.nhs.uk](http://www.medway.nhs.uk)

If your child is not attending school then a GP may be an appropriate health professional to speak to.

**12-17 years** – Initial concerns should be discussed with the school who identify what support options are best for the presenting needs within the resources of the school. They would support you to access support outside of school. The school age LIFT process would also be an option at this point.

If a referral for diagnosis was required after these options had been exhausted, then a referral could be made by the school to the child and Adolescent Mental Health Services clinical psychologist. Where a young person is not attending school then a GP may be an appropriate health professional to speak to.

The Child and Adolescent Mental Health Service (CAMHS) in Kent is provided by Sussex Partnership Foundation Trust. You can find out more about this at: [www.sussexpartnership.nhs.uk/service-kent-community-teams](http://www.sussexpartnership.nhs.uk/service-kent-community-teams)

### What happens at the diagnostic assessment?

The assessment should involve the professionals talking with you, talking with and observing your child and finding out about:

- parental concerns, and those of your child if appropriate
- how your child has been getting on at home, in nursery or school, or in care
- your child's past and present health, and that of the family
- your child's behaviour and development.

The assessment should include someone who is able to assess children and young people who have visual or hearing impairments; conditions like cerebral palsy, difficulties with language, mental health problems and intellectual disabilities.

Your child should be given a physical examination. There may also be other specific assessments that could help to provide more information, such as an assessment of how your child uses language.

It may be useful for your child to see different healthcare or educational professionals. The professionals will talk to each other and share information so that an assessment is not repeated unnecessarily.

They will use all the information from the assessment, the information provided by you and any information from your child's school or healthcare professional to help them come to a decision about whether your child has autism.

### **Diagnostic assessment outcome**

The outcome of the assessment could be:

- A diagnosis of ASC
- A diagnosis of ASC with another condition such as ADHD
- An uncertain diagnosis – this will be followed by a discussion about why and what else may need to be investigated.
- ASC not diagnosed but difficulties are identified along a continuum of social communication difficulties and appropriate signposting and/or support is provided
- ASC not diagnosed – further work will be needed to identify and meet the needs of your child or young person

### **Ongoing support and long term needs after diagnosis**

If your child is diagnosed with ASC, the professionals carrying out the assessment will provide information and advice on the range of support available. This may be in the form of an information pack.

Further information on support, advice and information provided by KCC – i.e. educational support and social care support can be seen on page 30 of this document.



## What happens if autism is not diagnosed?

Although a child or young person may not receive a diagnosis of ASC, 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.

If the school, college, nursery, playgroup or children's centre setting continues to have concerns about your child or young person they can consult with a range of outside agencies for further support and guidance. If your child is identified as having SEN, their educational setting will provide support as described above.

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

If your child or young person does not have autism they may still have additional needs. There will be some children who are within the normal range for educational needs but may require support for other difficulties outside school. Further information on the assistance and support for these children can be seen on page 30 of this document.

Professionals involved with your child will continue to offer support and should put you and your child at the centre of this process. They will work with you and your child to explore the possibility of other assessments and interventions where appropriate. This may involve new professionals from other specialist areas.

## What happens if I don't agree with the outcome of the diagnostic assessment?

If you don't agree with the outcome of the assessment, the following organisations will be able to offer advice on what to do.

Who to contact	Contact Details
West Kent CCG, SKC and Thanet CCG, Ashford CCG, Canterbury and Coastal CCG	<b>South East Commissioning Support Unit</b> Customer Services Team Phone: 03000 424244 Email: <a href="mailto:secsu.complaints@nhs.net">secsu.complaints@nhs.net</a>
Swale CCG	Phone: 03000 424 901 Email: <a href="mailto:swccg.complaints@nhs.net">swccg.complaints@nhs.net</a>
DGS CCG	Phone: 03000 424 901 Email: <a href="mailto:dgscgg.complaints@nhs.net">dgscgg.complaints@nhs.net</a>

## Transition

### Preparing for times of change

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 you and your child or young person will identify ongoing and new needs prior to the change and ensure support arrangements are in place.

