

CHAPTER 6

NURSERY AND PRE-SCHOOL

This chapter considers and reviews the education of children with ASD aged 3 to 4 years at pre-school and nursery settings, and makes recommendations for the development of comprehensive provision for this age group.

PREVALENCE RATES AND PROJECTIONS

6.1 The Department of Education's (DE) Pre-school Education Expansion Programme (PSEEP), which commenced in 1998/99, has helped to ensure that children under 4 years of age can access educational support at an early age and thus make early progress in preparation for formal entry to school. In respect of children with special educational needs, the DE statistical returns for the 1999/2000 year indicate that a small number of children in nursery schools and classes and in funded places in voluntary or private settings have received a Statement of Special Educational Needs. However, a significant number of children in the sector are considered by the Education and Library Boards' Educational Psychology Service as having varying degrees of special educational needs but have not yet been fully assessed. Details are as follows:

Setting	Statemented	With Special Needs
Nursery Classes	20	150
Nursery Schools	56	386
Voluntary/Private	9	47
Reception	7	51
Total	92	634

6.2 The total size of the pre-school cohort, ie the number of children in their immediate pre-school year, is estimated using P1 enrolments as a proxy figure. In October 2001, 19,919 children were in funded pre-school education. Most would have been in their immediate pre-school year, although nursery schools and classes can admit children from the age of 2 if they have places available. The number of children in funded pre-school provision is likely to be in the region of 21,500+. While it is not possible to estimate accurately the number of children at pre-school level with a diagnosis of ASD, it is evident that there are increasing numbers of children with this diagnosis under 4 years. Current figures from the boards, for children in the year before compulsory education begins, indicate that some 85 children, 46 of whom are in mainstream settings, are identified as having ASD.

6.3 The current figures show the numbers of children with a diagnosis of ASD in their penultimate year before compulsory education in each ELB:

SEELB	29
BELB	21
SELB	19
NEELB	9
WELB	7
TOTAL	85

6.4 Many children with ASD may not receive a diagnosis until after their pre-school years. One may estimate true prevalence in the pre-school years and the likely distribution of educational needs by reference to the figures for older children. Prevalence data presented in Chapter 4 suggests that in any one year group there may be nearly 170 children who have ASD.

6.5 The evidence cited in Chapter 4 highlights that there are a number of difficulties in relation to estimating the prevalence of ASD in Northern Ireland. This is clearly borne out by the Task Group's efforts to collate accurately the numbers of children with ASD. However, the Task Group considers that provision should be made for some 70 per

10,000 children. This clearly reveals that the present level of provision is insufficient, and will have to be reviewed and improved to meet the current and projected needs of the ASD population at the pre-school level.

RANGE OF PRE-SCHOOL PROVISION

6.6 The PSEEP is a programme to increase the number of funded places in statutory and voluntary settings to provide a place for every 4 year old in their immediate pre-school year whose parents wish to avail of it. Planning at local level is carried out by a Pre-school Education Advisory Group (PEAG) in each ELB area. The PEAGs consist of representatives from the education, health and social services and voluntary sectors. Regulations require that priority should be given to children from families on income support or job-seekers' allowance who just missed out on a year one* place due to their July-August birthdays. The next groups of pupils to be provided funded places are those with September-July birthdays and similar socially disadvantaged backgrounds, followed by children with July and August birthdays without socially disadvantaged backgrounds, and finally any child aged 3 before 1 September in their immediate pre-school year from a family who has requested a place. Thereafter, individual schools set their own criteria. While pupils with special educational needs can access pre-school provision, they do not receive priority and placement can be problematic.

Belfast Education and Library Board (BELB)

6.7 There are currently 21 year 0 children with ASD in BELB, 14 of whom are enrolled in specialist provision.

6.8 They receive services in varying ways:

- ❖ two psychologists with special interest in this area work with children in nurseries and co-work with individual psychologists in the areas of identification, assessment and intervention;

* NB Year one is the first year of compulsory (primary) education: children who reach the age of 4 by the preceding 1 July. Year 0 means the year before year one.

