

A woman and a young girl are looking up at a large, colorful, curved display in a museum or aquarium. The woman is wearing a striped dress and a green cardigan, and the girl is wearing a blue denim jacket over a floral dress. The display is illuminated with blue and green lights, and the background is dark with some colorful elements.

WORKING TOGETHER TO SUPPORT CHILDREN AND YOUNG PEOPLE WITH AUTISM

NORTH CUMBRIA AND NORTH EAST ACCELERATOR SCHOOLS
PROJECT: PHASE 2 EVALUATION REPORT

contact

For families with disabled children



This report was commissioned by the Transforming Care Partnership to evaluate Phase 2 of the Accelerator Schools Project, to demonstrate the successes and challenges of the programme and to provide learning for future work. The report was developed by Contact, the charity for families with disabled children.

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Introduction

The Accelerator programme has made such a difference to young people and their families in our region, the dedication and commitment shown to developing and running the programme together with and by parents is what has made it such a success. The project has helped schools, parents and the NHS to work together in a much more collaborative way which is in turn supporting young people to achieve really great things for themselves. I believe this programme is a game changer for achieving positive change.

Nicola Bailey, Chief Officer, NHS County Durham CCG

The energy, drive and commitment from all those involved in the Accelerator programme has been truly inspirational. I've had the pleasure of being involved from the beginning, seeing it develop from an outline idea into something real, tangible and visible. I've been less directly involved more recently, but have been able to see it continue to develop all the time, and I am really confident it will leave a lasting legacy. It has and will make a major difference to the lives of our young people, and they deserve that.

Martin Gray, Director of Children's Services, Stockton-on-Tees Local Authority, Chair of the Accelerator Steering Group

Contact have led the development of parent carer participation and parent carer forums (PCFs) since 2008 and have been proud to be a small part of what the Accelerator School project team have achieved. What stands out to me about this project is the commitment from everyone involved to work in true co-production. From beginning to end, the voice of parents and carers has driven the direction and been central to every decision. The difference this approach is making is infectious and has created a strong partnerships model for this and future projects across the North East Region to build on.

Gail Walshe, Director of Parent Carer Participation and Development, Contact, for families with disabled children



Executive Summary

This evaluation of Phase 2 of the Accelerator Schools project considers how communities in the North East and North Cumbria have built awareness of the needs and positive solutions to support children and young people with autism and SEND. In many places stronger relationships have created greater resilience, which has shown in the opportunities for community connections and online learning during the COVID-19 lockdown.

CHALLENGES DURING COVID-19

The Accelerator Schools project took place at a time of great strain for many communities in the region. Some families have tragically lost loved ones, others have been impacted by illness, isolation or anxiety during this time. The disruption to the programme due to COVID-19 has sadly curtailed some of the Phase 2 Accelerator Schools project and created a challenge for evaluating the work in this phase. However, several highlights stand out in this report, including the positive feedback on early interventions working with young people, such as *Mindfulness for Young Life* and *Understanding Myself*. In the south starting the work in primary schools has strengthened the transition to secondary schools for families of SEND children, a particular benefit of this second phase.

OUTCOMES FROM PHASE 1

Phase 1 of the project aimed to help reduce inappropriate educational exclusions and hospital admissions for children and young people with learning disabilities, autism spectrum conditions (ASCs) and/or challenging behaviour. The project took place in North Cumbria and the north east and showed positive changes for many children, young people and their families including:

- Parents and carers said they were better informed and noticed positive changes at home. They felt less isolated and reported improved mental health.
- Schools were provided with bespoke training, including support with policy development, such as behavioural policies. This led to increased knowledge and resilience for some SENCOs, teachers and senior staff.
- Feedback suggests schools were making fewer and more appropriate onward referrals, for example to Child and Adolescent Mental Health Services (CAMHS).
- Improved concentration in class was seen by introducing practical tools to support sensory needs and improve children's environments. Teaching adjustments meant children experienced less anxiety about day-to-day learning.
- A peer network for parents and professionals working with SEND children and young people was developed. Many said this was invaluable and key to sustaining progress.

Phase 1 report

[Working Together to Support Children and Young People with Autism](#) – the report into Phase 1 – was commissioned by the Transforming Care Partnership to evaluate Phase 1 of the Accelerator project, to demonstrate the successes and challenges of the programme and to provide rapid learning input to Phase 2 of the project.

