

## Autism Accreditation Assessment

### Willow Dene School

Reference No.	
Assessment dates	24- 27 May 2021
Lead Assessor	Hannelore Bout
External Moderator	Jonny Knowles
Status prior to the assessment	Accredited
Advanced status applied for	yes

## Section 1: Context

### About the Provision

**Brief description of the provision made for autistic children:**

"Willow Dene School is a generic, special school that supports children with complex needs, ASD and medical needs.

The school has 22 ASD classes across the school, 2 of which opened this Easter."

The school moved into a new build school in September 2015, the new secondary provision Oakmere opened in September 2016.

**Number of autistic children supported by the provision:**

178 out of 270 children on roll are diagnosed with autism

**Range of autistic children supported by the provision:**

Willow Dene meets the needs of children aged 2-16. Children have a wide range of special educational needs.

**Outcome of last statutory assessment:**

Ofsted Rated Willow Dene School a good school in December 2019

"There is enough evidence of improved performance to suggest that the school could be judged outstanding if we were to carry out a section 5 inspection now."

### About the Assessment

- The assessment took place over four days.
- The provision's adviser acted as an assessor with support from a moderator
- A presentation was given on how provision for autistic children is made.
- 19 lessons were observed by the assessment team. These included a range of classroom-based activities; playtime and mealtime.
- Discussions were held with SLT, teaching staff and therapeutic staff.
- 4 family members spoke with the assessment team via phone during the assessment.
- Personal files were sampled across each key stage.
- Some key policy documents provided by the provision were read.

- The results of surveys carried out with 40 families were also considered and are found in the appendix to this report

## Professional Development and Support for Staff

### **Main approaches or methods employed by the provision in supporting autistic children:**

- SCERTS
- TEACCH
- PECS
- Attention Autism
- Visual supports and timetables, using Objects of Reference, photographs or symbols
- Topic Boards, Social Stories, Intensive Interaction, AACs
- Sensory diets/ circuits, Alert programme, Musical Movement, Making Food Fun group

### **Training and professional development staff receive in these approaches and in their understanding of autism**

New staff receive an induction booklet with topics to learn, which are discussed and signed off with their line manager.

- The ASD lead signs off ASD awareness; communication; behaviour management; sensory processing.
- The class teacher signs off Transitions using a timetable; Awareness of PECS and communication systems; TEACCH; work stations and works systems; behaviour profiles, risk assessments; and Assessment overview including learning journeys.

Additional training, alongside the mandatory training, is also available to staff during this period based on the needs of the children, the class team or the individual's passion/interests. Teaching staff within the ASD classes also have access to external PECS and TEACCH courses.

### **On-going support available to staff in working with autistic individuals**

There is a robust appraisal system in place which supports staff to identify individual and whole school developmental needs. Training is strategically planned based on the needs of the staff and children. The appraisal system ensures that staff reflect on their ASD practice and identify areas for development at an individual, class or whole school level.

Staff feel well supported and have opportunities for further development within the school based on their career aspirations. The school has supported the staff to further develop through access to Masters qualifications, degrees, schools direct, apprenticeships, and LSA qualifications.

There is progression available to staff at school, supported and facilitated by the SLT. The school are an "enabling" employer who "invest in the children who work there".

Opportunities are provided for staff to work together, in their staff teams and as a whole school. "The school are aware of children's strengths and let you focus on your passion/area of interest."

## Section 2: Findings from Assessment

### Personal Centred Planning

#### **Brief description of how individual support is planned, implemented and evaluated:**

- There is a robust transition process that is bespoke to the child's specific needs and their family and includes visits to the child's current placement as well as home visits.
- The school develops bespoke transition plans in collaboration with professionals and parents, including stay and play sessions, half-day timetables, full-day timetables, or many other variations so that the child can feel safe and secure during their initial transition.
- An individual support plan is put in place for the child which is regularly reviewed and evaluated.
- Case studies evidenced during the assessment confirm the schools' collaborative approach with internal and external professionals to ensure holistic and wrap-around support is provided to the child and their families.
- The school developed and designed their own assessment system around 2011 to best assess and plan to learn to get the best progression for the children of Willow Dene school.
- The school's progression framework supports staff in their delivery and implementation of the curriculum.
- Evidence for learning highlights the children target areas alongside areas where more evidence needs to be collected. This ensures that targets are generalised before being marked as completed.

### Differences in Social Communication

#### **Key outcomes identified from personal support documents and staff discussions:**

The school has the support of 2.2 full-time equivalent of SaLT, who support the school predominantly at a universal and targeted level within the school and classes, training and upskilling staff members. Specialist support is given on a referral basis. Some children will get referred to the SCERTS or AAC clinics, where they are assessed in more detail and receive additional interventions.

The Communication Passports identify each autistic child's communication skills, communication methods, and how staff can modify their communication. These documents provide the right level of detail and are reflective of practice.

The school believes in learning through play and has an outdoor learning co-ordinator as well as a play and leisure subject lead who oversee outdoor play areas, activities, resources, and communication.

PLPs and evidence for learning stores evidence that each child is set realistic goals related to their communication and social engagement, and care is taken that skills are tracked before marked as generalised. Examples are, " within familiar routines a child is able to use their communication system, to request a single item ", developing communication skills to express their feelings using a topic board or developing social skills in small group games.

Evidence for Learning, EHCP annual review reports and PLPs provide evidence that the autistic child progresses in their social interaction and communication, meeting set goals or successfully taking part in a social activity. Including learning children's names and learning to greet children in the proper context, learning to take turns within a group for about 15 minutes, or requesting more of the things that are liked.

In interviews and case studies, staff describe how they have supported autistic children in their communication and social engagement and achieve positive outcomes. Such as progressing in PECS levels, or learning to express their feelings, learning to take turns, or "x begins to sing the 'car crash' song to signal that he wants it to start, then fills in the gap for 'crash' at the appropriate time."

**Key outcomes identified from observation/review of key activities:**

Within all observations, staff were making themselves understood by using a range of approaches, including simplified verbal language, Makaton, visual supports and modelling.

In a small number of observations, staff should reduce their language when making demands or giving instructions.

During all observations, children were able to make themselves understood using their preferred communication method, identified on their communication passport. During all lessons, children communicated either verbally, or by using their PECs, AAC devices, communication boards, or other differentiated visual supports. Where best practice was observed, staff used naturally occurring opportunities within classes to model, support and facilitate the development of communication. Ample processing time was given across all lessons. Staff were not in a rush.

Outstanding practice was observed throughout all observations children, have ownership of their individualised communication systems across the school which are clearly differentiated based on the children needs and reflect the information within the communication passports.

Within all observations, staff provided opportunity and purpose for pupils to communicate and interact with staff and their peers. There are a variety of opportunities for children to practice and develop social communication with staff and peers which were carefully planned into the lessons. Staff are responsive, nurturing when required and playful with children, instigating games, turn-taking, intensive interaction etc.

## Problem Solving and Self-reliance

### **Key outcomes identified from personal support documents and staff discussions:**

Each child has access to their preferred mode of communication and PECS, Communication Books and topics boards, are in constant use.

Communication Passports identify each autistic child's skills and challenges in independent functioning and describe how best to support them in their independent functioning. They use a now and next board and timetable to assist with transitions, making choices using topic boards and symbols.