- ❖ children at Stage 3 and above in the Code of Practice are filtered through a panel of psychologists and Assistant Advisory Officers and are referred to the Oakwood Support Team as appropriate. This team has one full-time teacher and 5 classroom assistants deployed as required in the mainstream nurseries and primary schools attended by these children. The Oakwood Support Team or educational psychologists endeavour to support these pupils at time of transfer into year one at primary school. However, rapidly increasing numbers make it impossible to provide this support for every child referred;
- ❖ The Oakwood Assessment Centre offers a nursery class with teachers who have experienced varying amounts of training. Teachers here, as elsewhere, have not been able to access all the training that they think they need;
- ❖ in the voluntary sector Segal House, a playgroup run by MENCAP, are in the initial stages of setting up structured teaching programmes for children with ASD;
- ❖ Forward Steps service funded by Barnardo's have specialised staff trained in ASD with experience in running effective programmes. Their pre-school TEACCH programme received a positive evaluation from Queen's University. Their current programme, putting greater emphasis on inclusion, assists with the integration of children with ASD into a mainstream setting and suggest strategies for use in the home environment.

6.9 Oakwood and Segal House have speech and language therapists, occupational therapists and physiotherapists who work on site, in close contact with parents and teaching staff. Their work is highly valued. Parents and professionals interviewed felt that the amount of therapy for children was often inadequate.

6.10 Training has been provided for teachers and classroom assistants from the Educational Psychology Service, Oakwood Support Team, the National Association for Special Educational Needs, PAPA, and the Behavioural Support Team. A coherent strategy for the co-ordination of training would be of great benefit.

Southern Education and Library Board (SELB)

6.11 There are 19 children in their final pre-school year (year 0) known to the ASD service in the SELB. Eight children are placed in special schools, and 11 in mainstream provision.

- ❖ The Board makes additional assistance available to the nursery schools or classes with children who have special educational needs and for those who have statements of special educational needs.
- ❖ From September 2001 up to 10 places will be available for children with severe and complex difficulties in each of the early years programmes which are located in 3 of the Board's special schools. It is expected that places in these nurseries will be offered to children with ASD or suspected traits. Priority is given to those in year 0. Names are put forward by the Educational Psychology Service and the Consultant Community Paediatricians for discussion at Advisory Panel Meetings which include an Assistant Advisory Officer from the Special Education section, the Principal Educational Psychologist, the Consultant Community Paediatrician and the Area Senior Educational Psychologist. An Admission Panel comprised of special education staff then meet to decide to whom places will be offered. Those who gain access to these places have access to specialist staff, speech and language therapists, occupational therapists and physiotherapists, who provide an holistic service on site.
- ❖ The Southern Board employs one full-time peripatetic teacher who supports nursery-aged pupils in mainstream schools. These pupils are referred to the ASD support service by the school Principal or at the request of Medical Officers. At the point of referral the pupils' names go on to a waiting list and

they are given support as soon as possible. The peripatetic teacher is also responsible for primary, and many post-primary, pupils throughout the Board area. The numbers on the caseload are ever-increasing as seen in Chapter 4. The children may have to wait some time before support is available to them.

- ❖ There is one specialist educational psychologist in the Board area. A number of psychologists have an interest in ASD and all support the pupils on an individual basis.

6.12 HSS support in mainstream provision is patchy and therapists cite lack of resources as the reason for this. Therapy on site is viewed by speech and language therapists as excellent practice. It is available on site in SLD schools and in a number of Learning Support Centres attached to schools.

Western Education and Library Board (WELB)

6.13 The number of children with ASD in year 0 in the WELB is 7, and one of these is enrolled in special provision.

6.14 Special schools in this Board area have nursery places available for pupils from the age of 3 years. Referrals to the schools usually originate from the peripatetic pre-school service or Consultant Community Paediatricians. The teachers in nursery settings in special schools may not be specialist teachers trained in accommodating the learning styles of pupils with ASD; however, many do have initial training in structured teaching principles and related methods. This reflects the difficulty in accessing an adequate number of places on training courses related to ASD.