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

- into pre-school
- into Key Stage One
- from KS2 into KS4
- into further education
- to a new teacher or support professional
- to a new school
- to independent living
- to training or employment to adult services

The following are options that can be used when preparing for change:

- 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 in contact with your child or young person
- plan the first weeks following change very carefully and ensure your 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 your 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

Other times of change that may 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 or through bereavement

Parents and young people are invited to discuss these changes with the professionals who you 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 you and your child or young person to plan actions to help you through the changes. They will also be able to signpost to any other specialist support where relevant. Information on specialist support available at these times of change can be found on the Kent Local Offer - <http://www.kent.gov.uk/education-and-children/special-educational-needs>

### Preparing for adulthood

The transition from being a young person to adulthood can be a difficult time for anyone but it can be particularly difficult for disabled young people or young people with long term health conditions. Often a young person will be in contact with a number of different professionals and agencies and some of these contacts might change as they approach adult life.

When your child is in year 9 at school we'll start working with you and your child to plan their move towards adulthood. This is called transition planning and will include looking at whether your child or young person wants to stay in education or start training for work. It will also look at whether your child has any care and support needs; look at benefits, housing and money.

### The Care Act and Transition to Adult Social Care Services

Some young people will require support from adult social care services when they reach the age of 18. Sometimes this will just be in the form of advice and guidance but for young people with more complex needs they may require additional care and support to meet their needs.

When a young person requires help from Adult Social Care, we want to ensure there is a smooth transition from any children's services they might have been accessing.

### Care Act 2014

In April 2015 the Care Act was implemented. This introduced a number of changes for Adult Social Care services, including:

- the need to provide information and advice
- a change to the “eligibility criteria” which Local Authorities use to determine if someone meets the criteria for care
- more support for carers, including young carers
- new duties and responsibilities in relation to Transition.

### Eligibility for services

The Care Act introduced new eligibility criteria to assist Local Authorities in deciding who is eligible for care and support. Adults are likely to meet the criteria where they have care and support needs due to a physical or mental disability or illness and where they are unable to complete specified tasks or activities.

## Transition planning

Where it is likely that a young person will have care and support needs when they reach age 18 and it is thought to be of significant benefit to the young person then an assessment can take place. The assessment will consider the young person's well-being and what care and support needs they are likely to have at age 18.

A young person, or someone acting on their behalf can make a referral to adult social care to request a transition assessment. If the request is made on behalf of the young person then it should be with their agreement.

The assessment will usually involve the young person, their parents and carer and any person the young person or parent or carer requests to be involved.

If it is decided that an assessment is not needed, the reasons why will be explained in writing and advice and information will be provided.

For some young people with Special Educational Needs, and who are also likely to have care and support needs at age 18, a joint assessment and transition planning may be appropriate.

The assessment is an important part of transition planning to identify what needs the young person is likely to have on reaching age 18. Early transition planning can help prevent a gap in services for the young person.

## Carers

The Care Act also enables young carers who are approaching 18 to have their needs assessed. In addition there is provision in the Care Act for the carers of disabled young people going through transition to have their needs assessed.

## More Information

For some disabled young people their transition planning is linked in with their reviews at school. For others who have a social worker, then the social worker can assist in contacting Adult Social Care services to arrange a transition assessment.

You can find out more information on transition planning from the following website:-

<http://www.kent.gov.uk/education-and-children/special-educational-needs/becoming-an-adult/transition-planning>

You can contact KCC Adult Social Care on:

Telephone: 03000 41 61 61

Text relay: 18001 03000 41 61 61



This information is also available in an easy read booklet for young people.

[Easy read booklet on becoming an adult \(PDF, 1.6 MB\)](#)

[Easy read guide for children and young people - changes to special educational needs and disability support \(PDF, 4.85MB\)](#)

## **Information, advice and support**

Parents can expect appropriate support to be available for children and young people who have communication, social and behavioural needs including autism. This support can be expected from the first early concerns through to assessment and on-going support.

The level and type of support will depend on the individual needs of your child and family and this may change over time.

### **You don't need to have a diagnosis to get help and support for you and your child**

As the parent of a child with autism or related developmental delays, the best thing you can do is to start looking at support and help right away. Seeking help as soon as you suspect something is wrong is the most effective way of helping your child.

Don't wait to see if your child will catch up later or outgrow the problem. Don't even wait for an official diagnosis. Early intervention can be the most effective way to help your child.

## **Kent County Council services providing information, advice and support**

Details of services provided by Kent County Council which are particularly relevant to children on the autistic spectrum and their families are listed below.

### **Information, Advice and Support Kent (IASK)**

IASK provides a free and confidential, information, advice and support service, for parents who have a disabled child or a child with special educational needs. They also provide this service to children or young people aged up to 25 who have special educational needs or a disability.