PLPs and Evidence for Learning provide evidence of realistic goal setting for each student, related to their independent functioning and achieve positive outcomes in carrying out activities and making choices with increasing self-reliance and autonomy. "Expressing thoughts, opinions, feelings and ideas" are broken down into smaller steps such as "labels photographs or pictures using speech/ symbols to describe emotions of others and themselves" linked with video evidence or "To attend sessions such as numeracy, literacy and enrichment subjects of around 15 minutes."

In interviews and case studies, staff describe how they have successfully supported autistic children in becoming more self-reliant and making decisions. Such as progress in choice-making, transition into school assisted through music therapy or progressing from mutual to developing self-regulation skills.

### **Key outcomes identified from observation/review of key activities:**

Throughout all observations, pupils could work out what they must do now and next with support from a wide range of differentiated strategies and schedules. Bespoke systems are in place, supported by a clear visual structure, to aid transitions and independence.

In almost all observations, best practice was observed, transitions were carefully and consistently signposted to the children using their individual communication systems and countdowns.

Within almost all observations, staff were observed supporting children to participate or to do things by themselves through modelling, hand over hand, showing and encouraged children to have a go independently. There was clear differentiation using the TEACCH work stations – some had one activity whilst others had four. Staff gave children plenty of time to process and praised them when children completed the instruction.

Within all observations, staff were observed promoting choice and providing opportunities for children to express their opinion or make decisions. Choice activities are planned into the various stages of the lessons and focus on both communication and snack sessions. In some classes, children were confident and independently communicating they needed to use the facilities and did so with little or no assistance.

In one observation, where best practice was observed, staff effectively used sabotage to provide opportunities for the development of problem-solving whilst requesting snack.

Within all observations, children were provided with opportunities to consolidate and develop daily functional skills. Staff effectively used open questions to gauge understanding and promote road safety and independence skills. In all lessons, where best practice was observed, creative, playful and sensory motivating resources were used to great effect, engaging children, bringing lessons to life and consolidating skills. In one observation, staff effectively used Attention Autism to structure the lesson and teach the children functional skills.

Where practice could be improved; Covid 19 restrictions have halted the organisation of the "communication shed" and resources in the play areas. Although children bring their communication systems to the playground, they are deposited on arrival. Some staff use their keyrings to assist communication. The school could consider reviewing the use of the portable communication systems available to children outside of the classroom to promote expressive language and formalise transitions at the end of play.

## Sensory Experiences

### **Key outcomes identified from personal support documents and staff discussions:**

The school has two days of Occupational Therapy support, a full-time Sensory processing coordinator, assisted by a sensory processing assistant for two days a week, both supporting the school with the implementation and development of sensory processing across the school.

The school's knowledgeable and passionate Sensory Coordinator works alongside the therapy teams to provide both universal and targeted support to staff, children and families. The school's in-depth analysis of children's sensory needs enables staff to understand and implement bespoke individual plans of support, such as sensory activity programmes that are shared with home, sensory box activities

Individual sensory observations provide evidence that autistic children achieve positive outcomes related to experiencing and regulating sensory input. The school uses environmental checklists to monitor each classroom environment regularly.

In interviews and case studies, staff describe how they have supported autistic children in their sensory regulation and helped them achieve positive outcomes through intensive support and collaborative work with teams and home. Many children are at the social or language partner stage. The school uses the alert programme to help them understand their sensorimotor preferences through the "how does your engine run programme".

**Key outcomes identified from observation/review of key activities:**

Careful consideration has been made to the whole school environment to ensure low arousal and structure. The school has good outdoor facilities with many different play zones including, a sensory garden, sports areas, trampolines, and a large forest school area. At Oakmere, there is an extensive range of flexible sensory spaces across the school, including a Lightroom, dark room, climbing walls, soft play, outside area. The Early Years hall offers a wide variety of sensory activities.

The amount of sensory stimulus within each classroom differs depending on the needs of the children. All information displayed was seen to be both purposeful and functional in almost all classrooms.

Within almost all observations, children were observed to be offered sensory activities with support from staff. There is a wide variety of sensory activities within their classroom, as part of the learning or their outside area. They were seen to access these throughout observations independently.

Autistic children tolerate a wide range of sensory experiences within a safe and secure context. In all observations, sensory engaging and motivating activities were used creatively to support learning.

Outstanding practice was observed, where autistic children are encouraged to enjoy the challenge of trying out, learning, exploring and choosing new experiences, such as spraying water, planting seeds, going through tunnels or meeting a snail. On some occasions, children were offered a choice of sensory experience as part of the lessons.

Within all observations, children were supported to regulate sensory experiences which interfere with what they are trying to do or cause them discomfort. Children were offered access to highly differentiated resources such as; ear defenders, request for time out, work stations, low arousal approaches, chew toys, weighted blankets, weighted or bear hug jacket, special seating, vibrating pillows, etc. Music was used to calm or alert the environment to good effect, supporting the learning activities.

## Emotional Well-being

**Key outcomes identified from personal support documents and staff discussions:**

The school works on the principle of "see behaviour, think sensory". The Sensory team is actively involved in monitoring and planning to make environmental adjustments and monitor well-being. The school works collaboratively with therapists and health practitioners, who often run in-house clinics. The school uses adapted elements of the Alert programme, "How Does Your Engine Run", to help children begin to understand their emotions.

Communication Passports starts off with a child's likes and dislikes and a section with "my yes; I will take what is on offer. I will smile. I also make a sound like 'nay' – this means 'Yay!'" and "my no: I will shake my head, grumble and scowl at you. I will hide my face in my hands and cover my ears." This document highlights all the crucial

information on how best to support autistic children in maintaining their well-being and avoiding anxiety, stress or upset. It will also highlight if a child has a plan or profile for behaviour and will detail descriptions of key behaviours, triggers, preventative strategies, early intervention, and adult intervention.

Incidents are monitored by the ASD Lead, who works closely with the class and intervention teams to analyse patterns that feed into the behaviour profiles. Some students have behaviour logs, which inform behaviour profiles and interventions. The school has two advanced TeamTeach trainers who support the team and train staff. All leaders are allocated to mentor and provide additional support to 3 classes.

The Sensory coordinator runs "Make food fun groups" supporting children's eating needs due to sensory difficulties, tolerating a limited range of foods or avoidant and restrictive eating. These food sessions follow a sensory approach with input from therapists and the dietician.

In interviews and case studies, staff describe children's support and positive outcomes in terms of emotional well-being and happiness. For example, being able to label how they are feeling themselves and how others are feeling by using pictures and Makaton. Or another child who became withdrawn at home and school coming back out of his shell with the help of an intensive holistic support package including music therapy, Speech and Language Therapy, Occupational Therapy and the SCERTS approach. Case studies show children responding well to intensive support programmes, reducing reportable incidents and becoming more engaged with learning.

The school likes celebrating achievement and have moved achievement evenings online onto their YouTube channel; three children won a Jack Petchey award this year.

**Key outcomes identified from observation/review of key activities:**

Within almost all observations, pupils presented as being happy, relaxed and content. The school provides a consistently calm environment, setting an appropriate pace for learning, children felt safe and secure in their relations with adults.

