Education, Children and Families Committee

10.00, Tuesday, 12 December 2017

Additional Support Needs and Special Schools Update 2016-17

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Executive/routine	Executive
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Executive Summary

The Council is committed to working to deliver the five key outcomes of the Edinburgh Children's Partnership Plan 2017-20:

1. Every child will have the best start in life.

2. Children and young people's attendance, engagement and achievement will be improved and the poverty related attainment gap will be reduced.

3. Every child and young person will have good wellbeing and achieve the best possible health.

4. Equity amongst children and young people and their families will be advanced.

5. Children, young people, their families and communities will be empowered to improve their wellbeing.

Continuing improvement in high quality inclusive practice, effective additional support and high quality special schools are pivotal to achieving these outcomes, which reflect the priorities of 2017 [National Improvement Framework and Improvement Plan](#)

The delivery of these outcomes must take into account a number of challenges, including:

1. A growth in the proportion of the school population being identified as requiring additional support for learning.

2. Edinburgh's growing population.

3. The expansion of provision for 2-4 year olds in early education and childcare.

4. The entitlement to a three year senior phase leading to more children with additional support needs staying on at school.

In addition to the direct effects of rising numbers of learners, other factors need to be taken into account, including the indirect effects of rising school rolls on facilities and space in schools, the shortage of teachers, the impact of austerity on families in poverty and the impact of wider social trends and technology.

In March 2017 the Education, Children and Families Committee approved the following priorities for Additional Support Needs for 2017-20:

1. Improve the experiences and outcomes for children with autism, including completion of the review of special school provision and consultation and planning for the new St Crispin's.

2. Drive forward inclusive practice to enable the needs of all learners to be met, raising attainment and closing the gap.

3. Test and evaluate sustainable improvement models for English as an Additional Language (EAL) support.

4. Create dynamic networks of support at school, cluster, locality and city-wide levels to deliver improved outcomes for children and young people with additional support needs.

5. Redesign provision for social, emotional and behaviour support needs, including a new procurement framework.

6. Develop an inclusive learning culture with schools, services, clusters, localities and other authorities to improve outcomes and promote best value.

Good progress has been made in taking forward these priorities within year one and plans are in place to carry forward the work programme through 2017-18.

Report

Additional Support Needs and Special Schools Update 2016-17

1. Recommendations

It is recommended that the committee:

1.1 Notes the progress in the implementation of the strategic priorities for Additional Support for Learning (ASL) 2017-20.

1.2 Notes and welcomes the continued progress in inclusive practice in our schools and the work of the Inclusion Strategy Working Group.

1.3 Notes the progress in planning for the future of our special schools including:

1.3.1 The successful outcome to the proposed closure of Panmure St Ann's.

1.3.2 Progress in planning for the new St Crispin's and its key role in the sustainability of authority's provision for children with autism.

1.3.3 Forward planning of special school provision in anticipation of future needs.

1.4 Approves the public consultation and submission of planning permission for the new St Crispin's.

1.5 Approves informal consultations to inform planning of future provision for children with autism at Kaimes and special classes and secondary resource provision.

1.6 Approves that future options for special provision be continued as part of the Strategic Review and rising rolls programme.

1.7 Welcomes the strategic improvement plan for Autism and continuing consultations with parents and other partners in its implementation.

2. Background

2.1 It is a priority for the Council to provide high quality care and learning for children and young people and wherever possible to make effective provision to meet their needs within the City of Edinburgh.

2.2 In line with national trends, the number of learners in Edinburgh identified to have additional support needs continues to increase (Table 1). The latest Government figures indicate that 24% of learners in Edinburgh have additional support needs, which remains close to the national average of 25%.

Table 1: Edinburgh population with significant ASL needs

	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2025/16
Pupils with Additional Support Needs	7,127	7,436	7,374	8,506	9,383	9,754	11,549
% CEC school age population	16%	17%	16%	19%	20%	21%	24%

Source Supplementary Summary Statistics for Schools in Scotland 13th December 2016.

2.3 Our aim is to provide a range of high quality provision that is suited to the changing needs of children and young people consistent with the presumption of mainstream and positive outcomes.

2.4 The Council's Vision for Schools recognises that where additional support is required, it is most effective when it is built on a foundation of strong inclusive universal provision. Generally, where learners with additional support needs can be supported in mainstream settings they achieve better outcomes. Where learners are not able to benefit from a mainstream school environment, our aim is to make provision in high quality special schools and special classes in Edinburgh.

2.5 Table 2 illustrates a projected increase of 300-400 additional learners each year who at current rates will require additional support in the period up to 2022.

Table 2: Projections of Edinburgh school population with significant ASL needs

	2017	2018	2019	2020	2021	2022
Primary pupils	30,553	31,108	31,363	31,555	31,895	32,245
Secondary pupils	18,488	19,026	19,704	20,664	21,550	22,499
Total pupils	49,041	50,134	51,067	52,219	53,445	54,744
Total requiring ASL	**11,672**	**11,932**	**12,154**	**12,428**	**12,720**	**13,029**

2.6 Provision for a growing population of learners with additional needs must take into account a number of additional challenges, including:

2.6.1   A growth in the proportion of the school population being identified as requiring additional support for learning.

2.6.2   Edinburgh's growing population.

2.6.3   The expansion of provision for 2-4 year olds in early education and childcare.

2.6.4   The entitlement to a three year senior phase leading to more children with additional support needs staying on at school.

2.7   In addition to the direct effects of rising numbers of learners, other factors need to be taken into account, including the indirect effects of rising school rolls on facilities and space in schools, the shortage of teachers, the impact of austerity on families in poverty and the impact of wider social trends and technology.

2.8   Over the past five years there have been year-on-year increases in the resources available for additional support needs in Edinburgh. The Council's financial planning assumptions for 2018/19 provide additional resources to reflect the increases in pupil numbers and the increased proportion of the school population with additional support needs (see section 4 Finance).

2.9   It is becoming increasingly challenging to operate within the resources available. In order to make best use of resources and to meet changing needs, we have adopted a twin-pronged strategy combining:

2.9.1   Re-aligning our special school capacity to changing needs

2.9.2   Improving quality and performance to promote high quality inclusive schools and accessible support.

2.10   This strategy incorporates four inter-related themes:

2.10.1   Strengthening inclusive practice in our schools.

2.10.2   A single approach to supporting children in need and addressing additional support needs within our approach to Getting It Right for Every Child.

2.10.3   Strengthening networks of support around schools, school clusters, localities and city-wide on a proportionate basis.

2.10.4   Developing an inclusive learning culture to support sharing of effective practice and best use of resources.

2.11   The pattern of growth in additional support needs has been apparent across all key areas of need over a number of years. The biggest area of need is support for English as an Additional Language (EAL), where until 2016 there has been a consistent growth trend. The number of learners requiring EAL support has doubled over a 10-year period but remained stable last year.

Table 3 - Pupils supported by Additional Support for Learning Service - Principal Needs

Need/Year	06/07	07/08	08/09	09/10	10/11	11/12	12/13	13/14	14/15	15/16	16/17
Hearing impairment	73	87	104	112	101	107	133	*137*	130	153	140
Visual impairment	87	90	107	126	132	123	127	185	225	270	266
Learning & Wellbeing (Inc. Health and LAC)	698	611	670	699	799	892	810	*810*	501	793	706
Learning, Language & Communication	199	208	255	299	341	409	491	*491*	632	710	781
English as an Additional Language	2,542	2,965	3,069	3,373	3,600	3,721	4,252	4,629	5,046	5,491	5,493
Total supported by ASL Service	3,599	3,961	4,205	4,609	4,973	5,252	5,813	*6,252*	6,534	7,417	7,386
*2013/14 was a period of transition from 5 separate services into a single integrated service with a common model of recording some figures are estimated											

2.12 The growth trend in Learning, Language and Communication has continued, which reflects the increase in the population of learners requiring additional support for Autism and related needs. The fall in the need for additional Learning and Wellbeing support was due largely to a reduction in the number of requiring support following medical treatment in hospital or at home.

2.13 The pattern of need over the past year remains consistent with the priorities for Additional Support Needs for 2017-20, approved by the Committee in March 2017:

2.13.1 Improve the experiences and outcomes for children with autism, including completion of the review of special school provision and consultation and planning for the new St Crispin's.

2.13.2 Drive forward inclusive practice to enable the needs of all learners to be met, raising attainment and closing the gap.

2.13.3   Test and evaluate sustainable improvement models for EAL support.

2.13.4   Create dynamic networks of support at school, cluster, locality and city-wide levels to deliver improved outcomes for children and young people with additional support needs.

2.13.5   Redesign provision for social, emotional and behaviour support needs, including a new procurement framework.

2.13.6   Develop an inclusive learning culture with schools, services, clusters, localities and other authorities to improve outcomes and promote best value.

3.   Main report

Improving the Experiences and Outcomes for Children with Autism

3.1   We have taken forward five key strands of improvement over the past 12 months:

3.1.1   Professional Learning Programme for all schools

3.1.2   Strengthening support for parents and early intervention

3.1.3   Increasing capacity for children with Autism who require special school provision

3.1.4   Improving the quality of environments in schools and classes

3.1.5   Strategic improvement plan for Autism.

Professional Learning Programme

3.2   The Professional Learning programme in Autism addresses issues raised by parents and service reviews in 2015. The programme is delivered by a multi-disciplinary expert team of Educational Psychologists, Specialist Teachers from the ASL Service and Speech and Language therapists, taking into account the most up to date evidence of effective practice.

3.3   A programme for Headteachers was completed in 2016-17, successfully reaching almost all Headteachers and other senior leaders in Primary and Secondary Schools. The training of senior leaders is followed up by whole school training, with the aim that all staff in all schools will undertake training by 2020.

3.4   Since August 2016, 38 Primary schools and 18 Secondary Schools have completed the whole school training, representing approximately 2,300 members of staff.

3.5   Autism training for early years establishments commenced in August 2017. To date 387 early years staff have undertaken training. A further 9 training sessions will take place in the school session ending in June 2018.

3.6   Every year, transitions of autistic children from nursery to primary schools are projected and training is targeted to P1 teachers who will have children with autism joining their classes. In August 2017, 112 P1 staff received this training in preparation for their new intake. A range of targeted training was also provided for special school leaders, foster carers and Health Visitors.

3.7   The professional learning programme has been very well received (see appendix 1 for more details). There is emerging evidence of its positive impact in schools in the effective use of visual timetables, safe spaces, improved communications between school and home and in child planning. Further evaluation will be undertaken over the next two years in conjunction with the development and implementation of an Autism Accreditation scheme for schools.