Trained staff can provide impartial legally based information and support on educational matters relating to special educational needs. They also provide impartial information and support relating to social care. The aim is to empower parents, children and young people to fully participate in discussions and make

informed choices and decisions. It also aims to empower them to feel confident enough to express their views and wishes about education and future aspirations.

The service can:

- give time to discuss issues and explore options;
- help prepare for and support at meetings with the local authority or setting, school or education provider;
- explain educational processes and procedures;
- provide information about other agencies and processes including social care and short breaks;
- help with writing letters and completing forms;
- signpost to other sources of information

**Available:-** Helpline service Monday to Friday 9.00 – 5.00 all year round (except for national holidays)

24 hour email service and voice mail facility

All calls and emails are responded to within 2 working days

**Eligibility:-** available to anyone with a suspected disability or special educational need. However, we provide information to anyone who rings and will signpost as necessary. Any parent who believes their child has a disability or special educational need.

**Referral:-** Parents, children and young people can access our service directly they do not need a referral.

Further information:- [www.kent.gov.uk/ask](http://www.kent.gov.uk/ask)

Helpline number 03000 41 3000

Local Offer link: <http://www.kent.gov.uk/education-and-children/special-educational-needs/help-if-youve-got-a-disabled-child>

### **Kent County Council Local Offer – information for Special Educational Needs**

Provision for autism in Kent is described in the Local Offer. A local offer gives children and young people with special educational needs or disabilities and their families information about what support services will be available in their area. The name 'local offer' was given by the government.

Every local authority must talk with children and young people with special educational needs or disabilities and their families to find out what sort of support and services they need. There will be many different types of services that children and young people may need, including support services in school and services in their local community.

Children, young people and their families may also have ideas about what leisure activities should be available, and what services are needed to help young people move towards independence in adulthood.

Every local authority must have a local offer that is available on the internet and must make sure that people without access to the internet can also see it. The local authority must tell children and young people and their families how they can find out more about the local offer. The local authority will then decide what services to make available.

A local offer should also include information about what transport services are available for children and young people with special educational needs or disabilities and if there is any help available to pay for these services. You can find more information at the following link: <http://www.kent.gov.uk/education-and-children/special-educational-needs>

### **Early Help and Preventative Services (EHPS)**

Designed to respond early to tackle emerging issues for children, young people and families who are most at risk of developing problems and having poor outcomes.

Early help and preventative work is not just about early childhood but also about preventing adolescents and young adults from developing problems. EHPS are multi-disciplinary and multi-agency and are delivered in an integrated, joined up way to have maximum impact on improving outcomes, providing families with a more coordinated approach, achieving the most efficient use of resources and reducing demand for more costly services.

<http://www.kent.gov.uk/education-and-children/early-help-support-for-families>

### **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.

Children's Centres may offer the following:

- 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.
- Health services – midwives and health visitors

**Eligibility:-** Support for children aged 0-8 and their families

Further information, addresses and contact details can be found at:

<http://www.kent.gov.uk/education-and-children/childcare-and-pre-school/childrens-centres>

### Youth Hubs

Youth Hubs offer young people a safe space to explore their identity, experience decision making, increase their confidence and develop inter-personal skills.

They provide young people with access to universal youth services in their local area, including evening and weekend activities.

Targeted, evidence based youth work within Youth Hub settings ensures intervention as early as possible to enable wellbeing of the young person.

Services offered by Youth Hubs include:

- Support for young people who are not in education, employment or training (NEET)
- Youth forums to ensure the needs of young people are at the centre of everything we do
- Focused group work with children and young people from vulnerable groups
- International trips and residential services
- Educational informative visits from professionals such as Public Health
- Support for young people to access further opportunities within Early Help and Preventative services (EHPS).

**Eligibility:** Support for children and young people aged 9 – 18 (up to 25 if additional needs are identified) and their families

**Further information:** <http://www.kent.gov.uk/education-and-children/young-people/youth-hubs>

### Health Visiting

The Health Visiting Service leads on the delivery of the Healthy Child Programme for 0-5s. Health visitors work across services and organisational boundaries to improve public health outcomes for babies and children 0-5 and their families.

The delivery of five statutory reviews act as points of contact for identifying additional need, which may result in targeted activity or referral into specialist services.