Proactive and preventative strategies are in place to avoid anxiety, confusion or distress from occurring or escalating. Where autistic children appeared to be finding it difficult to regulate, staff were observed to address the pupils needs with preventative and proactive strategies, based on information found within the documentation. One lesson was observed where children were supported to understand and regulate their emotions. Children clearly enjoyed showing their happy or excited faces in the mirrors. Where best practice was observed, in almost all observations staff really know the children and the function of their behaviour. Staff were seen to support children with proactive and preventative strategies when they observed a change in behaviour. For example, one child was finding it very difficult within the classroom, staff supported the child to have a movement break outside. When they returned, they engaged with the work. In another class staff used scripts to re-enforce good choices.

In a small number of observations where children showed signs of dysregulation outside the classrooms, staff missed opportunities to recognise behaviour as a form of



communication and instead of helping the child understand and regulate emotions they were told to stop a behaviour instead.

Autistic children are treated with dignity, status and respect and are provided with meaningful positive feedback to boost confidence and self-esteem. During all observations, pupils were encouraged to experience completion and achievement reinforced by staff through positive feedback using visual supports. Lots of praise was offered throughout. In one observation, best practice was observed: Staff supported children to self-assess their work and celebrated success using child's individual communication systems.

Staff and pupils have clearly developed positive and trusting relationships, which was evident through lesson observations, discussions with staff and pupil documentation.

All lessons were seen to be fun, engaging and interactive. Where children started to lose focus or find it hard to maintain their attention, staff were quick to step in with strategies of support or reassurance.

Where best practice was observed, lessons were made fun by adding highly sensory captivating or motivating activities.

Autistic children are encouraged to enjoy the challenge of trying out or learning a new activity or skill. Where best practice was observed, autistic children are encouraged to enjoy the challenge of trying out, exploring and choosing new experiences through sensory motivating and fun activities such as; spraying water, planting seeds, painting lava, going through tunnels or meeting a snail.

### **Consultation with Autistic children**

- The school aims to meet the needs of each individual child and facilitates this by offering bespoke communication tools to facilitate Child Voice.
- The school has two school councils based at the primary and secondary site. Both hold termly meetings. In Primary school all children are involved in class-based sessions. "a School Council week is held in which each class has the opportunity to access the agenda and resources to discuss and vote on important decisions."
- In the Secondary school an elected member from each class attends the termly meetings, where they discuss events, changes and additions.
- To develop the school's curriculum, the school regularly gathers the children's opinions and aspirations. The school's student council also supports the development of the curriculum offer across the borough, feeding back and attending meetings to shape borough-wide practice.
- Key Stage 3 students have their own blog where they post updates on things they like to do, thoughts or achievements, such as careers week, a visit from the police or making rosemary and thyme Oils that can be purchased as part of an enterprise project.

## **Consultation with families of Autistic Children**

- The school has an open-door policy.
- An on-site family support advisor and health support advisor help families with signposting and accessing services and concerns and "bridge the gap between school and family life."
- Parents are consulted when targets are reviewed and updated.
- All children have a home school contact book, which the class team update at least 3 times a week; parents reported that these are completed regularly, and the school is also in regular contact via telephone or email. Staff said that importance is placed on developing positive relationships with parents to ensure a collaborative approach.
- The school has a dedicated family room called the Courtyard room.
- Parents reported frequently attending the coffee mornings, courses or achievement evenings recently shared via the school's YouTube channel.
- The school offers ASD workshops for parents delivered by team members on communication, sensory and behaviour. The school also invites outside organisations to run courses for parents such as Citylit college, Mencap and Cerebra.
- The school offer a short breaks service, with Saturday clubs and two-week play schemes during the summer holidays for primary aged children. Also, working collaboratively with external agencies who provide after school activities, who liaise with staff to make sure they use similar strategies with the children.
- The school holds an annual parent survey which results in an action plan; the Spring 2021 survey was focused on the Covid-19 response within the school and received a positive response.
- The four parents interviewed were overwhelmingly positive, giving many examples of support the school offered at different times throughout lockdown. Such as opening the school playground to families, providing them with an area to take their child, and providing shopping and medication delivery.
- The parents praised the school for its understanding, communication and support mechanisms and reported that the school provides a community where they can make friends and feel less isolated.
- Parents reported the response to Covid 19 restrictions was managed well, particularly through the home learning packs and communication. Some parents fed back that the school went out of their way, supporting struggling parents, delivering shopping and medication, as well as providing school-based education. Some events were brought online, such as achievement assemblies, workshops and coffee mornings; these were well-received by families, and some would like this to continue.
- 40 parents completed the surveys, and almost all feedback was positive. See the surveys attached below. Some families wrote:
- "Willow Dene has been my rock during the lockdown, this school has given me a lot in many ways. My friends are other follow parents from Willow Dene, its support is present even outside the school itself within our local community."
- "Willow Dene, is a fantastic school, all the staff are friendly and so welcoming. My daughter has just started her third year now and she is doing amazing. She

is now saying a few words, using her peccs amazing, counting up to 10, repeating songs and words. I couldn't of wished for my daughter to go to such a brilliant school."

- "The effort and help what I am getting for my child is incredible, Willow Dene is amazing school, I will always recommend it to anyone. Thank you to all staff♡♡♡"

### **Involvement with the wider community**

- The school has a dedicated health clinic on-site to reduce anxiety, transition, disruption to learning, and support families. Professionals such as paediatricians, CAMHS, epilepsy nurse or SeeAbility can hold clinics and work collaboratively with staff and families.
- The Music therapy team have allocated time to conducted research. A recent research project on "How can music therapy support children with autism following the transition from mainstream school to special school" concluded that Music therapy is a valuable intervention.
- Different professionals within the team have focused their dissertation research on relevant topics within the school such as Maths, communication apps, MOVE, Medi-bikes, or the curriculum and learning journeys. The headteacher presented research nationally, which has consequently bought by other schools.
- The school's student council is consulted on the curriculum offer across the borough, feeding back and attending meetings to shape borough-wide practice.
- Willow Dene school is part of Compass Academy Trust and offers outreach, training, support and advice to the schools and the two schools with autism provisions. Willow Dene school is the only special school within the trust. Willow Dene takes part in the joint school projects and working parties as well as the annual conference.
- The school has links with Kings College, Goldsmiths and Greenwich University, providing training and work placements for students.
- The school provides training to other schools in the community, such as Forest School and TeamTeach.
- The school is part of an NQT (Newly Qualified Teachers) programme.