3.8   Professional learning is also supported through more targeted support from Psychologists, specialist ASL Service staff, National Health Service (NHS) and Child and Adolescent Mental Health Services (CAMHS). This may focus on an individual child, a class or a 'Team Around the School' approach to support whole school approaches to improving inclusive practice.

3.9   One example of the Team Around the School approach is the Behaviour Support Groups that have been established to support staff within specialist placements to manage the behaviour of pupils with autism, which can sometimes be challenging, within their establishments. The data from a recent evaluation suggested the groups are successful in enabling school staff to develop an understanding of young people's behaviour and allowing for the identification and sharing of strategies to support these learners.

3.10   A second example of systemic whole school approaches to learning and improvement is the Visual Support Project. There is strong evidence that the systematic use of visual support reduces stress and enables learners with autism to understand their environments and participate more independently. This involves the use of recognised visual symbols to label the environment and to embed the use of visual timetables so that learners know what to expect. To date, whole school visual support approaches have been successfully adopted by seven early years establishments, 59 primary schools and six special schools. The feedback on this has been very encouraging. Not only does systematic visual labeling support learners with autism but many other learners too. It also helps learners to understand the needs of others and to foster an inclusive culture. A detailed evaluation of the Visual Support Project is currently underway and a report on its impact will be available in 2018.

Strengthening Support for Parents

3.11   Working in close collaboration with NHS, all parents are now offered a Family Follow up meeting shortly after their child has been diagnosed with Autism. Consultations with parents indicate that the period following a diagnosis is a particularly difficult time and they appreciate this early opportunity for support. Family Follow-up meetings provide personalised support from a Speech and Language Therapist and a Specialist Teacher from the Additional Support for Learning Service. As well as providing the opportunity to ask questions about the diagnosis, they provide parents with information about the supports available. This in turn informs child planning which follows at nursery or school.

3.12   Effective support and intervention from the early years onwards is recognised to be of particular importance to children with autism and in supporting parents themselves. In light of this, and informed by feedback from parents and schools, from August 2017 the ASL Early Years Service was re-organised into a dedicated team to strengthen early intervention and continuity of support throughout nursery and the child's transition into school. Where appropriate, support is also offered to parents in relation to supporting a child in the home and community as well as in early years provision.

3.13   Family follow up is part of range of parent supports offered in Edinburgh, which take into account parent's needs and evidence based practice. Parent programmes are geared to reflect key ages, stages and transitions in children's lives. The organisation of the programmes takes into account the locations, frequency and type of support which we have found parents to seek. Over the past two years there has been a significant growth in the range and number of parent programmes and these have been very well received (see Appendix 2 for more details).

3.14   Following its successful introduction to schools and demand from parents, the visual support project was extended to provision in libraries. Software is now available and staff trained to support parents to make visual resources that help their child in day-to -day family life. Most recently, following a successful bid to the Scottish Government innovation fund, the approach is now being tested in family homes with encouraging feedback from parents.

Visual Support Project – Parental Feedback
"I think it's the involvement from all parties, it's not just home, it's nursery and everyone involved with your child in these early stages – they need to have a common strategy. And I think this is where ASL can go in and train us – train people from the very early stages – and provide a common way of working with the child – how you use the visual timetable, the language that you need to use. I think that's what there needs to be in place where all parties come together, everyone working consistently"

> "I had a visit at home which was kind of modelling a play session using the visuals and I found that really useful as they were actually using my child's stuff that was in the house so when I did it the next time, it wasn't anything strange to my child because my child had used it with ASL staff member already. That was really useful"
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> "I think it is that contactability…When they came out to the house it was really valuable. ASL have been out three times. I would not have been without any of those home visits. But knowing every single time they do come out they always say, "If there are any other questions or you want us to come out again just contact us." Nice to know they are there if you need that extra support."

3.15 The strengthening of support for parents is a continuing priority which will be carried forward jointly with NHS and third sector partners.

Increasing capacity for children with Autism who require special school provision

3.16 Over recent years there has been an increase in the number of children with Autism identified in Edinburgh. The most recent figures indicate that around 850 (approximately 2%) of pupils in City of Edinburgh schools have Autism. Of these, approximately 50% also have a learning disability.

3.17 The factors underpinning an increased number of children being identified as having autism are complex, but the biggest single factor appears to have been improved assessment. Over recent years there has been significant investment and improvement in diagnostic services and generally in Edinburgh children are now identified at an early stage. In light of this, it is reasonable to assume that the number of children with autism in Edinburgh will rise in line with the overall child population.

3.18 In December 2015, the Education, Children and Families Committee considered the [Rising Rolls for Edinburgh Schools report](), which estimated that by 2030 school populations would rise from 47,000 to 60,400. This represents an increase of almost 30%.

3.19 At a similar rate of growth, this represents an increase, for all children with autism, from 850 to 1208 and, for children with autism and a learning disability, from 425 to 604. This equates to an annual average growth rate of provision equivalent to 24 additional children with autism per year. At least 1 in 2 of these children, 12 per annum, are likely to require specialist provision.

3.20 Special schools in Edinburgh cater for a range of complex additional needs (Appendix 3). Provision for pupils who have autism and a learning disability is made across a range of schools including Prospect Bank, Redhall, Pilrig Park, Woodlands, St Crispin's and Braidburn. According to individual circumstances, some provision for children with autism and a learning disability may also be made at Oaklands, Rowanfield and Kaimes Special Schools and in special

classes and enhanced provision as well as in mainstream schools across the city.

3.21 On 7 March 2017, the Education, Children and Families Committee approved a programme of work to ensure that our special schools keep pace with changing needs. This includes reorienting provision to increase special school provision for children with autism and future proofing the new St Crispin's. A number of other steps were identified for short, medium and longer-term action to ensure that we have the right mix for our population. An overview of a 10-year projection of specialist provision in set out in Appendix 4.

3.22 In 2015, in response to increased need, we created 14 additional places in existing schools. In March 2017, I reported the successful outcome of the review of provision at Oaklands and Braidburn Schools. This resulted in the creation of two new classes at Braidburn school. It is envisaged that further growth will be necessary at Braidburn in August 2018.

3.23 The design of the new St Crispin's includes scope for 2 additional classes creating 12 additional places, which would become available from 2020-21. In order to best complement other provision and to make best use of the facilities at St Crispin's, it is proposed that in future, the school would continue to operate both primary and secondary facilities but would be weighted towards the older age range. In addition, the new St Crispin's will have specialist behaviour support facilities, which will support learners from other schools, particularly Kaimes.

3.24 Statutory public consultation on the proposals for the new St Crispin's will take place early in 2018.

3.25 The pressure on special school places is exacerbated by the combined effects of wider opportunities and higher expectations associated with a curriculum for excellence and pressures on the availability of attractive post -school options. This is leading to more learners who would have left school at 16 years staying on for S5 and S6. In some instances, by that stage, the range of opportunity available in a relatively small special school environment is very restricted. For those learners, the opportunity to progress their skills for life and skills for work would benefit from an alternative support provision.

3.26 We propose to investigate the feasibility of senior phase hubs, which would deliver core skills and provide a supportive link into work experience, college courses and the development of independent living skills. If this proves successful, it would relieve pressure on special school places for younger children who require them. Combined with the use of technology to support flexibility, the hubs could also provide an intermediate resource for other learners currently not attending mainstream school due to factors including health needs, such as anxiety based non attenders.

3.27 Further planning for provision for Autism will be taken forward in a review of Kaimes school, special classes and the enhanced support available in four Secondary Resource schools.

Improving the quality of environments for children with Autism in schools and classes

3.28 The quality of our school environments can have significant implications on all learners. For learners with additional support needs, these can be particularly acute. On the one hand, larger class sizes and reductions in flexible spaces in schools present additional challenges, especially for children with Autism and problems with attention. On the other hand, improvements in acoustics, colour schemes, lighting and reducing environmental distractions can greatly improve learner's experiences.

3.29 With the support of the Council's design teams, these factors have been taken into account in a number of recent developments in early years, primary schools, special classes and the preparations for the new St Crispin's. The feedback from staff in all sectors has been very positive. Further evaluation of the impact of inclusive design is now being undertaken by our Educational Psychology Service.

3.30 The lessons from these projects will be used to inform an updated brief for continuing improvement in schools and major capital projects.

Strategic improvement plan for Autism

3.31 In 2011, the Scottish Government and COSLA published The Scottish Autism Strategy. The strategy sets out a vision that people on the Autism spectrum are "*respected, accepted and valued by their communities and have confidence in services to treat them fairly so they are able to have meaningful and satisfying lives.*"

3.32 The Scottish Autism Strategy sets out 2, 5 and 10 year goals. The first two years (2011-2013) focussed on access to mainstream services. In 2015-2017 there were 4 strategic priorities identified: A Healthy Life; Choice and Control; Independence and Active Citizenship.

3.33 The Strategy set out an expectation that each local authority would prepare an action plan for the improvement of its services for people with autism. In November 2013, the Council agreed a plan for adults and children and young people with autism, including a short-term plan for children and young people, with a wider plan to follow.

3.34 The Edinburgh Plan for Children and Young People with Autism, 2017-20 was developed after detailed consultations with parents and service partners in 2015-16. The plan describes progress achieved 2013-16 and sets out our intentions for improving outcomes for children and young people.

3.35 The plan reflects the strengths and challenges to improve the opportunities and experiences of children and young people with autism. Amongst the areas of strength, most young people with autism achieve positive outcomes in terms of post school destinations. In 2014/15, 90.2% of school leavers with Autism left mainstream schools in Edinburgh to positive destinations compared with a national average of 88.4%. Maintaining and improving upon these outcomes remains a significant challenge and this is reflected amongst the other improvement priorities for the next three years.

3.36 The plan sets out six improvement priorities:

1) Improve awareness and assessment in all settings to enable early and proportionate responses so that all children benefit from their full entitlement to education.

2) Provide smooth multi-disciplinary service delivery through Integration of C&YP Planning.

3) Child planning will enable a shared understanding of promoting wellbeing children with autism.

4) Practice takes into account that autism presentation may be gender specific and, behavioural or mental health problems.

5) Work with secondary schools to increase availability of flexible options for learners with severe anxieties to reduce frequency and severity and increase learners' resilience and adaptive skills.

6) Provide quality school environments appropriate to need for learners with autism to reflect anticipated pattern and level of need.

3.37 Under each of these priorities the plan sets out detailed improvement objectives and actions (Appendix 5).

3.38 When we undertook earlier consultations, we agreed to return to parents with the plan to give them the opportunity to comment further and we are now arranging to follow that through.

3.39 We will provide updates on progress to Committee in future reports.

Inclusive practice - enabling the needs of all learners to be met, raising attainment and closing the gap.

3.40 In March 2017, I reported on progress arising from a review of inclusive practice in schools. Since then the findings have been shared with head teachers from all sectors.