**Availability:-** The core service operates 9.00am-5.00pm Monday to Friday throughout the year.

**Eligibility:-** This is a universal service for all children aged 0-5.

**Referral:-** The service is notified of births via the midwifery service and makes contact with mothers. The first formal review is delivered at the antenatal stage. The service can also be accessed by self or professional referral.

Further information:- <https://www.kentcht.nhs.uk/service/health-visiting-service/>

## Headstart Kent

### Headstart Kent – helping young people bounce back

Headstart Kent is a project within Kent County Council Early Help and Preventative Services which aims to help young people cope better when faced with difficult circumstances in their lives. The aim is to stop them experiencing common mental health problems during difficult times. Funded by the Big Lottery Fund, the project has been successfully trialled in Kent over the last two years and has just received an additional £10m to deliver a third phase over the next five years.

The new funding will enable us to provide an approach that supports young people to develop their own resilience to cope with the everyday pressures they may face throughout their lives, as well as how to help each other. The programme aims to make changes through schools, families and within communities and has been designed with young people at its heart. The project objectives are to:-

- create resilient and strong communities to raise young people
- enable children and young people to have better physical and mental health

**Eligibility:-** 10-14 year olds

**Availability:-** Thanet, Canterbury and North West Kent. The new phase will start in Swale and Gravesham and, over the next five years.

Find out more about Headstart Kent in this short video:  
<https://vimeo.com/156168943> and through the following link:-  
<http://www.kent.gov.uk/education-and-children/headstart>

## Kent Portage Service – Educational Home visits

Portage is a home teaching education and support service for pre-school children who have special educational needs (SEND). In addition to home visiting, Portage also offer Playing and Learning targeted sessions for children who have social communication and interaction difficulties.

This 8 week programme is structured to support children and families, using strategies and experiences that promote shared attention and interaction. Parents are able to try out approaches in the session and then try these at home. The

sessions involve families and Portage home visitors in the session, working together to help support each child.

These sessions are run in different locations across the county depending on the number of referrals received.

**Availability:-** Portage home visiting is available all year round but not evenings or weekends. In addition to Playing and Learning, Portage also offers weekly Drop in and play groups and holds summer fun activity days for all the family in different locations throughout Kent.

**Eligibility:-** Available to children aged under 5 only. Your child must have a delay in two areas of development or the potential to have this. Portage supports children with the most complex. Priority for the Playing and Learning sessions are given to children with communication and interaction issues. Children do not need a diagnosis to access Portage support.

**Referral:-** via Early Support. Any professional working with the family can refer and families can contact the service directly and if appropriate the Portage Lead or Senior Portage Home Visitor will complete the referral form with them. An outcome from the referral could be Portage Home visits or Playing and Learning sessions.



ES Referral Form.doc

**Training:-** Portage Home Visitors are experienced early years practitioners who have an Early Years qualification and have completed the Portage Training workshop. In addition, they have Autism awareness training and PECS (Picture Exchange Communication System) training provided by Pyramid.

Further information:- <http://www.kelsi.org.uk/special-education-needs/special-educational-needs/kent-portage>

The National Portage Association has information about Portage across the country and how to contact local services - <http://www.portage.org.uk/>

## Disabled Children's Service

A specialist service of Social Workers, Occupational Therapists and sensory impairment service workers who work with children aged 0 - 18yrs with severe and profound learning, physical and sensory disabilities or a combination of disabilities. Carry out multi -agency assessments under the principles of the Children Act 1989, focusing on:

- your child's development needs
- the parents/carers' capacity to respond to those needs
- wider family support
- environmental factors

The assessment helps to inform decisions about your child/ young person's level of need and circumstances and identify appropriate services. This could include help within the home or Short Breaks (respite) for children that may include specialised social activities, play schemes, clubs or overnight residential care.

**Available:-** Monday to Friday 8:30 -5:00. An emergency Out of hours service is also available.

**Eligibility:-** the service works with children aged 0 - 18yrs with severe and profound learning, physical and sensory disabilities or a combination of disabilities. It is not available for children or young people who do not have a severe or profound learning disability in addition to their autism/those with ADHD only.

**Referral:-** people are referred through the mainstream central duty function of Childrens Social Care. Referrals can also be made directly by parents/carers or through another agency.