## Section 3: Summary of assessment

### What the provision does particularly well

#### What stood out as particular strengths:

- Family support- families praised the school for the above and beyond support and advice the school gives and that it provides a real community for children and families.
- Parents reported the response to Covid 19 restrictions was managed well and the school was proactive in supporting struggling families. The school worked collaborative with families, providing resources and continuity whilst also supporting children and families with transitions back to school.
- Outstanding practice was observed throughout all observations children, have ownership of their individualised communication systems across the school which are clearly differentiated based on the children needs and reflect the information within the communication passports.
- Clear and consistent visuals structures were in place across the school environments.
- Continuous Professional Development Training is strategically planned based on the needs of the staff and children. The appraisal system enables staff to reflect on their autism practice and identify developments at an individual, class or whole school level.
- A supportive community for staff and families: the Willow Dene family came across well.
- On-site health clinic- The school has a dedicated health clinic on-site to reduce anxiety, transition, disruption to learning, and to support families. Professionals such as paediatricians, CAMHS, epilepsy nurse or SeeAbility can hold clinics and work collaboratively with staff and families.
- The school's knowledgeable and passionate Sensory Coordinator and assistant OT work alongside the therapy teams to provide universal and targeted support to staff, children and families. The school's in-depth analysis of children's sensory needs enables staff to understand and implement bespoke individual support plans, which allows children to be ready to learn. (See behaviour think sensory.)
- The school carefully plans a flexible curriculum, ensuring that learning is purposeful and meaningful, considering the children's likes, interests, and future aspirations.
- Evidence for learning highlights the children target areas alongside areas where more evidence needs to be collected. Ensuring targets are generalised before being marked as completed.
- Staff are highly skilled practitioners and, throughout the observations, were consistently seen to effectively use a range of evidenced-based autism-specific best practice methods and approaches.
- Careful consideration is given to the transition into school at the start of each day to ensure that children feel safe and secure during the transition.
- Collaborative work with outside professionals, agencies and providers.
- Outstanding practice was observed, where autistic children are encouraged to enjoy the challenge of trying out, learning, exploring and choosing new

experiences, such as spraying water, planting seeds, going through tunnels or meeting a snail. On some occasions, children were offered a choice of sensory experience as part of the lessons.

**What else the provision does well:**

- The school has supportive systems to analyse and support teams with implementing strategies and interventions for children struggling with self-regulation.
- Outreach providing Universal and targeted support and mentoring for other provisions
- The school has good outdoor and indoor facilities, with many different play zones, including the sensory garden, sorting areas, trampolines, and a large forest school area.

### **What the provision could develop further**

**Areas to consider:**

- Outdoor Play- Covid 19 restrictions have halted the communication shed and resources in the play areas. Although children bring their communication systems to the playground, they are deposited on arrival. Some staff use their keyrings to assist communication. The school could consider reviewing the use of available portable communication systems outside of the classroom to promote expressive language.
- In a few observations, staff should reduce their language when making demands or giving instructions.

**Identified by the school:**




- Although auxiliary staff receive training in autism, the school is developing a more formal, annual auxiliary staff training program. The school is working with the LA transport team by developing training to help them provide a better service.
- The school likes to invite more autistic speakers to share their experiences, developing an understanding of life from an autistic perspective.

## APPENDIX 1: SURVEYS




### Families of Autistic Children

Feedback questionnaire on Willow Dene Primary and Secondary School to be completed before 21/05/2021




Please note all comments accompanying survey ratings are routinely removed from the final Accreditation report once they have been shared with the provision. This is to eliminate the risk of any individual being identified from these comments should the provision share or publish the report




1. The support my relative is given is...				Response Percent	Response Total
1	poor			0.00%	0
2	ok, but could be better			2.50%	1
3	mostly good			20.00%	8
4	always good			77.50%	31
				answered	40
				skipped	0

## 2. The understanding that staff have for my relatives autistic needs is...

			Response Percent	Response Total
1	poor		0.00%	0
2	ok, but could be better		2.50%	1
3	mostly good		27.50%	11
4	always good		70.00%	28
			answered	40
			skipped	0

## 3. The way I am kept informed and asked my views about how my relative is supported is...

			Response Percent	Response Total
1	poor		0.00%	0
2	ok, but could be better		5.00%	2
3	mostly good		25.00%	10
4	always good		70.00%	28
			answered	40
			skipped	0

4. The advice I get from the service on how to help my relative is...			Response Percent	Response Total
1	poor		0.00%	0
2	ok, but could be better		2.50%	1
3	mostly good		35.00%	14
4	always good		62.50%	25
			answered	40
			skipped	0

## APPENDIX 2: COMMENTS FROM THE PROVISION

### APPENDIX 3: ADVANCED APPLICATION FORM

#### AUTISM ACCREDITATION: APPLICATION FORM FOR ADVANCED STATUS

In order to achieve an Advanced Award you must show that you are an outstanding and innovative provision that goes well beyond similar provisions. Please complete this form to give examples of initiatives that make you stand



out and most important of all the impact they have had for autistic children. Copy and paste where you may have more than one example. However the entire application including case-studies should not exceed a 1000 words.

*Please note* you are also required to include case-studies (please refer to additional guidance) as part of your application. It is also important to recognise that the application form and case-studies are only part of a bigger picture, with considerable emphasis being given within the award process to observation of practice, personal centred support plans and surveys.

Part 1: Professional Development
Initiatives or innovations that impact on staff insight into the personal experience of being autistic e.g. regular involvement of autistic children in professional development activities or review of practice.
Description <b>The sensory processing coordinator has put tremendous effort and work into the development of making food fun groups across the school using the SOS programme. Our making food fun group started in our primary department and soon developed into sensory chefs at our secondary provision and tiny tasters in our Toucan – 2 yr old provisio. (please refer to case study and electronic evidence folder for further information)</b>
Impact: <ul style="list-style-type: none"> <li>• <b>Children can express and communicate their likes and dislikes</b></li> <li>• <b>Children can make their own choices independently</b></li> <li>• <b>Children will engage in more tactile activities and be less hypersensitive</b></li> <li>• <b>Children will look more relaxed and appear less fearful of food</b></li> <li>• <b>Children will start to try new foods and develop better oral motor skills</b></li> <li>• <b>Children's interaction and social skills around food will improve both at school and at home</b></li> </ul>
Initiatives or innovations that ensure that specialist approaches or techniques are fully understood, consistently implemented and regularly reviewed.
Description <b>Development of the KS4 curriculum and future mapping, provides a bespoke and unique approach to supporting our older ASD students. Through their individualised personal learning plans and bespoke AQA units of study we ensure that our KS4 students voices</b>

are listened too and that their strengths and interests support and in form their next steps in their learning. (please refer to case study and electronic evidence folder for further information)

**Impact**

Children participating in this have demonstrated huge increases in self-confidence and esteem, this has manifested in improved self-reliance and independence. It has had a huge impact on the children's emotional well-being by providing them with a sense of pride in their achievements and highlighting their potential for employment as they transition into KS5 and adulthood. (please refer to electronic evidence folder)

Part 2: Outcomes for individuals

Initiatives or innovations that have had a considerable impact on the quality of life and inclusion of autistic children e.g. programmes; projects; therapeutic interventions social enterprises etc.

Description **Two case studies provided on two individual children's unique journey through the school which highlights the support/interventions/collaborative working that both they and their families received. (please see individual case studies, electronic evidence for further information)**

**Impact**

- **Both children have benefitted hugely from the collaborative input they have received from therapists/health and social care.**
- **Both children have made progress in their communication/social interaction skills**
- **Both children have benefitted from the sensory input/interventions they have received which in turn has had a positive effect on their access to learning which is reflected in their learning journey's**
- **Families have felt well supported**

Initiatives or innovations that empower autistic children as experts in their own lives e.g. examples of co-production; working in partnership; developing effective consultation tools and processes to ensure that autistic children have a voice etc

Description

Impact

Part 3: Sharing of Expertise and development of knowledge and understanding

Initiatives or innovations that have had a significant impact on how families, other professionals or members of the public understand and respond to autistic children  
e.g. outreach support; training for other professionals, families; sharing best practice at events etc.