3.41 The recommendations of the inclusive practice working group received wide support and schools identified key challenges that they would like to see

addressed. These included concerns with challenging behaviours and the health and safety of learners and staff. There was wide agreement on the relevance of developing shared practices to reflect our 5 Rs:

• Relationships

• Resilience

• Rights

• Respect

• Restorative approaches

3.42 Taking account of the feedback from head teachers and others, an Inclusive Practice Strategy Group with representation from schools and key services has been convened and held its first meeting in November. The Group is addressing a number of work streams:

- Citywide vision known by all, leading to greater consistency
- Review key policies and procedures
- City-wide school and community approaches linked to vision
- Strong cycle of core training
- Develop a model that supports schools and partners to deliver tailored supports to the most vulnerable learners
- Developing better local knowledge and robust evidencing of best practice and self evaluation
- Valuing staff and building school based capacity
- Voice of Children, Young People and Families / Family and Community Engagement

3.43 After further more detailed work, the Strategy Group will undertake a wide engagement programme later in the school session and will bring forward agreed recommendations to commence implementation with the next cycle of school improvement planning.

3.44 It is recognised that there are a number of associated factors which impact on schools' capacity for inclusion. These include the pressure arising from the recruitment and retention of staff; school environments; capacity of partnership working and the future profile of specialist provision. In light of this, the Strategy Group will link into with other work within Communities and Families in these areas.

3.45 All of the above is informed by the National Improvement Framework priorities for Excellence and Equity *'ensuring children and young people develop a broad range of skills and capacities, whilst supporting them to thrive, regardless of their social circumstances or additional needs.'* With this in mind, the Inclusive Practice Strategy is being coordinated together with strategic work streams for Health and Wellbeing, Literacy and Numeracy as part of an

inclusive approach towards achieving equity and excellence for children and young people in Edinburgh.

Improvement models for EAL support.

3.46 The biggest single group of learners with additional support needs in Edinburgh's schools require support with English as an Additional Language (EAL). In association with this growth, there has been a shift in the patterns of first language and the distribution of learners requiring EAL support. These changes have presented new challenges and the opportunity to adopt new approaches.

3.47 In March 2017, I reported on the example of St David's RC Primary School, in which the pupil profile has changed significantly over the past five years, with a large increase in the number of pupils who have English as an Additional language over a relatively short period of time.

3.48 The school leadership team and EAL specialists within the Additional Support for Learning Service concluded that it was no longer effective to approach the needs of these learners as an 'add-on' and that approaches to supporting EAL learners needed to inform the school as a whole and the overall approach to teaching in the classroom. This took the form of:

- A transition programme involving school, EAL and Community Learning and Development staff to help inform parents about aspects of the learning experience in P1 and to bring Polish and Scottish families together;

- Delaying the introduction of phonics in P1, to allow a focused inter-disciplinary learning approach to developing listening and talking and vocabulary.

- Wider development of the school's inclusive ethos, including staff visits to two schools in another authority; hosting English for Speakers of Other Languages (ESOL) courses at the school; running cultural/diversity events; more diverse representation on the Parent Council and appointing bilingual (Polish) staff.

Table 4 – Inclusive Approaches to Meeting the Needs of Bilingual Learners Implementation Programme

School	Term 1	Term 2	Term 3	Term 4	Term 5
A	Capacity-building block	Support to continue to embed practice	Advisory		

B	Direct teaching based	Capacity-building block	Support to continue to embed practice	Advisory	
C	Direct teaching based	Direct teaching based	Capacity-building block	Support to continue to embed practice	Advisory
D	Direct teaching based	Direct teaching based	Direct teaching based	Capacity-building block	Support to continue to embed practice
E	Direct teaching based	Direct teaching based	Direct teaching based	Direct teaching based	Capacity-building block

3.49   In the first year pilot, there was good evidence that the new inclusive approach has raised attainment in the school and contributed towards closing the gap in English and Literacy levels to benefit of the whole school population. There was also evidence of improvements in Numeracy and in engagement in science. In addition, with this new approach, some learners who had previously required Support for Learning were able to have their needs met without the need for that additional support.

3.50   Since August 2017, the work at St David's has moved into a phase of consolidation and capacity building and three new schools have been introduced to the programme and this will progressively increase to involve more school through 3-year cycles.

Create dynamic networks of support at school, cluster, locality and city-wide levels

3.51   Since August 2016, our ASL Services were re-organised to provide cluster teams around secondary schools and associated primaries. This supports closer collaboration with schools, educational psychologists and Speech and Language therapy teams.

3.52   As part of the service specification of ASL Family Support Services from March 2018, the new provider of our commissioned service will operate as part of an extended cluster team.

3.53   The cluster approach provides the main channel of delivery and provides an access point to the city-wide services in more specialist areas e.g. visual impairment, teachers of the deaf, literacy and dyslexia and hospital teaching services. This model also supports collaboration and shared learning across clusters and for staff with specialist skills to be drawn in to meet particular

needs where required. A new approach to accessing a wider range of supports via the cluster team is being tested in Wester Hailes from January 2018 and, if successful, this will be extended to other clusters.

3.54 Locality approaches are being developed with a particular focus on learners who require more bespoke provision for social, emotional and behaviour support needs, families where more than one child requires specialist help and looked after children. A key part of this will be stronger links between social work practice teams, schools and the cluster teams.

3.55 At a city-wide level, work has begun to establish a virtual learning environment which supports more flexible personalised approaches via remote access to learning and teaching in a range of subjects. Staff from a number of schools are contributing to this development which is being co-ordinated by the ASL Service. This will support learners in different contexts who are unable to access mainstream school for a variety of reasons, including learners who are in hospital, placed within Edinburgh Secure Services and those who have anxiety based school refusal.

Redesign provision for social, emotional and behaviour support needs

3.56 Following a public consultation and the decision by the Full Council in June 2017, the Scottish Government gave approval for the closure of Panmure St Ann's in August. The four remaining pupils all transferred to other schools and have been provided with continuing support appropriate to their needs.

3.57 In March 2017, I reported on the very good progress that has been achieved in strengthening support for children with social emotional and behaviour support needs. This has been underpinned by an integrated approach to child planning to address support needs in the school, family and community in a joined up way and by improving collaborative working.

3.58 Strong collaborative working between schools in all sectors, ASL Services, psychological services and third sector partners has had a significant impact on outcomes for children and young people. Children's needs are being identified earlier and increasingly this is leading to appropriate early intervention through whole-school approaches and targeted support. Whilst there is still more to do, the positive benefits of this approach for learners are clear and it led to has led to a significant reduction in referrals for special schools for learners with social emotional and behaviour support needs.

3.59 Since 2010/11, special school placements for additional social, emotional and behaviour support needs have been reduced by almost 50%. This has made a significant contribution to shifting the balance of care and the proposal to close Panmure St Ann's.

Table 5: Special School Placements for social, emotional and behavioural support needs, 2013-17

Special School/Year	2013/14	2014/15	2015/16	2016/17	Feb 2017
Primary - Rowanfield	33	31	28	23*	32
Secondary					
Gorgie Mills	55	53	53	46	51
Panmure St Ann's	57	43	26	14	3
Secondary Total	102	96	79	60	54
Total	**145**	**127**	**107**	**83**	**86**

* New placements were suspended for 6 months during and immediately following accommodation problems requiring decant

3.60 In light of this success we are now beginning to return some children with more complex needs from outwith the city to our special schools. Working closely with residential services and social work practice teams, the City's special schools are helping to bring about further progress in the balance of care.

3.61 A key part of the recipe for success is partnership working between schools, Psychological Services, the Additional Support for Learning Service linking, the NHS, social work teams and commissioned family and community support services.

3.62 Over the course of last session, the provision of secure accommodation by Edinburgh Secure Services (ESS) was reduced from 12 to 6 beds as agreed by the Education, Children and Families Committee in December 2016. This reduced the risks associated with a dependency on achieving income targets from the sale of beds and brings the usage of secure services in Edinburgh closer towards that of other authorities.

3.63 Alongside these changes, we have developed stronger links between ESS school team, other special schools and the ASL Service. Over the next 12 months we will we will evaluate options for the future delivery of school education to ESS residents. The key aims of this will be to consolidate progress in the leadership and quality of provision on a sustainable basis, to improve the range and quality of provision in line with learners' needs and to provide greater continuity and strengthen support as learners move on from ESS into other schools in the community.

ASL and Family Support Services Procurement

3.64 Over the past 9 months we have undertaken a major procurement programme for ASL and Family Support Services. The aim is that this will provide a new

integrated service model, which will support parents and complement the work of schools, Psychological Services, the ASL Service and our NHS partners.

3.65 The model brings together disparate services within one framework enabling a coherent approach to addressing factors in and out of school and throughout the child's journey towards a positive destination. This will include the capacity for personalised approaches where an alternative to timetabled universal in-school programmes are required.

3.66 The proposed service model recognises that parents and carers are the most important caregivers and prime educators in children's lives. It reflects the principle that we get the best outcomes for children when we build positive relationships with families and the services that support them.

3.67 Our approach emphasises working closely *with* a child or young person, the parents and carers and the team around them, to build relationships and resilience and secure positive outcomes.

3.68 The new service will enable effective inclusive practice that prevents or removes barriers, enables early intervention, prevention and restorative approaches appropriate to the age and circumstances of children and young people.

3.69 This will be part of collaborative 'one service' ethos, whereby all services work with a common understanding of a child's or young person's personal and cultural identity, strengths, needs and aspirations. Services will work with children and young people 'without boundaries' to achieve positive outcomes regardless of their social circumstances or additional needs.

3.70 The procurement process is approaching its final stages and the outcome will be reported in the first instance to the Policy and Resources Committee in March 2018.

Developing an inclusive learning culture

3.71 All of the above reflects our commitment to creating an inclusive learning culture with learners, parents, schools, services, clusters, localities and partners to improve outcomes and promote best value.

3.72 We recognise that to enable all learners to achieve positive outcomes, regardless of their social circumstances or additional needs, is a major challenge. Enabling all teachers, schools and services to be the best they can requires an unstinting commitment to learning, sharing effective practice and improving performance. To achieve this, as illustrated above, we are continuing to invest in areas of strength and look critically at gaps and weaknesses.

3.73 Our commitment to continue to improve inclusive practice recognises that this provides the most effective way to meet learners' needs, prevent distress and disruption and to support staff.