Further information:- <http://www.kent.gov.uk/social-care-and-health/care-and-support/disability/help-if-youve-got-a-disabled-child/how-to-get-help>

### **Specialist Children's Services / Child in Need Process**

**Section 17** of the Children Act 1989 imposes a general duty on Local Authorities to Safeguard and Promote the Welfare of Children in their area who are 'in need' and to promote the upbringing of such children by their families by providing a range and level of services appropriate to those children's needs. Other agencies have a duty to co-operate with Social Care in carrying out their duty to assess the needs of children and to provide services as necessary.

Children in Need have the universal needs of all children and more complex additional needs than those requiring an Early Help Assessment but they do not require child protection measures at this time. (See Kent and Medway Inter-Agency Threshold Criteria for Children in Need)

In order to determine the needs of a child and the support that they and their family may require, a qualified social worker will carry out a child and family assessment by a qualified social worker. The assessment will involve finding out and giving due regard to your child's wishes and feelings regarding the provision of those services (as age and understanding appropriate). The assessment will also involve talking to parents, other family members where relevant, and professionals involved in your child's life such as health visitor or school.

These procedures relate to children who meet the tier for intervention under section 17 of the Children Act 1989. To be eligible for a service children will meet the threshold as described in Kent Inter-Agency Threshold Criteria for Children and Young People.

Children who do not meet the threshold for Specialist Children's Services intervention but require more than universal services should be offered an early help assessment and support where required (see Early Help Procedures).

Children in Need procedures also apply when:

A child has a severe or profound disability or complex sensory needs and requires long term multi agency support as a result of their disability/need;  
Services are being provided to a disabled child and/or their family on an on-going basis but there are no concerns about the parent's ability to meet your child's needs and there is no need for the coordination of multi-agency services.

More information about Disabled Children and Child in Need procedures can be found by visiting the following website –

[http://kentchildcare.proceduresonline.com/chapters/contents.html#ch\\_par\\_circ](http://kentchildcare.proceduresonline.com/chapters/contents.html#ch_par_circ)

### EarlyBird and Cygnet – parent skills programme

Parent skills programmes are delivered by a range of professionals from all the agencies that work in Kent. The Parent Skills Programs which are particularly relevant for parents of children with autism are Early Bird and Cygnet. These are time-limited courses delivered by licenced trainers to groups of parents and school staff.

The Principal trainers for EarlyBird and Cygnet are Specialist Teachers and Early help workers and Speech Therapists. Training is available in every district in Kent.

EarlyBird training has been devised by the National Autistic Society and Cygnet training developed by Barnardos and is autism specific. There are other services for parents of children awaiting diagnosis, e.g. the Playing and Learning groups run by Portage for parents of pre-school children.

Families are asked to pay £30 for EarlyBird which pays for the book which accompanies the course and refreshments. Cygnet is £10 as the materials are photocopies, not a book.

**Available:-** Courses are offered during the day in term-time, approx. 3 hours each session.

**Eligibility:-** child must have a diagnosis of ASC. Limit on numbers for each group, so waiting lists are kept.

**Referral:-** Parents can apply directly

Further information:

<http://www.kent.gov.uk/social-care-and-health/health/autism-and-aspergers>

### Elective Home Education

Children and young people who are registered as being Electively Home Educated (EHE) are allocated an EHE Support and Advice Officer. They will contact the family within 10 days of the referral being received and arrange an initial visit to assess whether your child or young person is receiving an education. The officers also provide the parents with information, advice and resources that they may find helpful. They may also signpost them to other services and agencies if deemed appropriate. Officers set the family targets and conduct review visits within 6 weeks, 3 months, 6 months or yearly depending on the needs of family in question. If parents identify that they would like their child to return to school, the officers would support them with this process.

If home-educated pupils have a statement/ Education Health Care (EHC) plan, the EHE officers work alongside your child, young person's allocated SEN officer, sending them copies of visit reports which feed into the annual review process.

A number of pupils who are home-educated have SEN needs but have not been granted an EHC plan. If the parent would like to pursue an EHC plan, the EHE officer would signpost the parent to the SEN team who can advise them further regarding the process. If a pupil leaves a school to be home-educated, the school should inform the EHE team on 03000 416969 or [educationathome@kent.gov.uk](mailto:educationathome@kent.gov.uk). To open a referral we ask the school to complete an EHE1 form and provide a copy of the letter that the parents have sent stating their intention to home educate.