6.15 The ASD advisory service currently consists of one teacher and one classroom assistant. They are based in Foyleview school and their work is focused primarily in the Foyle district. WELB anticipates the imminent appointment of similar staff to provide support in southern parts of the board's area. The advisory service staff are available for training and advice in mainstream nurseries and playgroups though not for direct intervention. The Educational Psychology Service provides advice and support on an individual basis throughout the ELB.

6.16 Teaching staff in nurseries and playgroups are often not trained in ASD. They therefore feel ill-equipped to meet the needs of children with ASD. Teachers would appreciate more training and support to help these pupils integrate and benefit from their pre-school years. Additional classroom assistance is not provided unless a statement is available for the child, although emergency assistance is available in some cases.

North Eastern Education and Library Board (NEELB)

6.17 In the NEELB area there are currently 9 children with ASD in year 0, of whom 8 attend special provision.

6.18 Special schools in the NEELB area have nursery places available for pupils from 3 years old. The teachers may not have specialist training in teaching pupils with ASD due to the small number of places available on training courses. However the special school staff in the nursery sector will often have had access to initial training in ASD and are likely to have been given an overview of intervention methods, by attending training courses arranged by PAPA or in-service courses delivered by the ASD field officer.

6.19 The remit of the ASD field officer includes direct support to nursery school pupils who have a statement of special educational needs. At present there is only one child in the nursery age range eligible to access this support.

6.20 There is an obvious gap in the service as many nursery and playgroup teachers report difficulties in teaching children with ASD in non-specialist provision with no support and at times no consistent classroom assistance unless a statement has been provided. Training is an issue for teachers and classroom assistants in mainstream nurseries and playgroups. Many have gained knowledge from having children with ASD in their classrooms in previous years and from access to support from the ASD field officer. However, all teachers questioned for the purpose of this report indicated that they would benefit greatly from structured training and more access to specialist support staff.

6.21 Therapists view in-school support for ASD pupils as essential but they cite limited resources as the reason for the lack of this form of support in most schools. In some schools there are examples of good practice where the therapists are trained in ASD and are providing excellent advice and support.

South Eastern Education and Library Board (SEELB)

6.22 In the South Eastern Board there are 29 Year 0 pupils with ASD and 8 of them are enrolled in special provision. Once a referral has been made to the ASD advisory service from educational psychology or a Board officer an assessment (Psycho-Educational Profile Revised, PEP R) is completed. Following this the child's parents are contacted to discuss the results of the assessment and to inform them of the advice given to school and of the training available to them, delivered by SEELB and Down Lisburn Trust.

6.23 The Keyhole Early Intervention Project for Autism, administered by PAPA, is a partnership of agencies and individuals. It is currently delivering a package of training to pre-school staff. The training is designed by staff from Down Lisburn Trust, Barnardo's and SEELB and it is delivered through the Northern Ireland Pre-school Playgroups Association (NIPPA). Training of 5 weeks' duration is available to NIPPA staff. Support is given at nursery level by the ASD advisory support team and by speech and language therapy.

6.24 Whilst these services are available, advisory support staff report that services are stretched and numbers of children with ASD are ever-increasing. This makes it difficult to provide a seamless service to staff and pupils. More staff on the ASD teams and more HSS therapists specialised and trained in ASD would enhance the service already provided.

Range of Provision: Comments from Parents

6.25 Parents report very varying experiences of early support and nursery provision. The 2 examples given below faithfully represent the actual experiences of a number of parents and have been presented in a manner designed to protect the identities of those involved.

'We were shocked to receive the diagnosis but relieved. I realize that my son was fortunate to get the diagnosis at an early age. Support after diagnosis at home and in school would have been very welcome. We had no services made available to us for many months after our child was diagnosed and felt very isolated. The situation has been very difficult and very badly managed by the school.'

6.26 Rory was placed in a nursery attached to a mainstream primary school with part-time classroom assistance. The staff had received no training and were ill-equipped to manage him. He was aggressive towards other children at times and required a lot of one-to-one attention. Rory's mother dreaded going to collect him as there were constant complaints about his behaviour and lack of attention. Staff felt he was disruptive to other pupils. Eventually the situation deteriorated so much that the Principal decided Rory was too disruptive in school and they were unable to sustain his placement. His mother was told that he could no longer attend the nursery, there was no further discussion about the decision or plan devised as to how provision could be reintroduced.