3.74 In 2016-17, an updated edition of the primary teacher's handbook 'Inclusive Learning and Collaborative Working' was issued to staff across all primary schools throughout the city supported by an extensive professional development programme.
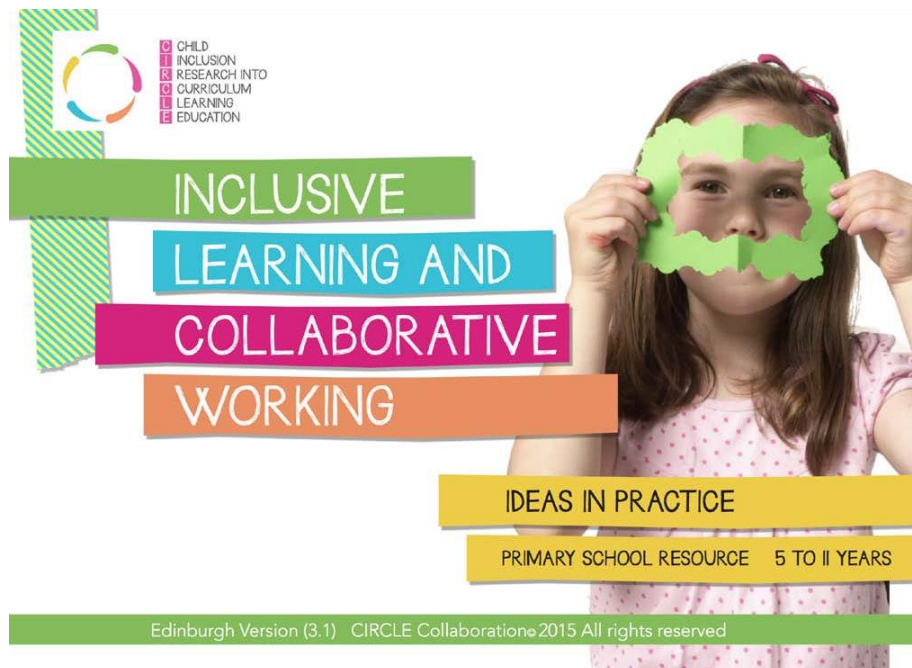
3.75 The resource is co-produced by teachers, therapists, support staff and Queen Margaret University to support inclusive practice in schools. It takes into account experience and suggestions of hundreds of practitioners who have used the resource in Edinburgh's schools to support thousands of learners over a period of three years together with the most up to date research findings and policy guidance.

3.76 The resource includes checklists and planning tools to support communication between home and school, record keeping and professional learning. The framework also strengthens self-evaluation, enabling assessment of individual need and monitoring via the CIRCLE Inclusive Classroom Scale (CICS) and the CIRCLE Participation Scale (CPS).

3.77 The resource has attracted interest from a number of other authorities. Education Scotland have expressed interest in as they prepare to develop good practice guidelines to support new Scottish Government guidance on The Presumption of Mainstreaming https://consult.gov.scot/supporting-learners/presumption-of-mainstreaming/user_uploads/sct04173422181.pdf

3.78 The Scottish Government has recently agreed to fund the University to work with staff in Edinburgh schools and services to establish reliable objective measures of the quality of experience of children with additional support needs. This will help to inform assessment and planning to improve the day to

day experience of children with additional support needs and their progress towards positive outcomes.

3.79 Similar resources have also been developed for Secondary Schools and Early Years. The updated Early Years Resource 'Up, Up and Away' is currently in preparation for a re-launch in 2018-19 and feed back is currently being collated on the prototype of the secondary resources which has been tested in a number of schools.

3.80 Problems with literacy are the most common manifestation of additional support needs. In light of this, the Council has a well established Integrated Literacy Strategy. The strategy spans age 3-18 years, incorporating effective inclusive approaches to literacy teaching for all, targeted early intervention for learners who are struggling to make progress and additional support for learners with persistent difficulties including dyslexia.

3.81 As part of the Literacy Strategy, the Council has developed comprehensive guidelines on Literacy and Dyslexia backed up with ground breaking professional development and high quality specialist support. Taking account of progress to date and feedback from learners, parents and staff, the Literacy and Dyslexia Guidelines are being updated and will be issued to all schools in 2018-19.

4. Measures of success

4.1 Quality Management in Education 4 - a systematic approach to the self-evaluation for local authorities in relation to their education functions (QMIE), Education Scotland, 2015.

4.2 Edinburgh Children's Partnership Plan 2017-20:

4.2.1 Every child will have the best start in life.

4.2.2 Children and young people's attendance, engagement and achievement will be improved and the poverty related attainment gap will be reduced.

4.2.3 Every child and young person will have good wellbeing and achieve the best possible health.

4.2.4 Equity amongst children and young people and their families will be advanced.

4.3 Children, young people, their families and communities will be empowered to improve their wellbeing.

4.2 Children and Families Improvement Plan Targets:

4.2.1 All learners with additional support needs have their needs met;

4.2.2   Minimising the number of children requiring Out of Council school provision;

4.2.3   Providing effective, proportionate and timely support to children in need.

5.   Financial impact

5.1   The Council has recognised the growing scale and complexity of needs and took this into account in the budget processes over the past five years, thereby enabling demography-based growth in funding to support measures to address the principal pressures and the benefits of early intervention.

Table 6: Funding for Additional Support for Learning and Special Schools 2012-17

Annual Approved Budget	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18
ASL*	£16.4m	£16.6m	£17.2m	£17.9m	£18.8	£19.5
Special Schools and classes	£16.6m	£16.7m	£17.6m	£18.5m	£18.2 **	£17.2***
Total	£33m	£33.3m	£34.8m	£36.4m	£37m	£36.7
ASL* Includes: Additional Support Funding to Schools, ASL Service, Psychological Service and Speech and Language Therapy ** Reductions as approved in 2016/17 budget *** Reductions as approved in the 2016/17 and 2017/18 budget relating to the closure of Panmure School and the review of non-teaching support staff.						

5.2   The Council's financial planning assumptions for 2018/19 provide additional resources to acknowledge the increases in pupil numbers and the increased proportion of the school population with additional support needs. The current projected increases in the school population for the period 2016-18 indicate the prospective continued growth (see table 2).

5.3   The funding for Additional Support for Learning is reflected in a number of budgets. The key areas and funding over the past seven years are summarised in Table 6.

5.4   Alongside the additional funding, in line with priorities established in 2011, a number of steps have been taken to strengthen performance to meet the changing profile of needs across all sectors as illustrated in this report above.

5.3   All operational actions identified within this report will be provided within the approved budgets for Children's Services.

6. Risk, policy, compliance and governance impact

6.1 There are statutory duties to meet additional support needs and equalities requirements which are taken into account in this report and the associated budget processes.

7. Equalities impact

7.1 The findings and recommendations in this report are directed towards promoting equalities for children and young people for whom the City of Edinburgh Council is responsible.

8. Sustainability impact

8.1 There are no impacts on carbon, adaptation to climate change or sustainable development arising directly from this report.

9. Consultation and engagement

9.1 Consultation and engagement has taken place throughout the process of gathering the data for this report. This has included feedback from lead officers in a range of services and schools from Communities and Families and Education Scotland.

10. Background reading/external references

10.1 [Getting it Right for Special Schools - Planning for the Future – Report to Education, Children and Families Committee 11 October 2016](#)

10.2 ASN Planning and Performance Update Report March 2017

10.3 [Improving Support for Children and Young People in Need in Edinburgh - Consultation on a Proposal to Close Panmure St Ann's Special School, 11 October 2016](#)

10.4 [How Good is Our School? (4) 2015](#)

10.5 The Presumption of Mainstreaming https://consult.gov.scot/supporting-learners/presumption-of-mainstreaming/user_uploads/sct04173422181.pdf

10.6 [National Improvement Framework](#)

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11. Appendices

1. Building staff capacity for supporting children with autism in Edinburgh August 2016-November 2017

2. Autism related parent programmes August 2016-October 2017

3. City of Edinburgh Council Special School Provision 2017/18

4. Overview of projected changes in specialist provision in light of demographic changes

5. Edinburgh Plan for Children and Young People with Autism 2017-2020

Appendix 1 -Building staff capacity for supporting children with autism in Edinburgh August 2016 - November 2017			
Support	**Number of staff attending:**		**Direct quotes from staff training evaluations**
	No of establishments:	No of staff:	
Primary Whole School Training	38/ 87 Schools since August 2016

8 additional schools confirmed Nov 2017-June 2018 | 1100 staff trained | • Lots of realistic and very useful strategies to use in class.
• Clear strategies and advice.
• Practical usable advice.
• The information/ideas were very clear and will be easy to transfer to a classroom situation
• Reminded me of how to speak to children- short phrases and emphasise
• Lots of different strategies I can implement.
• Provided a greater understanding that the children with ASD are not normally capable of deliberately bad behaviour, i.e. it's not intentional
• Visual timetable modelling (was a strength).
• Good explanation of why we use timetables and timers, etc.
• Lots of good advice on managing and making adjustments within my own classroom.
• Liked the message that once a strategy is in place and working <u>resist</u> temptation to take it away on belief it has worked. Importance to stress to keep things in place.
• Gave insight into child's perspective.
• Examples of what we might notice and what we can do. |
| Secondary Whole School Training | 18/ 23 since August 2016

2 additional schools confirmed Nov 2017-June 2018 | Approx. 1260 staff | • Knowledge of presenters
• Delivery by multi-disciplinary team effective
• Greater understanding of challenges faced by students |

| Early Years ASD Staff Training (started August 2017)

Plan to train 2 000 staff over 2 years | 3 sessions

9 additional sessions arranged Nov 2017-June 2018 | 87 staff trained | • Clear, well planned and organised, interspersed with practical elements to give a better feeling of challenges of autism. Gives deep insight.
• It was relevant to current practice, informative and supported experiences which have occurred with our children in our setting.
• Knowledgeable staff/ presenters sharing expertise and making it very relevant to early years.
• It was good to have the perspective of the three different professionals.
• A very experienced group of people delivering a well thought out training programme. It was good to learn more about the complexities of ASD and strategies that can be put into place to help our children.
• Interactive. Allows you to understand autism from child's perspective.
• Actually using the timetable and movement break reinforced the messages.
• Information to develop my practice. Very informative and promotes greater confidence to deal with individual children.
• More aware to look deeper into behaviour.
• Very interesting and I'm clearer on communication (with) and managing autistic children.
• I refreshed my knowledge and gained some new information.
• Very professional, lots of useful information that can be immediately implemented at work. Easy to understand.
• Excellent opportunity to have the whole staff team training.
• Will encourage the staff to do further discussions.
• I think it would be very helpful for this course to be revisited in 2 or 3 years time to keep thinking/ learning up to date and relevant.
• I'm grateful to the ASL Service for providing tailored training for Early Years staff, it makes such a difference! |
| P1 ASD Training | 2016:

11 sessions

2017:

11 sessions | 2016:

104 staff trained

2017:

112 staff trained | • Clear key messages.
• Practical advice for the classroom. Good, clear content which is realistic.
• Very clear and comprehensive. Accessible. Good mix of theory and practical suggestions with examples.
• The visuals being used and (learning) how to use them in class.
• Useful to discuss strategies and think about different situations/ understanding that no two children with autism are the same.
• It could allow me to notice some things in pupils that I wouldn't necessarily have seen before. Good ideas to think about.
• You learn new things every time you come on this course.
• Good ideas to prep for pupils in August. Feel like there is good support beyond school team! |

			• Really good to have different professionals contributing to delivering the training.
Playboxes	6 x CPD sessions + 1 PSA Training sessions	500 staff trained	• Extremely clear and practical. • Nice to have input from different services presenting. • Left feeling motivated and enthusiastic to develop Playboxes in Early Years Centre.
ASD Training for Senior Managers in Schools (3 sessions)	HTs Session 1 6th Sept 2016: 80/88 Primary Schools 22/23 Secondary Schools DHTs Session 6th March 2017: 55/88 Primary Schools 18/23 Secondary Schools	102 Head Teachers trained 73 School Senior Management trained	• Interesting to find out about the challenges posed by mainstream school environment to children on the autism spectrum. • Lots of useful information – reinforcing what we do well and supporting next steps. • Practical helpful session, outlining Key Messages very clearly.
ASD Training for Senior Managers in Special Schools Including: Ros Blackburn and Rita Jordan ASD Training for staff working in Language	9th Jan 2017: 8/12 Special Schools represented 6/ 6 Language Class Schools	13 Special School staff trained 32 Language Class staff	

Classes and Special Schools			
ASD Training for ASL Service Staff	ALL ASL Teams	Approx. 120 staff trained*	
Behaviour Clinics in Special Schools (and Language Classes?)			
ASD and Attachment Training for Foster Carers (with CAMHS)	-	30 Foster Carers trained	
ASD Training for Health Visitors	-	43 Health Visitors Trained	• The session was very informative about signs and how these apply depending on age and stage of child. I found this very helpful and relevant for my future career as a student child health nurse. • It was very useful and practical for using in my Health Visitor role. • Use of evidence based guidelines (strength) • Fantastic training, feeling far more confident in dealing with families
ASD Training for PE teachers/ Active Schools	-	20 PE teachers/ After School Club staff trained	• A lot of useful information about autism characteristics and how to help kids with those aspects in class, using examples and personal experience.

Training for staff running Family Follow Up	-	10 ASL/ EP/ AHPs trained	
Whole School Visual Support Project Training	3 x EYC 4 x Stand Alone Nurseries 6 X Special Schools (3 achieved Bronze Level; 1 achieved Silver Level) 59 x Primary Schools (20 achieved Bronze Level)	-	
Social Thinking – 'modelling the model' to school staff	6 schools		
Keynote Presentation at City of Edinburgh Early Years Conference (Hatty Chick) Jan 2017		Approx. 300 staff attended	

Cross Authority ASD Conference (guest speakers Rita Jordan and Ros Blackburn; Jean MacLellan, Autism Network Scotland; range of practical workshops)		50 City of Edinburgh Staff attended	• Just a wonderful insight from so many different perspectives. Terrific and so useful to have presentations related to our practice. • Rita's insights and experience were valuable and laid a very good foundation for Ros' talk which was wonderful and provided a real look into the ASD window – together with practical strategies and a sound rationale for them • A brilliant insight from Ros. Lovely to see and hear fresh ideas from someone who has experienced educational approaches to autism • Good ideas/tips for educators' use of language and having high expectations of autistic individuals
Peter Vermeulen Cross Authority Event for Staff working in Special Schools and Language Classes		40 Edinburgh staff attended	• Real life examples give clear ideas and deepen understanding • It has been very thought provoking and makes you self-evaluate your own practice • Lots of practical advice as well as theory • Felt empowered and up skilled • Makes you think about how to improve things for pupils • Made (it) easy to understand context and how simple changes in practice can make significant impact in day to day (life) Practical ideas for supporting autistic pupils more effectively
Peter Vermeulen ASL Service Staff		Approx. 100 ASL / Psych Services staff attended	• Made me feel less fearful about working with ASD pupils. • Changing thinking about autism • New awareness of how autism works • There are not many presenters you can listen to for 2 hours straight and be captivated and informed throughout as well as entertained. • Inspiring, clarifying and brilliantly focussed • Highlighting areas of autism that are critical to supporting people with ASD and explaining how best to do this. • Really opened my eyes to certain misconceptions. • Totally put into question what I thought I knew about autism – I feel that I learnt a lot today • Entertainingly translated into practical strategies

Observations and Next Steps	

Observations/ General feedback:

Anecdotally we have received feedback about increased or improved use of:

- Visual Timetables
- Safe Spaces,
- environmental visual supports
- 2 key adults
- communication systems between home and school
- regular CPMs

Next steps:

Long term evaluation of impact of ASD Training based on the (implementation of Key Messages)

Consider whether this should be part of the Accreditation Process

Appendix 2 Autism related Parent Programmes August 2016-October 2017		
Support Provided	**Number of parents attending**	**Direct quotes from evaluations completed by parents:**
Hanen More Than Words programme **(Parents of children with ASD or related difficulties up to age 5)**	71 families	-
Hanen Talkability **(Parents of children with ASD or related difficulties, aged 4-8 years)**	26 families	-
Williams and Wright programme	30 families	-
Parent Information Sessions (pre-school)	77 families	**What have you found most helpful:** • Speaking to other parents and listening to other parents • The explanations re how to play at home • Getting lots of tips on sensory and communication
Parent Information Sessions **(P1-3)**	30 families	**What have you found most helpful:** • Overall very helpful, especially for parents who have only recently begun considering moving to formal diagnosis • Simply hearing, sharing experiences has been helpful • Strategies for helping with anxiety and behaviour • Information and support from other providers

Parent Information Sessions **(P4-7)**	38 families	**What have you found most helpful:** • Found it all helpful – we are just starting the diagnosis process and this has given real insight, putting my mind at ease • Having information provided on how to try and help our children has been invaluable
Parent Information Sessions - Evening **(Secondary)**	12 families	**What have you found most helpful:** • Lots of 'nuggets' of useful strategies in all of the sessions • Course facilitators were all very knowledgeable • Sessions were very informative
Parent Information Sessions – Day (P1-7)	43 families	**What have you found most helpful:** • Everyone/everything • Going back to basics with Introduction to ASD (session 1), you sometimes forget what its all about • Understanding better the way my child's emotions and thinking works. The reminders of strategies on how to cope and help my child • Absolutely every session has been fantastic. I have got a deeper understanding of what I maybe knew, I have learnt so much, I have gleaned ideas and something I did not expect – I felt reassured and proud that we (family) are working so hard and actually getting stuff right for our wee man • Well done. This is real help • I enjoyed the environment and friendliness of staff
Getting ready for P1	25 families	
PEERS programme	14 families	
Family Follow Up	Primary:	

	111 families referred 75 families attended Secondary: 75 families referred 23 families attended	
Teen Triple P (ASD)		
Direct quotes from Home VSP Parent Focus Groups (specifically about ASL Service support)	• ASL came straight in, from the beginning, in the nursery, setting everything up. The nursery was also very supportive in helping my child … I think the early involvement was key for our case • I think it's the involvement from all parties, its not just home, its nursery and everyone involved with your child in these early stages – they need to have a common strategy. And I think this is where ASL can go in and train us – train people from the very early stages – and provide a common way of working with the child – how you use the visual timetable, the language that you need to use. I think that's what there needs to be in place where all parties come together, everyone working consistently • You don't know what you want/need until someone suggests it • I had a visit at home which was kind of modelling of a play session using the visuals and I found that really useful as they were actually using my child's stuff that was in the house so when I did it the next time, it wasn't anything strange to my child because my child had used it with (ASL staff member) already. That was really useful • I think that is that contactability…When they came out to the house it was really valuable. ASL have been out 3 times. I would not have been without any of those home visits. But knowing every single time they do come out they always say, "If there are any other questions or you want us to come out again just contact us." Nice to know they are there if you need that extra support.	

Appendix 3: City of Edinburgh Council Special School Provision 2017/18

SCHOOL	SCHOOL TYPE	PROFILE
Pilrig Park	Day special Secondary.	Pilrig Park meets the complex additional support needs of young people where the presumption of mainstream cannot be met. The needs of the learners are primarily associated with learning disability and Autism Spectrum Disorder.
Woodlands	Day special Secondary	Woodlands meets the complex additional support needs of young people where the presumption of mainstream cannot be met. The needs of the learners are primarily associated with learning disability and Autism Spectrum Disorder.
Prospect Bank	Day special Primary	Prospect Bank meets the needs of primary aged learners with long term additional support needs where the presumption of mainstream cannot be met. The needs of the learners are primarily associated with learning disability and Autism Spectrum Disorder.
Redhall	Day special Primary	Redhall meets the needs of primary aged learners with long term additional support needs where the presumption of mainstream cannot be met. The needs of the learners are primarily associated with learning disability and Autism Spectrum Disorder.
Rowanfield	Day special Primary	Rowanfield meets the additional support needs of primary aged children with severe and complex social, emotional and behavioural needs.
Kaimes	Day special Primary and Secondary.	Kaimes meets the complex long term additional support needs of children and young people where the presumption of mainstream cannot be met. The needs of the learners are primarily associated with Autism Spectrum Disorder and learning disability.
St-Crispin's	Day special Primary-Secondary	St-Crispin's meets the additional support needs of learners with severe and complex learning disabilities and Autism Spectrum Disorder where the presumption of mainstream cannot be met.
Braidburn	Day special	Braidburn meets the needs of learners who have severe and complex additional support needs including those with Multiple disabilities and visual impairment. (MDVI).

	Nursery-Primary-Secondary	
Oaklands	Day special Nursery- Primary-secondary-	Oaklands meets the needs of learners who have severe and complex additional support needs including those with Multiple disabilities and visual impairment. (MDVI)
Gorgie Mills	Day special Secondary	Gorgie Mills meets the additional support needs of secondary aged learners with severe and complex social, emotional and behavioural needs.
Edinburgh Secure Services	Residential special	Howdenhall provide an education for young people who have been received into secure accommodation or young people who are resident in one of the close support units and who do not have an alternative school placement.