**Available:-** Admin are available via email/ telephone Monday to Friday, 9am – 5pm all year around. EHE officers are available via email/ telephone and to conduct visits Monday to Friday, 9am – 5pm term time only

**Eligibility:-** There are no restrictions on eligibility for this service, other than the fact the pupils will not be registered until they reach statutory school age. This is a universal service however any child or young person who has an EHC plan which names a school should receive SEN panel approval to home educate

Pupils can register as EHE post statutory school age (into Y12 and Y13).

**Referral:-** Parents can notify the team themselves as well as other services including Health and Social Services (who often come via your children Missing Education Team).

## Kent Educational Psychology Service

The Kent Educational Psychology Service (KEPS) works with children and young people up to the age of 25 years. It provides statutory services for the local authority. This includes psychological advice provided as part of the statutory assessment process, some consultation at Local Inclusion Forum Team (LIFT) meetings for individual children and young people and crisis support for schools. KEPS also offers psychological services on a traded basis through a service level agreement with schools or on a 'pay as you go' basis.

**Available:-** Monday to Friday

**Eligibility:-** Work is commissioned either by the LA as part of the statutory assessment process or by schools as part of a traded service level agreement.

**Referral:-** Request for Educational psychology involvement comes directly from the Local Authority Special Educational Needs Department or through your child's or young person's school, setting or college.

Further information:

[http://www.kelsi.org.uk/pupil\\_support\\_and\\_wellbeing/targeted\\_support/educational\\_psychology.aspx](http://www.kelsi.org.uk/pupil_support_and_wellbeing/targeted_support/educational_psychology.aspx)

[http://www.edukent.co.uk/educational\\_psychology](http://www.edukent.co.uk/educational_psychology)

### **Kent Health Needs Education Service**

The Kent Health Needs Education Service provides:  
an education support service to schools for young people with physical medical conditions; and an education outreach service for young people with mental health needs, located in six resourced bases and a specialist residential unit

Kent Health Needs Education Service placements range typically from 6 to 18 weeks and can provide the following:

#### **Stage Offer**

- 1.** Generic school support, training and advice on understanding and dealing with different diagnoses:  
planned training schedule available  
additional bespoke at a cost to the school
- 2.** Advice and guidance on specific individual concerns:  
phone consultations on individual cases  
advice on available services and access to them  
triage, referral support, linked with EYHPs
- 3.** *Referral to service required from this point*  
Bespoke programmes of support including:  
school visits  
attendance at Multiagency meetings  
cross titration support  
e-learning/school based tuition  
outreach tuition – in school/hospital  
support with risk assessments  
modelling approaches  
part time hub placement with re-integration plan
- 4.** Bespoke programmes of support including:  
full time attendance at hub with re-integration programme  
Learning/ Home tuition (physical medical e.g. oncology)

## 5. Oakfields – residential short term placement

**Eligibility:-** The following are accepted as criteria for admission, although each individual case will be considered carefully:

- medical needs are such that the young person has missed 15 consecutive days of schooling.
- the young person's health has significantly reduced their ability to access their home school and this is reflected in their attendance record.
- a senior medical professional (such as a consultant, CAMHS practitioner etc) is providing support, diagnosis and/or advice. This applies to pupils whose cases are managed by hospitals within Kent as well as in more specialist hospitals in London and across the country. (note: GP referral is not sufficient)
- a change of medication may mean the young person requires increased medical review, intervention, support or flexibility to allow them to attend education.
- an acute mental health condition is disrupting the young person's/child's ability to attend school.
- a young person has been discharged from tier 4 CAMHS services and requires on-going support before re-integration to school.

The service **is not intended** for young people with Autism and ADHD, these are not considered a health need. These needs would usually be met within schools through either SEN support or an EHC plan.

However, a significant proportion of young people who access the service do have ASC and are accessing due to a secondary Anxiety disorder caused by their ASC.

**Available:-** School term time

**Referral:-** School or other professional

Further information:- <http://www.kelsi.org.uk/pru-inclusion-and-attendance-service-pias/pupil-referral-unit-and-alternative-provision/kent-health-needs-education-service>

<http://www.khnes.kent.sch.uk/>

## **Young Healthy Minds – Incredible Me**

The aim of the Incredible Me programme is to support children and young people with an ASC diagnosis to:-

- Decrease negative feelings and increase positive feelings in their daily life.
- Identify situations that make them anxious and learn how to perceive the situation differently thus reducing their level of anger.
- Support them to recognise connections between thinking and feeling (CBT techniques) so that they are able to identify the physiological effects of different emotions in their body.
- Focus on their positive attributes and the things that make them happy.