6.27 Rory's mother expressed her sadness and frustration at having to see Rory, unable to understand the disruption in routine, go out into the car in the mornings and put his seat belt on ready to go to school. Rory became very distressed and was difficult to pacify when he was carried back into the house.

'We are still unsure as to Rory's level of learning difficulty but we are asking that he be placed in a special school with specialist staff. We feel this will be more beneficial for his future.'

6.28 *'Jason was diagnosed when he was under 3 years old. It was a terrible shock. However we knew that something was wrong and it was helpful to know the truth. I wanted to know what one thing made Jason autistic. It was so helpful to have someone come to our house and explain what autism was in relation to our child. We received training on how to cope with Jason's most difficult behaviour and our family situation quickly improved. The support services we have received since he was diagnosed have been a lifeline. When Jason went to school the level of support was kept up. He is like a different child now. A light has gone on.'*

6.29 Jason received early intervention after an early diagnosis. His family targeted his tantrums and inability to cope outside the home environment as areas of great need for them as a family. The early intervention therapist worked on his sensory needs, his need for routine and on providing him with a visual explanation of his environment. She taught him simple augmentative communication methods whereby he could relate his needs using symbols, rather than be frustrated and display constant tantrums. His family worked hard on the suggested strategies and improvement could be seen almost immediately. On going to school the intervention therapist liaised with the teacher who used similar systems to those Jason was familiar with and developed them according to his assessed needs. The speech and language therapist and occupational therapist worked on his individual educational programme alongside the teacher inside and outside the classroom environment.

6.30 Jason's progress has led to a placement in a mainstream nursery where the teacher had experience of teaching another pupil with ASD and has had access to a little training. He is supported by the ELB advisory service for autism who will help him with transition into year one. Jason is enjoying and benefiting from his experience in the pre-school setting.

'We are so grateful for the support we received. It was useful for us in the home and to our extended family. Jason is a different child. He has moved to a mainstream nursery placement now and is very content.'

Range of Provision: Views from Pre-school Settings

6.31 Submissions from pre-school teachers, parents and voluntary bodies highlight the following weaknesses in provision for children in the age range 3 to 4 years:

- ❖ planning for pre-school services for children with autism is cursory, generally uncoordinated, inconsistent, and ill-equipped to meet the needs of an increasing ASD population. Arrangements to direct provision are not considered adequately within a policy framework;
- ❖ there is insufficient guidance from either the Department of Education or the ELBs to promote good practice;
- ❖ diagnosis and assessment procedures vary greatly from area to area and between education and health;
- ❖ there is not enough training available to nursery staff, and parents, to address the needs of children with ASD, and to skill staff in an appropriate range of intervention strategies;
- ❖ there are inadequate resources, including staffing, allocated to meet the demand;
- ❖ there is inadequate home-based support;
- ❖ there is no guaranteed support for ASD pupils transferring into school settings at year one;
- ❖ there is evident inconsistency within and across the nursery education services;
- ❖ ASD advisory support service staff cannot provide an adequate service to nurseries due to their rapidly increasing caseloads.

6.32 The teachers and pre-school staff interviewed as part of the Task Group research expressed anxiety about their ability to meet effectively the needs of pupils with ASD, with limited or no training. Many teachers gained their knowledge through books and documents available on the Internet and through contact with the PAPA charity.

6.33 Those teachers who had previous experience of teaching pupils with autism demonstrated more confidence and could discuss a range of strategies based on personal practice and knowledge of pupils' ASD. The Task Group acknowledges the commitment of teachers, many of whom are cited in the parental submissions as highly skilled and committed. However, to extend their levels of competence, it is accepted that further training would enhance their current good efforts. They would feel more confident in preparing comprehensive education plans addressing the individual needs of children with ASD and in providing appropriate access to the pre-school curriculum. Many submissions indicate the need to ensure that the curriculum content of the pre-school programme is accessible to the child with ASD. Their individual needs should be addressed early on in their school experience in order to facilitate future mainstream inclusion as far as possible.