PHASE 2 OF THE PROJECT

Phase 2 of the Accelerator Schools project ran from November 2019 to March 2020. It offered a range of activities to families, educators and young people to:

- grow the key relationships and networks needed to support young people, for example between schools and families of children with SEND and autism, and
- provide learning opportunities using solution focused approaches, for educators and families to better understand the needs of children and young people and develop their approaches and resources
- offer the chance for the young people to engage in courses to promote their own self-awareness and self-expression and for some young people in North Cumbria, to coproduce a film which describes their own experience of the transition to adult life.

PHASE 2 OUTCOMES

The outcomes shared in this report show the beneficial impact this project has had:

- through schools' positive working with young people and families
- through building confidence and resilience for the individuals involved
- for young people, their parents and carers, and the educators involved.

The outcomes describe new opportunities which have been created for young people to engage at school and in their communities. Some schools and communities are beginning to show a change in culture through changing their policies and practices to respond to the needs of neurodiverse students, and the hints of this culture change can be seen in the attitudes and values of the staff working with children and young people.

In recognition of their work, the Accelerator Schools project team was recently shortlisted for the final of the RCNi Nurse Awards 2020 for their commitment to carers. The team was selected from 700 entries across 12 categories, of which 6 were shortlisted for the Commitment to Carers Award. Judges recognised the strong role of parents and carers in the programme in leading work on strategic planning, co-designing and co-delivering the schools project. The shortlist highlights feedback from parents and carers, who said they were more confident to communicate with schools, voice their concerns, and felt less isolated because of the peer support from other parents.

The evaluation went some way to achieving an impact assessment of the key activities, however the partial school closures due to COVID-19 made collating data difficult.

PHASE 2 RECOMMENDATIONS

The ten recommendations include:

Revisiting the evaluation process

Future work of this type should revisit the evaluation approach to maximise project impact. This would include developing a 'theory of change' to integrate the strands of the programme's evaluation, using validated measures to track baseline and follow up where possible, and considering the best metrics to evidence progress, for example to track educators' values and attitudes.

Increasing training opportunities

Replicating the provision of positive behavioural support (PBS) training for parents and carers and increasing opportunities for parents and teachers to be trained together (using validated training methods and supported by suitably qualified clinicians) is recommended to support parents and carers as equal partners with valuable lived experience.

Support for Parent Carer Forums

Providing resources for Parent Carer Forums to support their capacity and resilience will mean they can continue to engage with schools and provide effective collaboration with educators in the future.

Tailored interventions and activities

Providing schools with the tailored CAMHS interventions and young peoples' activities on top of the training modules was an added strength of the programme noted in the feedback.

Online training for families to reduce isolation

The swift responses to the circumstances of partial school closures in the spring and summer terms of 2020 demonstrate the potential that carefully crafted online training opportunities can offer to families of children with SEND to reduce isolation and support skills development.

Embed into Mental Health Teams

Developing and further rolling out the Accelerator's approach, for example through embedding the work in the Mental Health Support Teams being trialled in trailblazer sites would maximise the impact of this positive programme for a wider group of neurodiverse young people, their families, teachers and classmates, who stand to gain so much.

This report uses the term 'Children and Adolescent Mental Health Services' to refer to local services in the region. Nationally, such services may fall under wider 'Children and Young People's Mental Health Services' (CYPMHS). The recommendations relating to CAMHS can be read as referring to the wider CYPMS services where relevant.

Background to the project

The NHS Long Term Plan 2019 commits to increase access to support for children and young people with an autism diagnosis and to invest in intensive support approaches to prevent children being admitted into institutional care. According to research, children with autism are more likely to experience mental health needs and be left out of activities, and are more likely to experience difficulties in accessing the support they need¹.

The North Cumbria and North East (NCNE) region historically has a high use of CAMHS inpatient services (Tier 4) and one of the highest rates of under-18s in inpatient hospital care with learning disability, autism and/or challenging behaviour as the contributing factors. A gap in the provision of autism-specific services in communities galvanised action for this specific group through the Accelerator Schools Project, although other groups of children special educational needs and disabilities (SEND) also benefited from the project.

In 2018, North Cumbria and the North East region were selected to be one of six Transforming Care Accelerator Sites for children and young people. The overall success of Phase 1, which completed in April 2019, was documented in the evaluation report [*Working together to support children and young people with autism – Phase 1*](#).