- Understand a range of relaxation strategies, embedding Mindfulness techniques throughout the programme

We request the full commitment of the parent/carer to attend a pre-engagement and a review session in order to provide a holistic offer of support. The school is also invited for their input and strategies are provided to support your child during lessons where appropriate.

**Eligibility:-** Children and young people aged 5-11 with a diagnosis of ASC. Must be able to engage well on a 1 to 1 basis. The programme is for children who do not meet the standard Young Healthy Mind criteria due to behavioural difficulties and / or emotional regulation due to an ASC diagnosis

Parents/ carers are required to meet with the worker prior to session starts to complete session tasks.

**Available:** Monday – Friday, 9.00am to 5.00pm

Incredible Me is a **programme offer within** the Young Healthy Minds service – capacity to offer Incredible Me is limited to 1 case per worker on case load at any time. The service has 22 Full time staff across Kent.

**Referrals:-** made through an Early Help Notification

The Kent Family Support Framework (KFSF) is the model used by Early Help and Preventative Services (EHPS) in Kent to support families

Further information: <http://www.liveitwell.org.uk/recovery-resource/young-healthy-minds/>

## Short Breaks

**Service:-** Some disabled children can go to activities with other children such as Beavers or Brownies, or to their local council summer play scheme, and do not need any extra help provided. Short Breaks services are for those disabled children who need extra support to be able to join in with other children.

Short breaks services are aimed at families with a disabled child. This is because of the extra effort and stress that being the parent of a disabled child can bring.

The term Short Breaks is used to cover the following services and activities:

- Short Breaks
- Family Day/Short Breaks
- Short breaks activities
- After School Clubs
- School Holiday Clubs
- Domiciliary Care Agencies

Types of short breaks in Kent include:

- Weekend clubs during term time
- School summer holiday clubs
- Overnight stays (with an approved foster carer or in a residential unit)
- Daytime stays (with an approved foster carer or in a residential unit)
- Support in the home.

Some short break activities in Kent are specifically aimed at meeting the needs of disabled children and young people. These are sometimes called targeted services. This group of services includes play schemes and clubs run by charities or volunteers. See page 42 in this document for details of how to access information on providers of the schemes.

IMAGO have been commissioned by KCC to provide short breaks/clubs and activities across the county. Further information on the services they offer can be found at the following link:-

<http://www.imago.community/Young-People/Short-Breaks-Service>

Some short break activities in Kent are specifically aimed at meeting the needs of disabled children and young people. These are sometimes called **targeted services**. This group of services includes play schemes and clubs run by charities or volunteers and Kent County Council supports these organisations with grants.

You don't need a social worker to refer your child to these services - you can approach them directly. However, they may have their own criteria that you will have to meet.

There are a small number of disabled children and young people who have needs that require a lot of support to be able to have a short break. These might be children with complex health needs, or behaviours that challenge services. Activities for these children are sometimes called **specialist services**.

The specialist services provided are:

- overnight stays in a residential unit
- short stays with an approved foster carer
- specialist school holiday play schemes
- term time fun clubs •direct payments (a way of funding families to make their own short break arrangements)
- personal health budgets (like a direct payment, but for meeting health related needs).

**Referral:-** To get any of these specialist services you will require an assessment of need by a social worker or health care professional. If the assessment shows that this is the right kind of service for your family, you will then need to be referred by a professional.

Some families who are eligible choose to have a direct payment instead of a service provided by KCC – <http://www.kent.gov.uk/social-care-and-health/care-and-support/paying-for-care/paying-with-direct-payments>

**Eligibility:** Available for children and young people aged between 5 and 25.

**Further information -**

<http://local.kent.gov.uk/kb5/kent/directory/help.page?localofferchannel=0>

<http://www.kent.gov.uk/education-and-children/special-educational-needs/help-if-youve-got-a-disabled-child>

### **Family Parent Support Groups**

**Service:** KCC has funded the Kent Parent Driven Consortium Charity in Kent to provide a number of family activity days and parent support groups across Kent. These provide opportunities for families to come together with other families of disabled children including those with ASC. The Consortium also support a range of other local charities through grants to enable them to offer support groups to parents, carers and siblings.