6.34 The teachers surveyed reported particular difficulties providing education for pupils with ASD and severe challenging behaviours, particularly in group settings such as story time or outdoor activities. Many teachers found that the pupils seemed isolated in classrooms, in that they could often tolerate playing at the same table as another child but had difficulties sharing, waiting and turn-taking. Consequently they were unpopular with other pupils and extremely difficult to manage within a whole class setting. Dealing with these behaviours proved time-consuming for teachers and this, they felt, had a detrimental effect on the other pupils in the class. Wing (1994) points out that children of pre-school age can experience severe problems adjusting socially because of the constant unfamiliarity of the child with his social environment.

6.35 These situations are extremely challenging for parents and teachers and make demands on all to have appropriate training and experience in dealing with behaviour, shaping the child's positive responses and in developing their social understanding. Teachers indicated that present staffing ratios are not sufficiently flexible or adequate to enable them to address the needs of children in their classrooms with ASD. The Task Group considers that the issue of challenging behaviour is an important one which raises concerns with

regard to integration, safety, staffing ratios, placement and curriculum. This issue is dealt with in more detail in Chapter 10.

6.36 Assessment procedures caused concern among nursery and pre-school teachers. Frequently, pupils with ASD did not respond well to typical modes of assessment and might not perform well. However, during the normal routines of the day, teachers observed many of the pupils demonstrating high levels of skill in a wide range of curricular areas. Teachers often felt that they were unable to motivate the child constantly as it was evident that many of the pupils had pockets of ability which seemed to remain untapped. Educational psychologists also reported having difficulties in persuading children with ASD to attend consistently to a task, thus making some aspects of assessment difficult.

6.37 The inspection evidence, from nursery provision, indicates that the support for special educational needs provided by ELBs varies from board to board; in some boards the evidence is that there is inadequate additional classroom assistance. There is also evidence that the Boards' Curriculum Advisory and Support Services (CASS) provide a satisfactory amount of in-service training on general special educational areas which includes some specific advice on autism. The range of training varies across the boards.

6.38 Staff in voluntary and private sectors expressed the difficulties they experience accessing support to meet the needs of children with autism. They pointed out that training is intermittent and often expensive, particularly in the case of TEACCH and PECS training. There is certainly a gap in the training for staff and the professional support available. Consequently children with ASD can be misunderstood as presenting with behavioural difficulties only.

6.39 The involvement of parents in pre-school programmes varies across the pre-school services yet research suggests that their involvement is critical to positive outcomes for the child. Most intervention approaches stress parental involvement and regard parents as co-therapists in the education of their child. Families with a child with ASD generally experience increased levels of stress and significant disruption to their lives. They require particular help with

their child's communication and functional living skills. (Schopler and Mesibov, 1984). In Northern Ireland, more parents wish to be part of the intervention for the child with autism and it is common to find parents actively exploring the Internet for information, joining voluntary groups and participating in individual programmes designed for their child (eg ABA). The Task Group commends the development of improved parent/professional collaboration and regards such partnerships as central to pre-school intervention.

6.40 In summary, the ASD provision at pre-school/nursery level across the ELBs is insufficient, patchy and of variable quality. Quality of provision is dependent upon geographical location, training available and the numbers of specialist HSS and ELB staff employed to help meet the individual needs of these children. There are examples of integrated practices; however, it is more common to find that provision is far from ideal. Parents are frustrated by ignorance in schools, lack of resources and inconsistency among professionals. They identify problems from the point of diagnosis, through to recommendations for intervention and on into nursery and playgroup placement. Overall the needs of the majority of children with ASD at nursery level will be best met through partnership with parents and cross-agency work designed to support families and pre-school providers. The most successful practice is likely to be flexible and developmental and designed to encourage the inclusion of the child with ASD into a school setting. The child's needs arising from the ASD should continue to be met together with their social and academic needs in an integrated setting as far as possible.

