

Provision Grid for Autism

Whole School Approaches

- ✓ Quality First Teaching meets the needs of all children
- ✓ SENCO as strategic lead with sufficient time to implement the Code of Practice
- ✓ Inclusive ethos that supports learning and wellbeing of all children
- √ Access to ELSA
- ✓ 'Team around the child' approach e.g., consistent language, approaches/strategies
- ✓ Positive relationships with staff and children within school
- ✓ Pupil and parent/carer voice are valued and used to inform provision that is regularly reviewed
- ✓ Whole school approach to robust transition arrangements.
- ✓ Mixed ability or flexible groupings.
- ✓ Use of reasonable adjustments.
- ✓ Communication Friendly Classrooms.
- ✓ Early identification of need.
- ✓ School purchases the traded service through Speech and Language Therapy Communication Offer
- ✓ Training for practitioners Leeds Community Healthcare NHS Trust, and bespoke training for individuals through Traded Service.
- ✓ Use of Leeds Community Healthcare Speech and Language Toolkit.
- ✓ Whole school approach around the use of visuals.
- ✓ Whole school Autism Awareness training undertaken.
- ✓ Autism Lead Practitioner in place (SENCO)
- ✓ Teaching of neurodiversity embedded in PSHE curriculum.
- ✓ Positive home-school relationships.
- ✓ Sensory room (NEST).
- ✓ Awareness of executive functioning and how it may impact learning and social experiences.
- ✓ Positive behavioural management systems incorporating restorative practice and intrinsic rewards.

Staff Expertise

Majority of staff are L1 Makaton trained.

Nursery Manager is L2 Makaton trained.

Key staff trained in Intensive Interaction.

Key staff trained in Lego Therapy.

All staff L1 Autism trained.

1 x teacher and 3 x TA L2 Autism trained.

SENCO L3 Autism trained (who attends termly Lead Practitioner training sessions)

2 x teachers trained in the Autism Progression Framework.

All staff receiving training for Leeds Communication Friendly School Standard.

NHS Speech & Language Therapist on site fortnightly.

	Assess	Plan & Do	Plan & Do	Review
	[pupil needs]	[strategies & intervention]	[resources]	[progress indicator]
Universal (Quality First	Whole school assessments – attainment, engagement and	Transparent, consistent timetable providing predictability and routine. This should include	Objects of reference.	Quantitative - attainment and progress data.
Teaching)	behaviours presented/communicated,	forewarning of change wherever possible.	Range of visual Supports:	Qualitative - using
	attendance. Identification and celebration of	Individual Provision Map (IPM) outlining strengths, barriers and reasonable adjustments.	1.Whole class timetable consistent throughout school.	observation, staff/pupil/parent views and pre and post data to
	pupil's strengths.	Pupil Voice systems: Talking Mats; Sensory Checklists; emotional regulation resources etc.	2. Use of task boards/steps to	evidence improvement in:
	Awareness of pupil's wider profile (autism might not always be the primary need).	Use of 'A Quick Guide to Autism'	success. 3. Choosing boards.	Increased participation and engagement.
	Awareness of and positive response to a pupil's masking	Use of sensory checklist and pupil voice to provide opportunities to access personalised sensory accommodations E.g. movement breaks, use of	4. Individual timetables.	Retention of key concepts and skills.
	profile.	sensory aids, access to low arousal spaces.	Support to develop their preferred multimodal	3. Independence.
	Sensory checklist.	Curriculum differentiation and curriculum linked to CYP interests.	expressive communication for example; symbol exchange	Applying and generalising new skills to
	Parent/Carer Voice and Pupil Voice to support identification of strengths and barriers.	Adjustments to lunch time and playtime expectations and routines e.g., structured games, small group alternatives, quiet space to eat lunch.	systems, non-verbal communication.	unfamiliar contexts. 5. Improved confidence and
	Use of AET Assessment & Progression Tool for identified	Support for transitions between activities throughout	Intensive interaction	self-esteem.
	areas of need.	the day, using visual tools.	Staff to integrate visual supports into their	Positive response from pupil and parent/carer
	Language assessments.	Support to carry out self-care routines and expectations E.g. use of identified toilet.	communication; cue cards, timetables, Makaton symbols.	voice.
	Wellbeing and engagement assessments.	Quiet space for time away from demands.	Range of resources/media to	7. Improvement in peer relationships.
		Whole school approach for Emotional Regulation	promote independence. E.g., sand timers/alarms/checklists.	Pupil feels more confident and
		Opportunities for providing choices.	Social Interaction support	comfortable in setting environment.
		Support with developing peer relationships using the voice of the child.	systems - Leeds Community Healthcare NHS Trust - Social Skills and Interaction. Social Stories and Comic	Pupil demonstrates increased levels of independence utilising
			Strip Conversations.	the support systems and