Appendix 4: Overview of Projected Changes in Specialist Provision in light of Demographic Changes

	2015 - 2016 Baseline								By August 2030							
Free Standing Special Schools	Classes based on capacity				Roll based on capacity				Classes based on capacity				Roll based on capacity			
	Nurs	Prim	Sec	Total	Nurs	Prim	SEC	Total	Nurs	Prim	Sec	Total	Nurs	Prim	SEC	Total
Braidburn	1	4	6	11	8	32	48	88	1	7	7	15	8	56	56	120
Oaklands	1	4	3	8	8	32	24	64	1	4	3	8	8	32	24	64
Gorgie Mills	0	0	12	12	0	0	72	72	0	0	10	10	0	0	60	60
Rowanfield	0	8	0	8	0	48	0	48	0	8	0	8	0	48	0	48
Panmure	0	0	6	6	0	0	54	54	0	0	0	0	0	0	0	0
Kaimes *	0	6	11	17	0	36	66	102	0	0*	16	16	0	0	96	96
St Crispin's	0	6	5	10	0	30	30	68	0	4	8	12	0	36	36	72
Pilrig Park	0	0	11	11	0	0	88	88	0	0	10	10	0	0	80	80
Prospect Bank	0	7	0	7	0	56	0	56	0	7	0	7	0	56	0	56
Redhall	0	9	0	9	0	72	0	72	0	9	0	9	0	72	0	72
Woodlands	0	0	10	10	0	0	80	80	0	0	10	10	0	0	80	80
ESS			3				12	12							12	12
Total Special School	2	43	64	109	16	306	462	804	2	41	65	109	16	300	424	760
% of school population								1.7%								1.2%
Language & Communication Classes*		14			84			84		18*				108		108
Enhanced Secondary Provision			20				100	100			20				120	120
Senior Phase Hubs	0	0	0	0	0	0	0	0	0	0	4	4	0	0	40/60	40 /60
Total located in mainstream								184								268/288
Total located in Special and mainstream								988								1020/1040
% of school population								2.1%								1.6%/1.7%

* Interdependent

Edinburgh Plan for Children and Young People with Autism 2017-2020

1.1 The Scottish Autism Strategy, was published by the Scottish Government and COSLA in 2011. The strategy sets out a vision that people on the Autism spectrum are "*respected, accepted and valued by their communities and have confidence in services to treat them fairly so they are able to have meaningful and satisfying lives.*"

1.2 The Scottish Autism Strategy sets out 2, 5 and 10 year goals. The first two years (2011-2013) focussed on access to mainstream services. In 2015-2017 there were 4 strategic priorities identified: A Healthy Life; Choice and Control; Independence and Active Citizenship.

The Edinburgh Autism Plan

1.3 When launching the national Strategy the Scottish Government set out an expectation that each local authority would prepare an action plan for the improvement of its services for people with autism.

1.4 In November 2013, the City of Edinburgh Council agreed a plan for adults and children and young people with Autism. It prioritised adults without learning disability but concerned all children and young people with Autism. It included a short-term plan for children and young people.

1.5 The Edinburgh Plan for Children and Young People with Autism, 2017-20 describes progress achieved 2013-16 and sets out our intentions for improving outcomes for children and young people.

The Scottish Intercollegiate Guidelines for Autism

1.6 In June 2016, the Scottish Intercollegiate Guidelines Network (SIGN) published its updated guidance for the Assessment, diagnosis and interventions for Autism spectrum disorders (*Scottish Intercollegiate Guidelines Network (SIGN). Assessment, diagnosis and interventions for Autism spectrum disorders. Edinburgh: SIGN; 2016. (SIGN publication no. 145). [June 2016]. Available from URL: http://www.sign.ac.uk.)*.

1.7 The SIGN guidelines provide an authoritative up-to-date assessment of research and evidence. They set out guidance on measures to support prompt diagnosis and appropriate intervention, including specialised educational programmes and structured support that may help a person with Autism maximise his or her potential. The SIGN guidelines provide a key reference informing our strategic improvement programme 2017-20.

1.8 The SIGN guidelines identify the key clinical recommendations that should be prioritised for implementation, as follows.

- All professionals involved in diagnosing Autism in children, young people or adults should consider using the current version of either the International Classification of Diseases (ICD) or Diagnostic and Statistical Manual for Mental Disorders DSM.

- As part of the programme of child health surveillance assessment should incorporate a high level of vigilance for features suggestive of Autism, in social interaction and play, speech, language and communication difficulties and behaviour.

- The assessment of children and young people with developmental delay, emotional and behavioural problems, psychiatric disorders, impaired mental health or genetic syndromes should include surveillance for Autism as part of routine practice.

- Professionals should consider that females with Autism may present with a different symptom profile and level of impairment than males with Autism.

- A diagnostic assessment, alongside a profile of the individual's strengths and weaknesses, carried out by a multidisciplinary team which has the skills and experience to undertake the assessments, should be considered as the optimum approach for individuals suspected of having Autism.

- Specialist assessment should involve a history-taking element, a clinical observation/assessment element, and the obtaining of wider contextual and functional information.

- Parent-mediated interventions (e.g. the Hanen 'More than Words' programme) should be considered for children and young people of all ages who are affected by Autism, as they may help families interact with their child, promote development and increase parental satisfaction, empowerment and mental health.

- Behavioural interventions may be considered to address a wide range of specific behaviours, including those that challenge, in children and young people with Autism, both to reduce symptom frequency and severity and to increase the development of adaptive skills.

- Interventions to support communicative understanding and expression in individuals with ASD, such as the Picture Exchange Communication System and the use of environmental visual supports (e.g. in the form of pictures or objects), should be considered.

1.9 In a number of the above there are existing areas of strength in Edinburgh, as well as areas for development that inform improvement priorities in this plan.

Background

1.10 In November 2013, the Council agreed a plan for adults and children and young people with Autism. It prioritised adults without learning disability but concerned all children and young people with Autism.

1.11 Edinburgh's action plan has 11 goals which take into account the Scottish Strategy's two-year goals and the best practice indicators.

1.12 The development of a local Autism strategy is one of the ten indicators for best practice within the Scottish Autism strategy. The Autism Plan for children and young people sits within the Council's overall approach to strategic planning for Autism in Edinburgh. The plan for children and young people sets priorities within the context of wider legislation and the Council's integrated assessment and planning framework for children and young people with additional needs, reflecting the principles of Getting It Right for Every Child (GIRFEC). It takes account of the consultative and development work that has been done over the past three years which has revealed where there are gaps in service provision (see Appendix 1).

Towards an Edinburgh Autism Strategy - Edinburgh Autism Plan (Scottish Autism Strategy Goals and Best Practice Indicators)

Goal 1 - A local Autism strategy developed (Indicator of best practice)
Goal 2 - Access to mainstream services where these are appropriate to meet individual needs (Foundations)
Goal 3 - Access to services which understand and are able to meet the needs of people specifically related to their Autism (Foundations)
Goal 4 - Removal of short term barriers such as unaddressed diagnoses and delayed intervention (Foundations)
Goal 5 - Access to appropriate post diagnostic support for families and individuals (particularly when there has been a late diagnosis) (Foundations)
Goal 6 - Implementation of existing commissioning guidelines by local authorities, the NHS and other relevant service providers (Foundations)
Goal 7 - Access to training and development to inform staff and improve the understanding amongst professionals about Autism (Indicator of best Practice)
Goal 8 - A process for ensuring easy access to useful and practical information about Autism and local action for stakeholders to improve communication (Indicator of best Practice)
Goal 9 - Process for data collection on people using services (Indicator of best Practice)
Goal 10 - Multi-agency care pathways for assessment, diagnosis and intervention services (Indicator of best Practice)
Goal 11 - Framework and process for seeking stakeholder feedback to inform service improvement and encourage engagement (Indicator of best Practice).

November 2013

2   Understanding Autism

2.1   Autism is a lifelong developmental disorder more commonly referred to as Autism Spectrum Disorder (Autism). It affects people differently, with some individuals being able to live independently and others needing very specialist support. The American Psychiatric classification of Autism, which has wide international recognition, has recently been revised and includes a change to simplify the definition of Autism. Everyone with Autism will experience difficulty in the following areas of functioning:

- Social communication and interaction – both verbal and non-verbal communication, e.g. difficulties with use and interpretation of voice intonation, figures of speech, facial expressions and other communicative gestures, the ability to understand what someone else might be thinking in a real-time situation and to understand the need for social 'give and take' in conversation and overall interaction.

- Restricted, repetitive and stereotypical routines of behaviour – which may be very restricting for their family, friends and colleagues but may also be psychologically distressing or inhibiting for the individual with Autism and behaviours related to sensory processing

(The Scottish Strategy for Autism, The Scottish Government 2011, The Scottish Government, St Andrews House, Edinburgh EH1 3DG)

How common is Autism?

2.2   The estimated prevalence of all people with Autism in the Edinburgh population is approximately 1:100.

Table 1. Estimated Autism population0-15 years: Scotland and Edinburgh 2015	
	Edinburgh
Total Population 2015 (0-15)	76,108
Estimate of population of children 0 – 15 with Autism*	875
NHS Special Needs System (0-18)	741
Education SEEMIS Records (School age records 5-18)	855 **
* Estimate based on prevalence rate of 1.15. ** 2016 School Census approximately 2% of pupils in CEC schools	

2.3   It is often suggested that there is a growing rate of children and young people in the population affected by Autism. It is undoubtedly the case that more children and young people in our population are being identified with this

condition. However, informed studies suggest that the most likely explanation is that historically, Autism has been under-diagnosed.

2.4 Receiving a diagnosis in childhood and having more effective interventions at that stage is likely to help people with Autism lead a fuller life with more positive outcomes in adulthood. It is likely that in almost all cases the effects of Autism would be recognised as a disability under the terms of the Equalities Act (2010). Where a child or young person has a disability they/their family are entitled to a range of additional supports, benefits and protections across different aspects of everyday living. National research also shows evidence of inadequate recognition and support for co-existing mental and physical problems.

2.5 Late assessment means that some people have struggled significantly through their lives without their specific needs being recognised or addressed. Young people and adults with Autism may therefore experience a variety of secondary problems because of their needs not having been fully recognised or understood. This means that it is the secondary effects of that struggle which come to the attention of services in the form of a different presenting problem e.g. school refusal, behaviours which are challenging, mental health problems, substance misuse and eating disorders.

2.6 Over a 20-year period, there has been a five-fold increase diagnosis in the number of 9 to 10-year-old children with Autism (Knapp 2009). The reasons for this increase are not known; certainly, the expertise for the diagnosis of children is now more available than it was 20 years ago, but there may be other factors. This trend has become increasingly evident within children's services in recent years where the mean age of diagnosis has also been reducing, which has, encouragingly, enabled earlier intervention.

2.7 In Edinburgh, approximately 850 children and young people (0 – 18 years) with Autism are identified as requiring some form of additional support. This number reflects the national prevalence figure and suggests that overall our approach is effective in identifying needs and provides a useful basis for planning future transition and adult services for people with Autism.