PHASE 1 RECOMMENDATIONS

The Phase 1 evaluation, published in March 2020, made a series of recommendations, including:

- proposing a longer project over two years with dedicated schools and resources to provide wider quantitative and qualitative results, and
- linking a future programme to a research project to further improve data analysis.

Recruitment of schools for Phase 2 of the Accelerator Schools Project began in November 2019. Activity began from January 2020 onwards and included two further components: a continuation and deepening of the learning programme in the south and roll out of the programme to the north.

CHALLENGES DURING COVID-19

Unfortunately, Phase 2 project delivery was cut short due to the COVID-19 lockdown. The data collection for this report has been limited by the effects of the pandemic. The evaluation heard how for parents and carers the strain caused by COVID-19 on top of existing pressures has often been immense. Whilst momentum to deliver the programme in schools has stalled with teachers managing the impact of the crisis, a number of good practice examples have been noted as a result of the lockdown. These are highlighted in this report along with a number of commitments from schools to pick up implementation of the Accelerator from Autumn 2020.

¹ Autistica (2019). [*Building Happier Healthier Longer Lives*](#) – Briefings to improve autism policy and research.

AIMS OF THE PROJECT

The project aimed to raise awareness of the needs of young people with autism, to listen to the voice of young people and their families, and to model and implement practical ways schools could improve the experience for young people with autism. This involved bringing together health and education expertise to take steps to support children who were finding school a challenge due to their disability.

Learning from Phase 1, the second phase took steps to listen to the voice of young people and provide more opportunities for coproduction and support. For example, young people were directly involved in co-creating the film *Talk to Me*, and the *Mindfulness for Young Life* course was added to support wellbeing and self-awareness for the young people themselves.

WHO WAS INVOLVED

The work involved 33 schools: 12 primary and 21 secondary schools, including five specialist educational settings and two pupil referral units. It aimed to reduce inappropriate educational exclusions and hospital admissions. Phase 1 of the programme involved schools mainly from the south of the north east region. In Phase 2, a number of schools from the north of the region joined the programme for the first time.

In the north of the region, participating local authority areas were:

- Newcastle
- Northumberland
- Gateshead
- South Tyneside
- Sunderland.

In the south of the region, participating local authority areas were:

- Darlington
- Redcar
- Durham
- Stockton
- Middlesbrough.

Three schools were involved in both phases of the Accelerator project: Abbey Hill in Stockton, Durham Federation school in Durham, Croft Community Academy in Stanley Durham.

Parent carer forums (PCFs) are supported by Contact in the north east region. All forums involved are run by parents and carers of children and young people with SEND, who volunteer their time to deliver this work. Six PCFs submitted action plans to develop work with their local schools, five of which went on to work with schools. They were based in:

- Stockton
- Middlesbrough
- Darlington
- Sunderland
- Newcastle
- Gateshead.

Guiding principles

Working with parent carers from the outset helped to embed certain important principles into the Accelerator project.

THE ACCELERATOR'S APPROACH

- **Coproduction:** listening and responding at every stage with families, young people, educators and experts.
- **Person-centred:** the young person, not the service, is at the centre.
- **Joined up thinking:** peer support networks collaborating across education, health and care.
- **Early intervention:** getting it right before challenges become embedded and lead to crisis.
- **Building resilience:** for young people, parents and carers, and teachers.
- **Autism positive:** using constructive language and approaches to neurodiversity.

MENTAL HEALTH SUPPORT TEAM TRAILBLAZER SITES

The Accelerator Schools project has a number of similarities with the Mental Health Support Teams (MHST), which are being trialled in trailblazer sites across the country. Both aim to work across education and health settings to provide early intervention support for children and young people in schools and include:

- low level interventions
- increasing children and young people's self-awareness and coping mechanisms, mental health and wellbeing
- increasing skills of workforce
- improving outcomes for children and young people.

Find more information about the MHST sites on the [NHS England website](#), including information on the Link programme, another initiative bringing together education and mental health professionals to improve joint working and outcomes for CYPMH.



Programme activity

RELATIONSHIPS & NETWORKS

The Department for Education (DfE) fund parent carer forums (PCFs) via the charity Contact, to be the representative voice of their members in their area. Contact offers support to forums and each forum is set up in the way that best suits their area and members, including constituted groups, charities and CICs. All are parent led groups who work in a solution-focussed, evidence-based way.

PARENT CARER FORUMS AND MINI FORUMS IN SCHOOLS

As part of the work to improve local relationships and networks, PCFs developed peer-to-peer support for parents and carers of children and young people with SEND:

- in the south of the region, three PCFs were each linked to two schools
- in the north of the region, two PCFs were each linked to two schools.