Description : **The role of the family support advisor – to support families in signposting them to other organisations. Liaising with other services to gain best outcomes for children and their families. To offer another layer of support in collaboration with education staff. The role was developed because of a recognised need and gap in provision for families externally to education (please see case study for further information)**

Impact **Having this role enabled families to access someone that could bridge services without prejudice, empower and facilitate collaborative working. The family support advisor role added another layer of bespoke and unique support to our children and their families.**

Initiatives or innovations that have significantly increased knowledge and understanding of best practice in supporting autistic children e.g. involvement in action research; development of resources; partnership work; publications etc.

Description **We have a music therapy team within school that delivers individual and group based sessions for children, to support the development of social communication/interaction through the medium of music. Our therapists deliver blocks of input across the age ranges and always target new children to the provision that would benefit from input. Recently the music therapy team supported some research into 'how can music therapy support children with autism following transition from mainstream school to special school?' focussing on specific children that had recently transitioned into Willow Dene and wrote an article on their findings, (please refer to initiative/individual case study as well as the executive summary of the article written by the therapists.)**

Impact: **The conclusion from the research was that 'The findings of this study suggest that music therapy is a useful intervention to support children with autism transitioning to special school. Further research could explore ways of gathering children's own views on their experience of music therapy or could explore objective measures of the impact of music therapy on anxiety reduction in children during transition from mainstream to special school.'**

**Music therapy is very well received within school by class groups, individual children and their families. Video footage is often taken at the start and end of an individual's intervention block as well as a**

report that is shared with education staff and parents. Class teams work collaboratively with the therapist to support individual or group access and teams report a positive impact on children's social communication/interaction which is often transferred into the classroom

Part 4: Validation

Validation from other bodies or professionals s e.g. awards; summative evaluation data; inspections etc.

Example **challenge partner review 2019 and our recent 2019 OFSTED review, our federation (compass) termly challenge and support sessions, Governor's visits**

Relevance:

**Our most recent challenge partners review in 2019 rated the school as outstanding.. (please see report)**

**Challenge partners is a national organisation that works with schools across the country, sharing excellent practice, facilitating peer review and running programmes grounded in evidence of what works, so that all children can benefit from the combined wisdom of the system, and of other sectors.**

**Schools are organised into local hubs, working together to secure improvements and continuing professional development on shared priorities. They link with hubs around the country, and play a crucial role in facilitating collaboration and knowledge-sharing between schools.**

**Challenge Partners schools benefit from:**

- our [Network of Excellence](#)
- [Quality Assurance Review](#) and knowledge exchange
- bespoke programmes to [reduce gaps in educational achievement](#) and to [extend excellence for 'stand out' schools](#)

**Challenge and Support sessions: Are held by the executive head teacher and our school improvement officer who robustly explore lines of enquiry linked to our school development plan and core priorities, challenge strengths and how we are continuing to develop as a school. (please see report)**

**OFSTED- Our most recent OFSTED report was Dec 2019 – where we were rated as good with outstanding features with the potential to be rated as outstanding**

***'Willow Dene School continues to be a good school. There is enough evidence of improved performance to suggest that the school could be judged outstanding if we were to carry out a section 5 inspection now.'* (please see report)**

**Governor's visits - Governor's meetings and termly visits from key governor's to examine and explore their key area within school**

## Case study 1: Year 3 pupil

### **Pen picture of individual before support was introduced including challenges and difficulties**

X began at Willow Dene in the September of his Reception year. He has a diagnosis of autism and cerebral palsy resulting in diplegia (stiffness of his legs). He was pre-verbal when he came to us, and had very little understanding of communication, whether verbal, gestural or symbolic. He made little eye contact, had difficulty regulating his emotions when he didn't get his own way, was highly self-directed and impulsive, and was (and continues to be) incredibly strong, using his weight to get what he wanted, to go where he wanted to go, and to tip tables and furniture when agitated. He presented with many sensory issues around a restricted diet, eating inappropriate items, scratching adults, spitting, high levels of energy and activity, and an inability to attend to anything adult-led for more than a few seconds.

### **Outcomes: Communication skills, social skills and relationships**

X is in his fourth year with us now. He has made progress using PECS, where he is currently travelling to exchange (phase two) and is beginning to demonstrate an understanding of the differences between symbols and photographs in order to choose favourite foods or activities. He will often vocalise when making such exchanges, saying 'pop' when he requests a balloon game, or 'biscuit' when asking at snack time. The variety of his vocalisations has increased greatly over time. Where in his first year he learned how to say, 'go' to get something to happen, and this became his go-to word to get anything to happen or for an adult to hurry up, he now fills in gaps in familiar songs and routines with a variety of consonant and vowel sounds. He is also engaging in turn-taking games with other children, with adult support.

### **Referrals / Input / Other agencies: Speech and language Therapy**

### **Outcomes: Confidence, self-reliance, independent problem solving**

X is confident in his school, and made the transition to his second class with ease. He shows a greater understanding and engagement in his day, making his way independently to the classroom each morning, where he'll hang his coat and bag up once an adult has prompted him. When he first started he had a target on his EHCP to be able to ascend and descend stairs independently, which he has achieved. He is also now engaging in pedalling tricycles. X now engages with his individual timetable by manipulating the visuals with adult prompting, and occasionally finding appropriate visuals at the right time independently (especially 'dinner')! He will also frequently hand a timetable to an adult when he wants to move on to a new activity.

X responds consistently to one word instructions or cues such as 'coat' and will also put his PECS book away once he's finished snack, ready for when he next needs it.

**Referrals / Input / Other agencies: Physiotherapy**

**Outcomes: Ability to cope with sensory input**

X has accessed a lot of sensory input in his time with us. He has had adapted seating at various points, including a ball chair, wheelie stool, sitting behind a table, and has benefitted from a variety of OT input, including a weighted jacket and chewy, which he responded really well to and which reduced inappropriate mouthing, and formed part of his individual timetable and sensory diet. He also benefits from regular 'sensory journeys' and massage, which has also supported the development of his communication skills – for example, on one occasion he took an adult's hand and gently squeezed each of their fingers in turn, before offering up his palm, signalling to them that he wanted a hand massage as he was used to it being done in class. X's restricted diet has also been addressed through him attending the Fun Food group run by the school's sensory processing coordinator. He has become more open to touching and exploring different foods in these and in class-based cooking and food exploration sessions, in particular vegetables and fruit, which he will smell and put to his lips. He benefits from regular sensory messy tactile play sessions, as well as an individual timetable with movement breaks and a sensory diet, involving opportunities to use the trampolines and sensory circuits.

**Referrals / Input / Other agencies: Occupational Therapy, School's Sensory Processing Co-ordinator, Family Fund**

**Outcomes: Emotional self-regulation and well being**

X had difficulty regulating his emotions and the development of his interaction, social and PECS skills has helped in this regard. His ability to request regulating activities such as the hand massage (mentioned above) is a great development. More notably is his ability to remain for adult-led group activities for up to 25 minutes at times.

We have also undertaken a lot of support for the family, setting up PECS at home through home visits (pre-COVID), offering strategies to his mother around sensory input she can use while he's not at school, and ideas and resources for home learning while X is isolating during one particular point of the winter lockdown. Through mum's involvement with the family support worker she was able to access the Family Fund to purchase an iPad for X to help him engage, learn and regulate at home.