2.8 The levels of recording in the NHS special needs system would also appear to reflect the expected level of Autism in our child population. Records in Schools management information system (SEEMIS) were less reliable for this purpose, a significant number of children known to have Autism were not accurately recorded in that system. A recent audit demonstrated that even in special schools there was a significant under recording of needs, which is now being remedied. In the future SEEMIS is likely to have a significant role in recording Child's Plans and this will provide an opportunity to improve its performance in providing a full and reliable profile of learners with Autism in school more widely.

3. Developing the Autism Plan for Edinburgh for Children and Families

3.1 This plan is informed by:

- The National Autism Strategy 2011, Towards an Edinburgh Autism Strategy
- Edinburgh Autism Plan for People with Autism who do not have a learning disability
- Good practice in place in Edinburgh and elsewhere
- A multi-agency programme of self-evaluation and service improvement in Children and Families services
- Comments made during the Edinburgh Autism Plan consultation with children with Autism and their carers and professionals supporting them.
- Good practice guidelines and evidence-based practice

Services for children and young people where are we now?

3.2 The Autism Plan for Children and Families in Edinburgh reflects progress in relation to the goals for children and young people in 2012. In addition, over that period further work has been undertaken to extend the scope to include key areas of concern on support for all children and young people with Autism from birth to 18.

3.3 Areas of progress since 2012 include:

- The development and implementation of an integrated diagnostic pathway across Child Health, Allied Health Professionals and CAMHS.
- Development and dissemination of information leaflets for school staff, parents, carers and primary care staff about recognition and assessment pathways for ASD at different stages
- Introduction of post-diagnosis Family Follow–up meetings for all children and young people
- Developing an 'Autism aware' approach to child planning
- Testing programmes of parent and peer education and support
- Implementation of a rolling programme of parent information sessions for pre-school, primary and secondary stages
- Improvements in transition planning and support for inclusive education for Primary school children with Autism.
- Development of a Professional Learning framework for schools and services
- Testing Self Directed Support with families of children with Autism
- Development of inclusive working with Barnardo's and Children First services and the ASL Service teams
- Development of school holiday play-scheme provision widening access for children and young people with Autism.
- Development of universal level visual support project training and accreditation in nursery primary and special schools
- Collaborative working between Children's Services and CAHMS enabling special schools and classes to implement Positive

Behaviour Support.

3.4 The above areas of work have been informed by consultation, co-production with parents and schools as well as visits to other authorities to identify examples of good practice. Parents in the City were consulted through an extensive consultation exercise in 2014, including focus groups and individual consultations and filmed interviews. Meetings were arranged with practitioners in Children and Families and NHS services in the City aiming to support students with Autism. Through this process the views of parents, carers, young people and a wide range of professionals supporting children and young people on the Autism spectrum were gathered.

3.5 Amongst professionals in our community, we have practitioners with high levels of expertise who are well informed about research at a national and international level. Many strong multi-agency links exist across Autism support services in Edinburgh. These services include the Additional Support for Learning Service, Psychological Services, staff in specialist educational placements, health professionals (including speech and language therapists, occupational therapists), paediatricians in community child health, child and adolescent mental health services (CAMHS), Children and Families, Social work-practice teams, a Health and Social Care transition service and a wide range third sector providers.

3.6 We recognise that a well-informed understanding and awareness of Autism needs to be reflected in all aspects of day-to-day provision in schools and early years' services and that this needed to be kept up to date with new developments with staff turnover on a continuing basis.

3.7 A range of children and families benefit from support from commissioned services. In addition, an enterprising third sector contributes significantly to the resources available to children and families in Edinburgh. Alongside this, the introduction of Self Directed Support offers opportunities for greater flexibility for families and for extending the range of providers. There is a continuing need to extend the scope and scale of accessible opportunities in the community across all sectors.

3.8 Diagnostic assessment for children and young people is readily available for children whose Autism is associated with a language impairment or a learning disability through a new assessment and treatment pathway established in 2014. However, there are extended waiting times for children and young people who do not have a language impairment or a learning disability. Developments within this area will be taken forward within the wider structures of NHS Lothian as part of a review of Child and Adolescent Mental Health Services.

3.9   Building on existing strengths and improving diagnostic services, further progress is required to ensure effective early intervention for children and families.

3.10   Further work is required to develop post-diagnostic pathways for children and families to ensure effective access to relevant interventions including Parent-mediated intervention programmes at all ages and interventions to address a wide range of specific behaviours to reduce symptom frequency and severity and to increase the development of adaptive skills.

3.11   The implications of Autism require to be considered on an individual basis for each child through the Child Planning process with the aim of building resilience and capacity of individuals, families, schools and other partners. Key principles informing child planning practice across Edinburgh focus on enabling provision that is:

- Individualised
- Equitable and sustainable
- Inclusive and anticipatory
- Proportionate, fit for purpose, timely and progressive,
- Enabling the best use of resources

3.12   Good progress is being made in applying these principles through an integrated approach to child planning. 'Autism aware' practice has been developed and tested with schools since 2013. The next phase is to extend the approach to all sectors of education in Edinburgh.

Improving Child Planning - Promoting the Wellbeing of Children and Young People with Autism

1. As with any child or young person, the wellbeing of children and young people with Autism is expressed through the wellbeing indicators.

2. Whilst the needs of children with Autism are diverse and find unique expression in each individual, there are areas of concern that are typical to Autism that need to be taken into account in child planning. In particular, it is especially important to recognise the inter-relationships between the child's life at home and in the community and in early years/school education. It is also important to recognise that the impact of a child's or young person's Autism may be 'hidden' or find expression in indirect ways.

3. Well balanced, integrated and 'Autism aware' planning provides an effective framework for promoting the wellbeing of a child or young person with Autism. To enable this, we have developed resources to support effective 'Autism aware' planning with involvement from the child or young person, parents/carers and professionals which are being implemented as part of our approach to getting it right. We are also working with our partners to support better opportunities for learning, inclusion, fun and friendships for children and young people in learning, in the wider life of

> schools, in play and leisure and the wider community life (see Appendix 2 for examples…..).
>
> 4. Following a programme of testing with pilot schools a toolkit is now being introduced as part of the next phase of development in child planning in schools and this will be used to support new plans.

3.13 The toolkit will be supported by professional learning programmes for Autism across all schools and CEC early years' providers and the continuing development of child planning for children in Edinburgh. This is being delivered through a joint programme provided by the ASL Service, Psychological Services and Allied Health Professionals.

3.14 There remain significant challenges in meeting the needs of some children in Edinburgh. Typically, this involves a small but significant number of children and young people with severe mental health problems in association with autism.

3.15 Most young people with Autism achieve positive outcomes in terms of post school destinations. In 2014/15 90.2% of School leavers with Autism left from mainstream schools in Edinburgh to positive destinations compared with a national average of 88.4%. When special schools are included this drops to 81.7% for Edinburgh and 85.9% nationally. Where leavers with Autism from mainstream schools in Edinburgh fared slightly better than the national average, for our special schools the reverse was the case. Parents and school staff have highlighted concerns about post-school options particularly for young people with Autism who have complex needs.

Our improvement priorities for Children and Young People

3.16 *Enhancing educational provisions* An increasing number of children and young people identified as having Autism in mainstream provisions in the City of Edinburgh. We have evidence that improvements in practice to provide more Autism friendly environments and early intervention have had a significant benefit in promoting the inclusion children with Autism in mainstream schools. More children with autism are now enrolling in and continuing to attend mainstream school than ever before.

3.17 A small proportion of children and young people are known to have significant difficulties in managing demands of the environment of a mainstream school. This can become evident through issues of non-attendance, social withdrawal, problems with peer relationships or an increase of distressed behaviours.

3.18 Families and young people have told us that where these problems arise they feel that schools need a better understanding of the needs of someone with Autism or how anxiety created at school can impact on the home environment. Some children and young people with severe and persistent

anxiety require more flexible access to education and/or alternative environments to meet their academic potential.

3.19 Effective inclusion is supported by sensitive approaches to child planning and adjustments within a school environment, which take into account the needs of learners with Autism. We recognise the need for all staff to have an informed knowledge of Autism and its implications for practice to ensure that reliable and resilient provision can be made in all schools.

3.20 Key areas for improvement in educational provisions include:

- Ensuring that all children have access to appropriate opportunities for learning in Early Years and school education.

- Establishing a framework for early years' settings and schools to address behaviours typically associated with Autism, including those that challenge, both to reduce symptom frequency and severity and to increase the development of adaptive skills.

- Continuing to review the provision made in special schools and special classes to ensure that the range and level of provision takes into account the spectrum of need at different stages

- Continuing to improve progress in achieving positive post-school destinations for young people with Autism.

3.21 ***Providing smooth multi-disciplinary service delivery*** - There has been good progress in the development of Children's and Young Persons' Planning in Edinburgh. However, consultation with families and staff indicate some areas for improvement. Key areas include:

- Some children do not yet have a single integrated plan
- Children and parents reporting that planning meetings can be stressful and not always sufficiently focussed on the needs arising from the child or young person's Autism
- The right support is not always available for early intervention
- Autism may present obliquely as social/emotional/behavioural/mental health problems
- The presentation of Autism in females is typically more nuanced and less readily recognised than for males.

3.22 We will continue to strengthen professional awareness of Autism and effective practice in children's and young person's planning and we will set out support proportionate intervention to complement child planning to promote the wellbeing of children and young people with Autism addressing personal social developmental and behavioural needs.

3.23 Assessment and Planning Pathways within educational establishments will be reviewed to ensure that the assessment of children and young people with developmental delay, emotional and behavioural problems, psychiatric

disorders, impaired mental health or genetic syndromes includes surveillance for Autism as part of routine practice.

3.24 Guidance for schools on managing challenges will be updated to ensure that due account of Autism is taken in managing behavior and preventing school exclusions.

3.25 ***Wider opportunities for children and young people with Autism*** - Some children and young people with Autism are not motivated to leave their home and to engage in school or wider activities in the community. However, the accessibility of suitable activities and supporting learners to access these is important for ensuring the development of the whole person, their health and well-being and skills for adult life.

3.26 We have identified improvements in child planning to help ensure a wider shared understanding of the implication of Autism in promoting children's wellbeing that we will introduce in all educational establishments backed up by multidisciplinary specialist support from within Children's Services, Allied Health Professionals and commissioned services.

3.27 We will work with parents to find more ways of supporting children and young people and their families in addressing these things themselves and in enabling better access to variety of different opportunities so that our children and young people with Autism can live a full life.

3.28 ***New diagnostic pathway -*** Community Child Health, Allied Health Professionals and CAMHS follow the Lothian Children's pathway for assessment and diagnosis of Autism spectrum disorders. Evaluation has informed a plan of service development within the NHS to reduce the length of wait for assessment for children aged 0 to 18 years. Information leaflets about this pathway have been prepared and shared with primary care (e.g. GPs), partner services in Education and Social Work and families. Further work to address waiting times for CAMHS assessments building on progress in the joint pathway began earlier in 2016.