Some PCFs covered areas with more than two schools enrolled on the Accelerator programme. For these areas, some schools were offered a universal offer rather than the intensive support, to help manage the activity for parents and carers.

Not all local authority areas have a forum with the capacity to be involved in the project so some schools did not have contact with a forum.

Feedback from forums is shared below in Outcomes and in Annex D. Parents and schools reported positive feedback, for example, that the opportunities to talk and share what they're going through have helped their own mental health as well as helping their child's. Parents said they:

"Felt listened to and their points of view mattered."

Recruiting forums to the project

Parents and carers leading the programme attended ordinary forum cluster meetings to explain the project and recruit parents and carers. Meetings were attended in Stockton (south) and North Tyneside (north) and groups discussed the expectations of parents and carers taking part in the project.

Each PCF in the north and south wanting to join the programme was asked to complete an action plan for each school they would work with. Forums worked with one or two schools, and where more than two schools joined from an area, the schools were encouraged to work together to create a mini forum. After agreeing a joint plan with the school(s), forums submitted the action plans to PCF regional co-chairs, who assessed plans against the aims of the project. Forums were paid £1,000 per school to complete the action plan.

Three forums expressed an interest but were unable to engage with the project.

Schools from these areas attended the training modules and were given contact details for the forum in their area. In the north, where schools had not been involved in Phase 1, the COVID-19 lockdown has impacted greatly on progress, despite high levels of engagement from the schools and forums at the outset of the project.

ENGAGING PARENTS

When developing the project, PCFs heard families say they felt isolated and uninformed. Forums were linked into schools, aiming to:

- bring parents and carers together to reduce isolation
- link parents and carers into forum information networks
- facilitate a positive environment for parents and carers to raise concerns around school activity and collaborate on solutions
- strengthen and grow PCFs.

PCFs ran coffee mornings, training workshops and provided resources. They planned meetings and events carefully to ensure parents and carers felt welcomed, informed and supported. For one forum, running a stall at a school event helped to 'normalise' their involvement and inform parents who might not have otherwise known about them.

CHILDREN AND YOUNG PEOPLE'S (CYP) PEER NETWORK

Following positive feedback from the approach taken in Phase 1, a CYP Peer Network was developed for parents, carers and professionals caring and working with SEND children and young people.

The CYP Peer Network provided project steering, led by the PCF for the North Cumbria and North East region. Overall, this work:

- raised awareness of the Transforming Care Programme
- listened to parents and carers to understand 'what good looks like'
- developed shared understanding and language across agencies and families, to enable a joined-up response
- brought interested parties from all agencies to share practice and work collaboratively to align Transforming Care and SEND agendas, including links between Education Health and Care Plans (EHCPs) and Care Education and Treatment Reviews (CETR).

The work also shared information and developed understanding on:

- the 'local offer', for example, the availability of input from the intensive positive behaviour support team
- legal requirements for reasonable adjustments
- how to reduce discrimination.

Please see [Appendix 4: CYP peer network meetings](#) for details of the type of discussion.

Learning opportunities

LEARNING PROGRAMME MODULES AND LEARNING SETS

The Accelerator Schools project Learning Programme, delivered in the north and south regions, aimed to create sustainable networks across schools and enhance knowledge, skills and behaviours.

In Phase 2 the training was enhanced from the Phase 1 modular training programme. It included primary schools from the south of the region and aimed to:

- support early identification and transition
- enhance skills and knowledge within settings
- share the learning with parents and carers.

The modules comprised of:

- understanding the impact of sensory processing on the child and family
- positive behavioural support
- effective communication and its impact on setting boundaries and reducing anxieties
- reasonable adjustments and equality: working with families to manage inclusivity in the classroom
- self awareness
- engaging parents and carers in effective person-centred planning.
- transition support (this module was planned but did not take place due to COVID-19)

Using action learning sets, which provide a structured method working in small groups, the training aimed to develop a professional peer network and enable a safe space for participants to discuss progress and challenges during the project to help tailor the plans.

Schools attending training

In the north, 11 secondary schools attended training. In the south, 12 primary schools and 10 secondary schools attended (of which 11 and 9 participated fully).

For the first five training modules, between 35 and 42 teachers and parents and carers attended. For the final module 25 people attended. Of the attendees for each module, an average of 81% completed feedback forms to evaluate the quality of the material and training. In the north an average of five parents and carers attended each module. In the south, fewer parents and carers attended in Phase 2. This may have been due to capacity in the forums, given the work generated from Phase 1.