MODELS OF BEST PRACTICE

6.41 Evidence from ETI 2001 inspections of pre-school services indicates that pre-school provision for special educational needs is satisfactory or good. The inspections of pre-school provision have identified a few examples of poor practice, but overall indicate that the majority of nursery schools:

- ❖ identify special educational needs early and make suitable provision for children, often liaising closely and effectively with other agencies;

- ❖ draw up education plans and keep good records of children's progress;
- ❖ involve parents well.

6.42 The inspections revealed examples of excellent practice which were characterised by:

- ❖ each member of staff recognising and appreciating the needs of children with special educational needs;
- ❖ the co-operation of other professionals in this aspect of their work;
- ❖ a short daily session of individual teaching closely matched to the special educational needs of the children;
- ❖ access to appropriate training and support from the board's CASS service.

6.43 In a small number of pre-school settings, where the quality of provision attained high quality, the needs of children with ASD were well met; these examples, however, were not commonplace. It is the Task Group's conclusion that the practice of placing pupils with ASD in mainstream nursery schools and playgroups, with little or no support or advice for the teachers and classroom assistants, does not ensure that the pupils' needs can be met effectively. Children with ASD, in such instances, may miss out on the contribution which effective early intervention can offer. It is, in such circumstances, vital that current provision should be reviewed and improvements set against acknowledged models of good practice.

6.44 In doing so, there is clearly the need for a structure which reflects the views of professionals and parents and provides a range of services for the education of pre-school children with ASD. The services should include:

- ❖ early assessment by a multi-disciplinary team, involving parents;

- ❖ an individual education plan which directs intervention;
- ❖ integrated nursery/pre-school placement;
- ❖ specialist nursery/pre-school provision;
- ❖ access to specialist ASD support and advice;
- ❖ access to therapy services;
- ❖ home-based programmes, reflecting the child's needs over time and parental wishes;
- ❖ planned transition from home to nursery or playgroup and transition to year one.

6.45 Jordan (2000) suggests that the ideal nursery/pre-school provision is a specialist class on site within a mainstream nursery or primary school where the child could receive part-time support complemented by home support. The class would enrol 5 children with staffing consisting of a teacher, part-time speech and language therapist, part-time occupational and/or physiotherapist, music teacher and nursery nurses providing 1:1 staff:child ratio. NFER (2000) describe the various models across the LEAs in England and pose a number of questions to inform decisions about provision including the issues of specialist or outreach support, funding for Lovaas programmes, priority at early intervention or at secondary level, inclusion versus special provision, inter-departmental liaison and resources.

6.46 The Task Group considers that each board should develop its own provision according to its relative needs and structures and in response to the principles identified in this report (Chapter 3), but makes a strong case for an ASD Pre-school and Early Intervention Service in each board underpinned by a written statement of policy and provision, and indicating guidance on how provision can be accessed.

CHAPTER 6

NURSERY AND PRE-SCHOOL**RECOMMENDATIONS****Recommendation 6(i)**

The Task Group recommends that the Department of Education should ensure that ELBs, Trusts and voluntary organisations significantly develop services for pupils of nursery school age so that they include the following features:

- ❖ early assessment and regular review by multi-agency, multi-disciplinary teams involving parents;
- ❖ access to suitable mainstream nursery/pre-school placement;
- ❖ access to specialist nursery/pre-school placement if required;
- ❖ provision of a comprehensive and adequately resourced programme by trained staff, implementing an individual education plan which addresses the child's needs and maximises educational and social inclusion;
- ❖ access to appropriate levels of training for all staff - the training needs of staff will vary according to circumstances - the training available should match their identified needs;
- ❖ provision of educational advice, training and support from an adequately resourced ASD Specialist Service, to include help as required from appropriately trained and supervised classroom assistants;

- ❖ access to therapy and advice from professionals allied to medicine, to include support with the development of the child's individual education plan;
- ❖ carefully structured and adequately resourced programmes to ensure smooth transitions into the nursery or playgroup and on into primary education;
- ❖ home-school programmes which encourage the full involvement of parents.

Recommendation 6(ii)

The Task Group recommends the revision of current admissions criteria for nursery schools to ensure that children with special educational needs, such as ASD, are given priority.