**Referrals / Input / Other agencies: School's Family Support Worker, Housing Services**

**Outcomes: Achievements, successes and quality of life outcomes**

Other developments for X in his time here include him being assessed by SeeAbility and being prescribed glasses, which staff teams worked hard to get him used to wearing. There have also been lots of support offered to the family around housing and home issues, which have been addressed through our involvement in his CIN meetings. X has also recently been diagnosed with ADHD, which will inform our future support for him. His range of vocalisations and his ability to attend to and respond to adult communication has been a huge area of development, and is one which makes us smile when we hear him saying words we know he has learned from us, or naming things he sees such as 'butterfly' or 'twit twoo'!

**Referrals / Input / Other agencies: Social Care, overnight respite provider, support worker provider, community paediatrician.**

**Next steps**

X's annual review targets at present are to generalise his ability to travel using PECS at phase two, as well as to increase the amount of discrimination he is able to do; to increase his ability to take turns with a peer; and to build on his independence.

**Case study 2: Year 7 pupil**

**Pen picture of individual before support was introduced including challenges and difficulties:** Y joined Willow Dene in September 2013 and came to us from a mainstream setting. Y is diagnosed with autism and severe learning difficulties. Y settled into Willow Dene well and responded well to the structures and routines that he was provided with however towards the end of his second year and the start of his third year it became clear both at home and school that he had regressed in certain areas of his development.

His parents met with the class teacher and deputy head to discuss their concerns about his regression which was largely around his social withdrawal, communication regression and the fact that he was withdrawing from many of the teaching opportunities he enjoyed previously, and his sensory sensitivities around texture, foods etc also declined significantly. The following actions were implemented to support Y and his family.

Referral to paediatrics to rule out any medical concerns

Y accessed our making food fun group with the sensory processing co-ordinator

Y was referred into the SCERTS clinic for support

**Outcomes**

**Communication skills, social skills and relationships**

- **Therapy Input**-Music, Speech and Language and O.T ( music was one of the significant interventions that supported his access to his learning and social interactions again.



- self-regulation and communication while labelling/expressing our emotions and feelings, to help support regulation.
- **SCERTS**-Developing social communication and emotional regulation through specific targets that supported the teacher and team to home in on specific areas that Y needed to practice.
- **Referral to CAMHS and the SCAND team at a tertiary hospital** - The hospital's team worked in collaboration with the school SLT and OT to support Y at home and school

**Outcomes**

**Confidence, self-reliance, independent problem solving**

As Y began to improve and come out of his shell through the use of music and intensive interactions Y became happier and showed more independence as well as a willingness to be more part of the class group and his family.

**Outcomes**

**Ability to cope with sensory input**

- **Sensory Diet**-sensory circuit, weighted blanket, ear defenders and deep pressure.
- **Movement Breaks**-Including trampling, power walks, heavy work and sensory areas across the school.
- **Fun Food Group**-Taking a sensory approach while desensitising around tactile, smell and taste.

**Alert Programme**-Developing

Y received a continuous block of input from the sensory processing co-ordinator within the making food fun group which supported his exploration of different textures at home and school. He was observed by the OT and the sensory processing co-ordinator who put a sensory diet/equipment in place to support Y at home and school.

Y's self regulation and social communication targets were set as part of his SCERTS assessment and evidence was gathered of his improvements

**Outcomes**

**Emotional self-regulation and well being**

Y benefits from regular sensory input through his sensory diet, making food fun group. He enjoys music and through stripping back some of the expectations placed on him and really focussing in on his SCERTS targets enabled the class team at the time and Y to work at his pace and to really focus on his interests and needs.

**Outcomes**

**Achievements, successes and quality of life outcomes**

Y's parents report that they have their Y back after a year of quite significant regression that concerned both home and school. Y has made academic progress which is highlighted within our assessments on learning journeys and SCERTS. His sensory needs particularly around his oral motor sensitivities improved as did his self regulation.

**Next steps**

For Y to continue the positive transition he has undertaken from Goldcrest into Jackdaw class and Willow Dene’s secondary provision as well as to maintain his previous progress.

### Case study 3: Year 1 pupil

**Pen picture of individual before support was introduced including challenges and difficulties**  
**Non-verbal 6 year old with challenging behaviour -severely un-regulated, hyper-active, provocatively aggressive, unable to access learning, requiring full-time rotated 2-1 support**

**Outcomes**

**Communication skills, social skills and relationships**

**Now able to follow visual support, as well as able to follow direction, no aggression. Shows awareness with different sections of music, looking and smiling with recognition at therapist**

**Outcomes**

**Confidence, self-reliance, independent problem solving**

**Able to point and communicate choices of instruments. Able to sit and interact independently with the therapist, who either shares piano keyboard with him or he and her play different instruments simultaneously. He requires minimal physical support from support staff.**

**Outcomes**

**Ability to cope with sensory input**

**Able to hear and filter the therapist’s music –making, instrumentally and vocally and respond on a variety of instruments, using individual fingers delicately as well as with more strength and using drum beaters.**

**Outcomes**

**Emotional self-regulation and well being .**

**Able to self-regulate during 15 minute individual session, playing in a range of volumes and speeds. Shows enjoyment and persistence.**

**Outcomes**

**Achievements, successes and quality of life outcomes**

**Able to be independent in musical expression, show choices, follow direction, enjoy himself, focus. These achievements are taking place on a consistent and improving weekly basis.**

**Next steps**

**To continue to develop musical expression opportunities for him and to work toward group work.**

## Case Study: Music Therapy

### Executive summary of Research project commissioned by Willow Dene from Music Therapy Service 2019:

#### CHANGING PLACES: HOW CAN MUSIC THERAPY SUPPORT CHILDREN WITH AUTISM FOLLOWING TRANSITION FROM MAINSTREAM SCHOOL TO SPECIAL SCHOOL?

Summary . Gillian O’Dempsey and Nicolette O’Neill 2019

**Background and aims:** An increasing number of children with autism are being placed in mainstream schools. These placements often prove unsustainable and there can be a considerable wait for a place in a special school. Some children experience lengthy periods of exclusion, out of an educational setting, and this can present challenges for the transition back into education.

This study sought to explore:

- a) What are the perceived emotional needs of children with autism on arrival at Willow Dene School following school exclusion or a transition from mainstream school?
- b) What role does music therapy play as part of the whole school team approach to meeting these needs?

**Method:** The study had two parts:

*Part 1: Questionnaire survey* to gain a broad view of the perceived emotional needs of the children, and perceived benefits of music therapy, from parents and teachers of the children in the study and teaching assistants who had been present in their music therapy sessions.

*Part 2: Interviews including discussion of video extracts* looking in more detail at what happens in music therapy and what benefits this might offer for a child both in and beyond the music therapy session. For this part of the study five members of the team around one child were interviewed. Interviews included viewing three video extracts from the child’s music therapy sessions as a focus for the discussion.

**Results:** Responses suggest that children’s experiences of mainstream school or of school exclusion had considerable impact not only on them but also on their parents and on the relationship

between child and parent. On arrival at Willow Dene following mainstream school placements and school exclusion, children were perceived by parents and staff to be experiencing high levels of anxiety and lacking confidence.

Parents and staff highly value the music therapy provision at Willow Dene School and believe that music therapy offers a range of benefits for children. Four key areas of benefit were identified: (i) relationship; (ii) emotional wellbeing; (iii) self-regulation; (iv) attention and focus.