3.29 The impact of the Pathway on Early identification of children requiring further assessment for Autism and other developmental disorders in the domains of social interaction and play, speech, language and communication difficulties and behaviour through Health Visitors and Early Years provision will be reviewed by the NHS.

3.30 ***Working with families*** - Edinburgh has long worked with families of children and young people with Autism, in the early years. The 'Spectrum' service developed an integrated partnership between the ASL service, NHS therapists and early years' providers incorporating developmental support, including transitional support into primary schools. Alongside this, a need has been identified for more work that reaches out to families and supports them in managing their children in the home context. Autism can bring additional

challenges for parents, very rigid and anxious behaviours and if these are not addressed they may become problematic as children grow older. Through programmes of information and specific training parents can be supported in the challenging job of parenting children with Autism and creating a happy and relaxed home environment.

3.31 We will work across statutory services and 3rd sector providers to address the needs of families for timely intervention appropriate to the age and developmental progress of the child child/young person and the wider circumstances of the family. This will include parent-mediated intervention programmes for all ages to promote positive outcomes for children and families.

3.32 We work across statutory services and 3rd sector providers to improve pathways to support and address behaviours typically associated with Autism that impact in the family and the community, both to reduce symptom frequency and severity and to increase the development of adaptive skills.

3.33 *Transitions -* Concern over transitions from one stage to another has been raised by families. This includes transitions into, within and between schools, particularly highlighting that useful strategies are not always passed on from one class or school to another.

3.34 We will improve the management of transitions from between and within school sectors as part of the wider improvement to assessment, planning and intervention. This will include continuing improvements in the options to continue to develop skills for adult life in both the senior phase in school and through progression through post school pathways as appropriate.

3.35 We will work with the Integrated Joint Board to agree steps required to enable transitions for young people with complex needs to achieve positive and sustainable outcomes.

3.36 *Professional Learning* - The need for training has become evident from the work that has identified these priorities and in the Council's wider evaluation of performance. Children's Services will work with the NHS to provide effective professional learning programmes on a continuing basis to enable early years and school staff to understand and address the needs of children and young people and to take forward continuing improvements in practice. Evaluation of diagnostic assessment in Scotland shows that the delay in girls being diagnosed occurs prior to referral for assessment and that once a concern is raised, their assessments take no longer than those for boys. Training will take into account gender differences in the presentation of Autism and the risk of girls needs being overlooked.

Improvement Priority 1. Improve awareness and assessment in all settings to enable early and proportionate responses so that all children benefit from their full entitlement to education.

Outcome	*Lead*	*Milestones*	*Date by:*
All schools undertake Designated Autism effective practice training for all schools.	*Early Year Mangers/ Headteachers*	All senior leaders in schools and early years engage with professional learning opportunities and enable all staff to access training and adopt appropriate practice within 3-year cycle.	December 2017
	CEC Autism Training Leads(ASLS/EPS/SLT)	Professional Learning Programmes in place for all new staff, whole school staff and Pupil Support Assistants	December 2017
	CEC Autism Training Leads	Progressive programmes refresh, enrich and extend knowledge, awareness and effective practice taking into account evidence based approaches, prior learning and examples of practice form schools.	August 2018
Schools and services anticipate the needs of children with autism and make appropriate	*Early Year Mangers/ Headteachers*	All child plans identify proportionate actions in sufficient time for successful transitions within and between establishments	June 2020

adjustments to their environment and practice.	Principal Psychologist	Self-evaluation of child planning enables schools and partners to inform effective practice	June 2019 (then annually)
	ASD Training Leads linking with QIEOs	A framework for schools is developed to support self evaluation of 'autism friendly schools' with reference to 'How Good is Our School 4'	June 2018
Effective child planning ensures individual needs are met through proportionate support via the CEC Pathways of Support.	Principal Psychologist	Continue to raise awareness of Autism in CEC Getting it Right Training for all staff	October 2017
	Early Year Mangers/ Headteachers	Support and monitoring via child planning/cluster teams/ASAP/ CMRG/QIEOS.	June 2018 (then continuing)
	Principal Psychologist	Self-evaluation of child planning enables schools and partners to inform effective practice	June 2019 (annually)
Every child attends school full-time, or in exceptional cases where a child has a reduced timetable there	*Inclusion Co-ordinator*	Clear procedures for monitoring attendance of children with Autism and use of modified timetables issued to all establishments	December 2017
	Early Years Managers/	Establishments routinely monitor attendance of children with Autism and take appropriate measurers through Child planning process.	June 2018

is an agreed plan for when this will end.	*Headteachers*		
	Senior Manager ASL	Framework of measurers for support and challenge, monitoring and evaluation of attendance in operation routinely through cluster teams, ASAP, CMRG and QIEOs.	June 2018
	Inclusion Co-ordinator	Systematic monitoring of attendance of children with Autism and annual authority evaluation	December 2017
	Inclusion Co-ordinator	Annual authority evaluation of attendance of children with Autism	September 2018 & 2019

Improvement Priority 2 : Provide smooth multi-disciplinary service delivery through Integration of C&YP Planning

All school age children who require it have a single integrated plan.	Principal Psychologist	Establish protocol for harmonisation of SW and school planning processes.	December 2017
	Named Persons, Lead Professionals	Children identified and plans integrated on next review. Support and monitoring via child planning/cluster teams/ASAP/ CMRG/QIEOS.	June 2019 January 2018

Planning meetings are accessible, engaging and progressive. Meetings are well focussed on the individual's entitlement and addressing needs.	*ASLS and EPS Training Leads*	Programmed implementation of solution-focussed and restorative practices Programmed implementation of the Autism reflective planning tool in pathfinder schools (extend to all establishments within 3 years)	June 2018 June 2018 (2020)
	ASLS Headteacher	Progress monitored with feedback to schools via child planning/cluster teams/ASAP/ CMRG/QIEOS.	June 2018
	Inclusion Co-ordinator	Reported within systematic monitoring of attendance.	June 2018
Improvement Priority 3 Child planning will enable a shared understanding of promoting wellbeing children with Autism.			
Child plans address all aspects of wellbeing identifying appropriate set to promote wellbeing in school, family and community life.	*Principal Psychologist*	Children with Autism will be increasingly included across the formal and informal aspects of the curriculum/school	June 2020
	ASLS Autism Lead	Benchmark	June 2018
	Principal Psychologist	Progress monitored by schools via child planning alongside cluster teams/ASAP/ CMRG/QIEOS.	June 2019
Children, Young People and Parents will have	*Children's Service*	A strategic framework will enhance provision via: • Children's Partnership	June 2020

better access to wider out of school opportunities reflected in C&YP plans.	*Senior Management Team*	- Locality Planning - CEC Commissioning - Grant aid programme - Community Benefits - Extending opportunities via 'Child Friendly Edinburgh'.	
Parents have access to relevant programmes of information and training, parent mediated and peer support	*CEC Autism Training Leads*	Programmes will include: - Provision made directly (ASLS, EPS and NHS) - Disability SW services - Commissioned Services - Wider children's partnership provision	June 2020
	Senior Manager ASL	Monitored and reported as part of planning and performance reports to Education Children and Families Committee	Annually
Support learners to increase resilience and adaptive skills and reduce the frequency and severity of disruption to learning and impact in the family and the community.	*QIM Special Schools and HT ASLS*	Establish a framework of effective practice for all sectors to address behaviours typically associated with Autism, including those that challenge. Fully implemented in all sectors	June 2018 June 2020
		Systematic Positive Behaviour Support approach introduced in all Special Schools/Classes.	December 2017
		PCPI procedures implementation in Special Schools/Classes	June 2018
	Inclusion Co-ordinator	Risk/need assessment framework for schools in all sectors	June 2018

Improvement Priority 4 - Practice takes into account that Autism presentation may be gender specific and/or present obliquely as social/emotional/behavioural/mental health problems

All practitioners have an awareness of the complexity of presentation of Autism.	*NHS Autism Pathway Lead*	NHS Diagnostic pathway teams to continue to follow pathway and clinical guidelines and to deliver training to support recognition of girls in primary care and statutory services.	June 2018
	CEC Autism Training Leads	Progressive programmes refresh, enrich and extend knowledge, awareness and effective practice taking into account evidence based approaches, prior learning and examples of practice form schools.	August 2018
A systemic approach ensures Children and young people have timely access to effective assessment and supports.	*Inclusion co-ordinator*	Inclusion guidelines and procedures updated taking into account Autism specific factors and needs.	March 2018
	ASL Senior Lead and CMRG chairs	Checks and balances in assessment and decision making in each of the CEC ASL Pathways and Children's Services ensure gender equality and that presentations of social/emotional/behavioural/mental health problems are given due consideration.	December 2017
	ASL Senior Lead	Guidance for schools on managing challenges will be updated to ensure that due account of Autism is taken in managing behaviour and preventing school exclusions. Disseminate risk assessment and risk management tools	March 2018

	Principal Psychologist	Consultancy/'behaviour clinics' to special schools and classes via EPS and ASLs with CAMHS support	September 2017
	ASLS Deputes	Monitored by schools via child planning alongside cluster teams/ASAP/CMRG/QIEOS.	June 2019

Improvement Priority 5 - Work with secondary schools to increase availability of flexible options for learners with severe anxieties to reduce frequency and severity and increase learners' resilience and adaptive skills.

Vulnerable learners acquire skills for life, work and learning and progress to positive destinations via: • personalisation of timetabling • blended learning • community based programmes • virtual learning	*Depute Head ASLS*	Evaluate options and feasibility with schools, ASLS and commissioned services	June 2018
		Establish flexible networks of opportunity and support a locality and city-wide basis so that Learners acquire skills for life, work and learning and progress to positive destinations	June 2020

Improvement Priority 6 - Provide quality school environments appropriate to need for learners with Autism to reflect anticipated pattern and level of need.			
Increase capacity for learners with Autism and Learning Disability and improve quality of environment improving learner's day to day experience and reducing frequency and severity of behaviours that challenge.	*Senior Manger ASL and Special Schools*	Enhance provision at Braidburn School	August 2020
		Complete new and extended provision at St Crispin's in new accommodation.	January 2020
		Review options for future accommodation for Kaimes school	January 2020
		Update accommodation brief for establishments to take into account current evidence and effective practice standards	April 2018
	Headteacher ASLS	Complete programme of improvement in language classes and evaluate impact	June 2019
Learners progressing through special schools and secondary resource provision will have access to an appropriate range of progressive opportunities in the senior phase	*QIM Special Schools*	Evaluate and enhance senior phase opportunities in special schools	June 2018
	Senior Manager ASL and Special Schools	Assess options for extending opportunities through senior phase hubs with mainstream schools	June 2019

August 2017