**Available:** available in all districts of Kent at regular intervals throughout the year.

**Eligibility:** open to any family of a disabled child or young person

**Referral:** self referral

**Further information:** More information can be found in the Kent Local Offer pages where you can search for family events and support groups in your area  
<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

Siblings of those with ASC often act as young carers and may need support themselves. Kent County Council has purchased a Young Carers Service to offer support to all children and young people who are young carers for siblings or parents with a disability. This is provided by Imago.

Further information can be found at: [www.imago.community/kent-young-carers](http://www.imago.community/kent-young-carers)

### **Further support, information and advice**

A wide range of early intervention support and support for children diagnosed or undiagnosed is available across the County from a range of private, local authority, health and voluntary agency providers.

The different types of support have been categorised below. Copy and paste the relevant link into your browser to get further information.

<b>Support category</b>	<b>Website link</b>
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**Parent/Carer Support :-**

Help if you have a disabled child

<http://www.kent.gov.uk/education-and-children/special-educational-needs/help-if-youve-got-a-disabled-child>

**Sibling Support – information on support networks and advice for siblings of children and young people with autism**

<http://www.autism.org.uk/global/content/search%20results.aspx?q=sibling%20support>,

Support for Carers

<http://www.kent.gov.uk/social-care-and-health/care-and-support/caring-for-other-people/support-for-carers>

<http://local.kent.gov.uk/kb5/kent/directory/results.page?adultchannel=16>

Caring for other people

<http://www.kent.gov.uk/social-care-and-health/care-and-support/caring-for-other-people>

A break from caring

<http://www.kent.gov.uk/social-care-and-health/care-and-support/caring-for-other-people/a-break-from-caring>

Local carer organisations

<http://www.kent.gov.uk/social-care-and-health/care-and-support/caring-for-other-people/local-carer-organisations>

Activities and events

<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

Advice and support

<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

Respite care and short breaks - providers

<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

Health and wellbeing

<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

Education/College

<http://local.kent.gov.uk/kb5/kent/directory/results.page?youthchannel=6>

Special schools and SEN units

<http://local.kent.gov.uk/kb5/kent/directory/results.page?localofferchannel=0>

<http://www.kent.gov.uk/education->

Training and Employment

[and-children/special-educational-needs/school-information-for-special-educational-needs-sen](#)

Advocacy

[http://www.kent.gov.uk/social-care-and-health/care-and-support/disability/advocacy](#)

Peer Support Groups

[http://local.kent.gov.uk/kb5/kent/directory/results.page?youthchannel=7&qt=support+groups&term=&sorttype=relevance](#)

Help at Home

[http://local.kent.gov.uk/kb5/kent/directory/results.page?adultchannel=1&qt=disability&term=&sorttype=relevance](#)

Accommodation and Housing – supported housing; housing and care homes

[http://www.kent.gov.uk/education-and-children/special-educational-needs/becoming-an-adult/supported-housing](#)

Finance and benefits – information on disability benefits such as Disability Living Allowance and Carers Allowance

[http://www.kent.gov.uk/social-care-and-health/care-and-support/housing-and-care-homes](#)

Transport

[http://www.kent.gov.uk/social-care-and-health/care-and-support/benefits](#)  
<https://www.gov.uk/disability-benefits-helpline>  
[http://www.kent.gov.uk/search?mode=results&queries keyword query=transport](#)

Travel Training

[http://www.kent.gov.uk/education-and-children/special-educational-needs/school-information-for-special-educational-needs-sen/school-transport-for-children-with-special-educational-needs/travel-training](#)

Disabled person's bus pass

<http://www.kent.gov.uk/education-and-children/special-educational-needs/school-information-for-special-educational-needs-sen/school-transport-for-children-with-special-educational-needs/disabled-persons-bus-pass>

Transport for SEND (Special Educational Needs and disability)

<http://www.kent.gov.uk/education-and-children/special-educational-needs/school-information-for-special-educational-needs-sen/school-transport-for-children-with-special-educational-needs>

Childcare

<http://local.kent.gov.uk/kb5/kent/directory/results.page?childcarechannel=0>

Pre-school

<http://www.kent.gov.uk/education-and-children/childcare-and-pre-school>



## Autism Pathway - Conclusion

This document is intended to act as an initial guide to provision in Kent and is focused on children and young people with high functioning ASC.

Further guidance on the pathway for adults aged 18+ with ASC has been developed as a separate document.