**Limitations:** This was a very small scale study undertaken within a limited time frame in the context of one educational setting. Limitations of this study include the lack of the child's own views and the lack of parental involvement in questionnaire design. Findings are based on perceptions of parents and staff so do not provide an objective measure of how areas of benefit may change over time.

**Implications:** Responses suggest the music therapy service at Willow Dene School is highly regarded by parents and staff, with them identifying a range of benefits for children. Some parents and staff would benefit from being given more information about music therapy. Consideration could be given to introducing music therapy at an earlier point in a child's transition from mainstream to special school or during periods of exclusion.

**Conclusion:** The findings of this study suggest that music therapy is a useful intervention to support children with autism transitioning to special school. Further research could explore ways of gathering children’s own views on their experience of music therapy or could explore objective measures of the impact of music therapy on anxiety reduction in children during transition from mainstream to special school.

### Case Study:

#### KS4 - Future's Mapping and Positive Contribution

**Context (What was reason for developing initiative?)**

We opened our secondary provision in 2015, and we wanted to ensure our students had a planned vocational pathway within which they are able to celebrate their personal interests, skills and strengths. During KS4 students complete Futures Mapping and Positive Contribution units alongside their accredited learning. Futures mapping includes opportunities to engage in vocational experiences linked to children’s leisure time activities. This aims to involve children in the planning process, to challenge them and allow greater autonomy and choice about their chosen areas of interest.

**Purpose of initiative (What were the aims and objectives of the initiative?)**

To develop a clear link between children’s interests and strengths and their desired career path (as discussed with parents) in order to develop confidence, self-reliance and independence.

**Method (What did you do, and how were you going to measure, observe and record outcomes?)**

We planned our KS3 and KS4 curriculum to incorporate opportunities for children to recognise, develop and share their personal interests with their peers, each child within years 7-9 has a specialist interest afternoon where their personal interests are celebrated, whether these are cooking, sport or music related. This information is collated by class teachers and used to create a knowledge base for KS4 when we focus closely on vocational skills and opportunities. This takes the form of Futures Mapping in Year 10 and Positive Contribution in Year 11. Future’s mapping links knowledge of children’s interests gleaned from Specialist Interest Afternoon’s with real life work experience opportunities, these have included meetings with a professional photographer, and a motivational speaker.

**What happened? (Describe how the initiative developed?)**

When our first cohort of children participated in the initiative, we looked at previous knowledge of their specialist interest afternoons and their individual likes and strengths. We teamed with a company called Expert Peer who worked closely with us to identify an appropriate professional to support the vocational skills of our children. Examples of this include professional photographer Nicola Bensley and motivational speaker Nana Marfa. Children then met with these inspirational professionals either in school or in their work setting. Our visit to Nicola Bensley allowed us to

develop independent travel skills by taking the DLR to London, when there, we looked through Nicola Bensley's portfolio and were able to ask questions using visual supports and symbols.

**What were the actual outcomes of the initiative? (What progress made by individuals for example in communication and social skills: in self-reliance and independence; sensory processing; emotional regulations and well-being?)**

Children participating in this have demonstrated huge increases in self-confidence and esteem, this has manifested in improved self-reliance and independence. It has had a huge impact on the children's emotional well-being by providing them with a sense of pride in their achievements and highlighting their potential for employment as they transition into KS5 and adulthood.

**Next Steps and lessons learnt**

Continue to develop this with our current cohort and explore ways to do this within the current economic and medical climate.

## Case Study: Family Support Worker

### Context (What was reason for developing initiative?)

- To meet the needs and support positive outcomes of all families at Willow Dene school. It was recognised that the issues and problems parents faced externally to the school community were having a negative and detrimental impact on the mental health and wellbeing of our children, and their families.
- Teachers and staff did not have to capacity to support their families to the degree that was necessary.
- Families required support around housing, financial/benefits, immigration, respite, domestic abuse, forms and applications for grants, referrals for assessments (OT, Speech and language, Children with Disabilities Social Work Team and Child and Family) referrals to local and national support services and charities.
- It was recognised that the role a Family Support Worker would benefit the school community. Taking pressures from teachers and senior staff, most importantly meeting the needs of our families in order to have a positive impact on their children's lives and giving every child the best opportunity to thrive.

### Purpose of initiative (What were the aims and objectives of the initiative?)

- To ensure positive outcomes for all children and their families at Willow Dene School.
- To support families to know and understand their rights and empower them to challenge services through sharing information about the law, inviting in relevant services and providing workshops.
- To provide parents with support with referrals for therapies, social care/respite, applying for grants and benefits, housing, applying for home school transport and supporting with appeals.
- To support families to be aware of what is available to them locally and nationally. To support them to access and apply for help, advice, guidance and information from all the many services available to them.
- To ensure parents apply and obtain all benefits and grants they are entitled to – to prevent financial difficulties and hardship.
- To ensure parents feel that they belong and that they feel part of the school community, to prevent isolation and loneliness. To build self-esteem and confidence. To look at the many ways to work with parents and how we can improve attendance of parents in school.
- To continue to run Weekly Coffee mornings inviting special guests to join us from relevant and useful services and organisations. To bring families together and share information. Additionally, ensuring parents are made to feel part of the school community and given the opportunity to meet other parents of children with disabilities, share their problems, share solutions, support, and advise one another. To

make friends and contacts when life has become very difficult and they are feeling isolated.

- To increase knowledge and understanding of Autism. Courses and workshops are run in school, these have recently been run by lead staff on ASD, Greenwich Greenlights Project, Cerebra and City Lit. Additionally signposting parents to courses in the community. morning, bringing families together. Ensuring parents are made to feel part of the school community and able to meet other parents of children with disabilities, share problems, share solutions, support, and advise one another. To make friends and contacts when life has become very isolated.
- To support parents to have a better understanding and are better equipped to manage different types of Challenging Behaviour, what the triggers are, how to prevent and how to manage difficult situations.
- To address identified needs, through tailored support, for the families, parents and carers of children who attend Willow Dene School.
- Willow Dene to continue to work in partnership with its multi-disciplinary teams, Children's Services and other statutory and voluntary services to ensure the very best provision for our children and their families at the point of need.

**Method (What did you do, and how were you going to measure, observe and record outcomes?)**

- Meetings in school (1-1) with parents
- Phone calls with parents
- Emails from (and to) parents with enquiries and requests for advice and support.
- Emails, letters and phone calls to services and professionals, statutory and voluntary agencies and other services involved with the family.
- Weekly Coffee Mornings, with special guests that are of interest and useful for Willow Dene families
- Workshops in school - ASD, Sensory Processing for children with ASD, Greenwich Mencap Greenlights Project – looking at behaviours and how to manage and incorporate strategies at home. Cerebra – Accessing public services, giving parents strategies to get the services they need for their child and family.
- Facilitate and support the delivery of ASD training and workshops
- Facilitate and support the delivery of Sensory Processing training and workshops, explaining how sensory processing difficulties affect children with Autism.
- Outside visits to services and relevant organisations
- Provide support/advocacy at strategic and multi-disciplinary meetings
- Support with calls and referrals to services and therapies
- Support with form filling i.e., grants, benefits, housing, therapies and statutory services.
- Facilitate free courses for parents (these are run by City Lit) Courses range from Mencap, City Lit and Cerebra – lookup.
- Support families to advertise, interview and employ respite carers for their child