The modular training programme, which was enhanced following Phase 1 and further developed in co-production with parents and professionals, was delivered during January, February and March 2020. Seven modules for all participants were planned and supported by three learning sets for school leads. However, the final modular session and learning set were cancelled due to COVID-19.

CHILD ADOLESCENT MENTAL HEALTH SERVICES (CAMHS) SUPPORT IN SCHOOLS

Expert CAMHS support was provided by clinical therapists, one in the north and one in the south of the region. In each case, the provision was tailored to the needs of the school and adjusted to meet staff needs and priorities. For many schools, the training was cut short by COVID-19. For example in one school in the north around half the training had been delivered, but the coaching and mentoring input has not yet taken place.

SOUTH OF THE REGION CAMHS SUPPORT

21 schools, including a mixture of primary, secondary and specialist, went ahead with the specialist CAMHS input in Phase 2, (out of 22 schools initially selected). The schools all had scoping work planned with them and nine of those had started input by late March.

The onsite work began in January and ended in late March. Schools were able to select from a training menu, including:

- general autism training
- introduction to managing behaviour positively
- policy development
- training and staff development
- support for transitions including:
 - the starts and ends of days, other less structured times
 - transitions to secondary, including support for SENCO on transitions
- social story training
- emotional regulation training
- behaviour clinics, providing coaching to staff around needs of specific young people
- sensory needs training
- curriculum advice.

Behaviour policies

The CAMHS practitioner noted that some schools have a behaviour policy with traffic light systems which is not adjusted for a child's disability. The positive behaviour support (PBS) training challenges this approach, encouraging educators to consider all behaviour as communication and understanding the child's functioning. PBS training also encourages staff to consider their own values and attitudes.

The CAMHS practitioner highlighted themes which she suggests schools are finding challenging:

- staff attitudes and values towards autism: not having training, understanding differences
- how to manage with one or two young people on the autism spectrum in a year group or in a class alongside other children
- the need for ongoing training and supervision, not just a one-off
- managing the emotional and behavioural needs of children
- a need for greater knowledge of autism-specific strategies.

NORTH OF THE REGION CAMHS SUPPORT

The specialist CAMHS practitioner in this region worked with 10 secondary schools. She developed and agreed a scoping document with each school which included two special schools and one Pupil Referral Unit. She:

- met with schools to look at training needs, devised the training to be delivered, and got training packs ready and booked schools in
- supported teachers, not individual work with pupils
- within training, considered other professionals, talked about signposting to services for different types of need.

Unfortunately, much of the training was put on hold because of COVID-19.

Some general themes which the schools requested training on included:

- general autism awareness
- transitions (within the site during school days, at key points in term, between schools)
- autism and communications
- positive behaviour support
- autism with other coexisting diagnoses, for example ADHD, attachment disorder, neurodevelopmental conditions
- autism and mental health, including supporting anxiety
- sensory awareness (most schools wanted this)
- creating multisensory spaces and improving environment.

The CAMHS practitioner took care to understand what the school really needed and adjusted her approach accordingly. For example:

Different type of support for special and mainstream schools

Because of the existing level of expertise.

Differing training needs in mainstream schools

Several schools with an ASC provision embedded in schools had done lots of work already:

- one was thinking carefully about the students' environment
- one was looking for training on things to improve their understanding of children's needs, like attachment disorders or ADHD
- another was using a regulation approach and wanted support to develop an evidence-based programme.



Autism self awareness and coproduction

Findings from Phase 1 and from evidence of developing autism support programmes suggested that training for teachers and working with families should be accompanied with direct support for the young people themselves. The following programmes provided a range of ways for young people to express themselves, learn about their own needs and share their experiences.

DAISY CHAIN & AUTISM EDUCATION TRUST

In April 2019 Daisy Chain was awarded funding through the Accelerator project to roll out Autism Education Trust (AET) training to schools and early years' settings in Stockton and surrounding areas. Established and supported by the Department for Education, AET aims to improve educational access, experience and outcomes for children and young people with autism through expert training packages delivered via local partnerships. Once trained in the programme, Daisy Chain staff delivered workshops to eighty-eight educators from across the region. Sessions were tailored towards support staff, teachers or school leaders and a session was also provided to fifty-five trainee teachers through Stockton-on-Tees Teacher Training Partnership.