		Chunking information Time for processing General Adjustments Environment Flexible groupings or seating arrangement Use of name at start of instructions	Emotional Regulation – access to training through STARS. Support communication differences through double empathy approach. Use of restorative visuals.	strategies to which they have access.
Targeted Work	Formative and summative assessment identifies strengths and barriers in the following specific skills such as: 1.Receptive skills/ understanding of language. 2. Expressive language. 3. Speech sounds. 4. Social skills/ interaction/ play. 5. Phonological awareness. 6. Attention & listening. Use of Leeds Speech and Language Therapy Guidelines for referral.	High quality inclusive environment and teaching which takes into account the AET environmental checklist. Small group time - limited interventions, designed to increase progress in particular areas/ goals. Strong links with classroom provision and learning – opportunity to put into practice learning from intervention time. Agreed monitoring schedule for targeted sessions. Explicit links made between QFT and planned opportunities to apply taught skills. Reasonable adjustments in place and planned for, E.g. personal workstation, visual timetable.	Sensory circuit-based activities according to the needs of the individual. Friendship and interest Groups. LEGO Based Therapy Groups. Pre-teaching strategies. E.g. vocabulary. Subject specific intervention, see reading/ writing/ maths provision grids. Alternative activities flexibly available, E.g. special interest time. Specific interventions/support linked to three areas of difference, E.g. zones of regulation, sensory circuits.	Review progress against baseline and intervention outcomes. Pupil and parent voice informs support to promote increased wellbeing and engagement for example; talking mats and RAG rating.

Personali sed

Refer to specialist assessment and follow advice from outside agencies. For example: SENIT, Educational Psychologists, STARS team, Speech and Language Therapist, Occupational Therapist.

AET Progression Framework and Finely graded assessment tool: Progression Steps (B Squared) alongside the use of the pre-key stage standards where appropriate. Or for pupils in EYFS and the autumn term of year 1, the use of the finely graded assessment tool of SENIT Developmental Journal

All key staff have access to and read specialist reports relating to individuals.

Child and parent voice is collected regularly and impacts provision.

Access to low arousal personalised work area.

Sensory circuits and appropriate to the child, E.g. movement breaks, classroom sensory resources, sensory room.

Specific diagnosis awareness and acceptance work.

Implementation of specialist advice and support, E.g. STARS, Speech and language therapy.

Therapeutic, one to one session such as play therapy and intensive interaction.

Symbol Exchange Communication Approach (SECA) using Makaton symbols where suitable.

Visual supports appropriate to child.

Personalised Curriculum, E.g. life skills curriculum; project-based approaches; Reference to AET Progression Framework; BSquared (autism specific).

Personalised Transition Plans/Planning.

Adjustments to Healthy Schools Policy, E.g. allowing child to bring in preference food items to meet sensory needs.

Access to specialist therapies: Occupational Therapy; Physiotherapy, continence team and dietitians.

Advice in specialist reports integrated into planning.

Sensory Circuits:

- 1.Sensory Circuits: A Sensory Motor Skills Programme for Children By Jane Horwood.
- 2. Bespoke training from the Learning Inclusion Service on Sensory Circuits.

Counselling:

- 1. The Market Place A dropin centre for young people offering advice and counselling on a range of subjects affecting young people (themarketplaceleeds.org.uk).
- 2. MindMate Emotional wellbeing and mental health.
- 3. Local cluster support

Speech and Language sessions:

Leeds Community Healthcare NHS Trust - Social Skills and Interaction.

Therapeutic:

- Intensive Interaction -Fundamentals of Communication.
- 2. Resources | NHS GGC.
- 3. LCH Occupational Therapy (ICAN) (leedscommunityhealt hcare.nhs.uk).

Refer to universal and targeted review progress indicators, in addition to personalised outcomes.