- Ensure that parents have their say through invitations to local authority consultations and promoting survey's
- Clear and confidential written records of meetings are kept safe and confidential, all meetings, phone calls and work with children and families is recorded in personalised file. Also saved electronically. Write ups and actions are recorded. Outcomes are recorded and shared with relevant parties

**What were the actual outcomes of the initiative? (What progress made by individuals for example in communication and social skills: in self-reliance and independence; sensory processing; emotional regulations and well-being?)**

- Empowerment, parents say that they feel more confident in their own ability to stay informed about their child's rights, where to find information and what the latest guidance states.
- Parents have a better understanding about what is available to them and how to access.
- To give our families to the very best chances, confidence and strength to navigate an often very challenging and complicated system.
- Willow Dene families know where to go and what to ask for when faced with overwhelming issues effecting their families lives.
- Instilled confidence in parents that they may have lost through challenging and often traumatic experiences. We continue to support parents to access the services available to them.
- Parents appreciate the security of knowing that they are not alone, they do not have to remain isolated and that they are part of a large community.
- Parents and families of children with ASD have had the opportunities to learn about ASD and what this looks like for our children. They have fed back that this has opened their eyes to what it is to have Autism and why their children behave the way they do.
- Collaborative working with Sensory Processing, Occupational Therapy, school staff and CAMHS has meant families have felt better placed to trial strategies to meet their child's sensory, behavioural and communication needs within the family home.
- Parents are better equipped to prevent difficult situations and can respond to possible triggers, limiting the anxiety and distress a child with ASD may experience. This means a better quality of life for the child but also the whole family.
- Direct 1-1 work with families has had a very important impact on the lives of many of our children and their families. Families have been supported to obtain adapted homes that meet the needs of the child but also the needs of the whole family, they have been awarded the appropriate number of bedrooms enabling siblings their own space, parents their own bedrooms and most importantly the child with ASD the space on their own that they need away from others, a place to be calm and a place where they can use specialist toys and equipment to regulate their own energies and emotions. Appropriate housing has a very important and positive impact on the whole family and supports wellbeing and mental health.

- OT referrals have meant that important safety measures have been put in place within the family home reducing the risk of the child absconding and being a serious risk of harm.
- We continue to ensure that we identify ESOL needs at the earliest stage, to make all communication accessible and to improve engagement from families for whom English is a second language from the very start.

#### Next Steps and lessons learnt

- We are always pushing forward and looking at the many ways we can reach out to our parents/families. Understanding that the diversity and needs of all parents makes them individual, that families require a tailored approach to meet their needs and that we must continue to consider how we work well with all families to ensure best outcomes.
- We will continue to work on identifying ESOL needs, to ensure equality of outcome for all families including those for whom English is a second language. We continue to celebrate having such a diverse and interesting mix of people, languages and cultures at Willow Dene School.
- We believe it is very important to keep abreast of the changes in law and government guidance to ensure we can update parents on relevant and useful information and to continue to support them in every aspect of their lives. To always keep best outcomes at the front of the work with do with all the children and their families.
- To continue to recognise and address the mental health needs of our families, to keep abreast of agencies and support and relevant up to date professional training opportunities and qualifications. To understand where to signpost parents accordingly.

## **Case Studies: Fun Food groups**

From tiny tasters to sensory chefs, all children across the school are given the opportunity, to attend a food group session. Supporting children's eating needs due to sensory difficulties, limited range of foods, avoidant and restrictive eating. We take a sensory approach, setting goals around sensory processing, communication and development. With ongoing support and input from therapists and dietician.

My role as a Sensory processing coordinator is to work across the whole school, from early years to secondary at Oakmere, implementing Sensory programmes/activities and interventions, to meet each child's individual sensory need. By working and collaborating with therapist/staff/parents, we were able to identify the need for a fun food group, highlighting areas where some children were experiencing and expressing sensory processing difficulties, showing signs of hyper sensitivities towards smell/sound/texture/taste, affecting their intake of food.

Working with our OT we first piloted the fun food group back in 2012-2013, first looking at children that presented with eating challenges and experiencing food aversions, leaving them with very limited food diets and serve food fads.

### **Our aims and objectives for food groups are**

- To experience food in a relaxed non-threatening environment
- To engage and interact in fun food activities, expressing enjoyment
- Touch and explore a range of food textures, smells and tastes (desensitization)
- Bring food to the mouth to look, smell and taste (steps to eating S.O.S approach)
- To identify oral motor, sensory, motor skills, cognitive and emotional development
- To recognize and describe the major reason why a Child won't eat
- To apply and implement strategies to support feeding problems
- To continue transferring learnt feeding skills and enjoyment into class/school/home

Once a child has been identified and referred to food group, we then invite the child to join a fun food session, first we liaise with parent/staff/therapist, gathering information and observations around the child's feeding/sensory/development etc. Having a clear understanding of the whole child, gives us an opportunity to prepare and set up a safe, secure

and familiar environment. The purpose is for the child to have fun and engage with food.

## Method

- To observe and assess the child's responses and reactions towards food
- To set a realistic goal around food engagement / development / desensitization
- To record observations, plans, measure outcomes and next steps
- To gather evidence from photos, videos, liaise with parents/staff/therapists

## Developing food groups (tiny tasters-sensory chefs)

As the food group started to expand and develop across the school, it was clear to see the need to engage children at a much younger age, targeting early years and their parents, our 2yrs provision was perfect, **(tiny tasters)** allowing us to work closely with staff/parents/therapist within the classroom.

We continued to implement and develop the fun food group into our secondary provision, **(sensory chefs)** taking a more independent approach, building social relationships / responsibility and communication, working in a secure / staff and well planned out kitchen environment.

## This allows us to.

- Build a profile of the child's sensory / social / physical development, from a young age, supporting them throughout the school.
- Develop staff training, by providing fun / practical workshops with a well informative presentation, relating to our children's needs and development.
- Build positive relationships with parents, during sensory food workshops offered throughout the year.
- Attend parent coffee mornings once a term, both at Swingate and Oakmere site for open conversation and engagement.
- Keep staff/parents up to date with progress through, observations / photos / videos / e-mails / phone calls.
- Spread awareness through displays / newsletters / governor's reports/ twitter.

## Outcomes / Progress / Looking forward

The average number of children to attend food group, over a year is between 35-40, with most children accessing 6 sessions, with some continuing to 12 sessions, and then a small amount revisiting the following year. From observations, goal's and outcomes, we're able to monitor their progress.

### **Skills / Development**

- Children can express and communicate their likes and dislikes
- Children can make their own choices independently
- Children will engage in more tactile activities and be less hypersensitive
- Children will look more relaxed and appear less fearful of food
- Children will start to try new foods and develop better oral motor skills
- Children's interaction and social skills around food will improve both at school and at home

We recognise that not all children will make progress around their food intake, and for those children we must keep moving forward, by supporting and providing the best intervention and care.

- Children that are diagnosed with **ARFID** (avoidant restricted food intake disorder)
- Children who have added physical and medical conditions
- To keep identifying children who need more support via the **SCERTS programme**
- To highlight children who regress due to illness or environment change
- To keep referring to the research and theory principles, from both the **S.O.S approach to feeding** and **Eating made easier the sensory way**
- To continue collaborative working relationships with both therapist and outside agencies.