UNDERSTANDING MYSELF

Daisy Chain was awarded funding through the accelerator project to pilot and deliver support for young people who show characteristics of autism (but do not necessarily have a diagnosis). They designed a six-week programme with sessions focusing on sensory difficulties, anxiety, understanding your emotions and strategies to increase self-esteem. The students looked forward to the weekly sessions and disclosed some sensitive information because they felt they were in a safe space and could be themselves. Some of the students said their sense of safety and calm during these sessions really helped them understand why they felt the way they did sometimes.

MINDFULNESS FOR YOUNG LIFE

The *Mindfulness for Young Life* programme is aimed at students who have a learning disability, autism or both. The programme offered students in selected schools an opportunity to learn a range of mindfulness techniques together with their parent or carer. It aims to create confidence for young people to use these techniques at times when they are particularly worried or overwhelmed by emotions. For example, young people drew what happens to our bodies when we are stressed, using words, colour or pictures. This helped identify what it feels like to have stress or be worried.

‘TALK TO ME! ONE SIZE FITS NO-ONE’ FILM: EXPERTS BY EXPERIENCE

In Phase 1 of the Accelerator, two films were made with young people with learning disability, autism and SEND:

- a film about encouraging health checks, and
- a film about the experiences of autistic young people at school.

In Phase 2, a group of young people from schools in Netherhall, Maryport and Ullswater Community College, Penrith worked in collaboration with Triple A and Haltwhistle Film Studios to make a film about their experience of transitions from school into the wider world.

The film was commissioned as part of the Accelerator Schools Project and supported by NHS North Cumbria Clinical

Commissioning Group. Triple A and the CCG hosted six focus groups, including two schools, young adults from Carlisle Mencap, transition social workers, school teachers and college lecturers. The discussion on transition covered all of aspects of life, including work, housing, exercise, love and sex, transport and more.

The young people shared their views at the focus groups and from those key themes, Haltwhistle Film Studios created a storyboard. The young people made the props, got behind the camera to do some of the filming, and produced and edited parts of the film themselves. The film making process was inclusive throughout and enabled an even more meaningful experience for the young people compared to the previous films. Further information on *Talk to Me! One size fits no-one* is provided at Annex A.



Developments to the programme since Phase 1

Since Phase 1 there have been some key changes to the programme including:

- primary schools joined in south
- the number of schools per PCF increased, so some forums had to work differently
- *Understanding Myself* changed (from *All About Me*) and *Mindfulness for Young Life* was added
- the *Talk to Me! One size fits no-one* transitions film was coproduced by young people

The scale of programme increased, with the number of schools growing from 18 in the first phase to 33 in Phase 2.

LISTENING TO YOUNG PEOPLE'S LIVED EXPERIENCE

At a film screening event for a film developed with Triple A for the Accelerator programme, one young woman gave a powerful account of her involvement in the work.

She talked about how she felt listened to, she was pleased that her voice is out there on the film and that she is making a difference for other young people with autism. She felt strongly that the best way to teach people about autism is to involve people with autism themselves to share their own experiences.

SCHOOLS IN THE SOUTH: READINESS TO ENGAGE

In moving from the first to second wave of schools, one CAMHS practitioner noted the schools selected in Phase 2 were more prepared to engage than some of the schools last year. She felt this reflected the work of the programme team to recruit schools.

For example, in Phase 1, a failing secondary school who initially signed up to the programme pulled out when there was not sufficient support for the work. In contrast, for Phase 2, one big secondary school which had been rated as requiring improvement decided to go ahead with the programme because they felt that improving their autism offer was an integral part of their journey to improving overall.

Reflecting on the opportunity for transformation, the CAMHS practitioner noted that if an organisation is not 'ready' to change with leadership on board, the training programme may have a more limited impact.

How was the data for the Phase 2 evaluation collected?

Each strand of the programme was evaluated separately as far as possible given the COVID-19 lockdown.

CHALLENGES DUE TO COVID-19

The lockdown created problems in data collection, for example the PCF baseline survey was incomplete due to difficulties operating during the lockdown, including ill health of staff and inability to access and request information via the normal routes. It was not possible to undertake the planned follow up survey.

Likewise, the school baseline survey was sent out in January 2020 at beginning of training to 33 schools and 22 returned – 14 south and 8 north. The progression survey was sent out in June 2020 to 31 schools, of which 10 replied. It is likely this response rate in part reflects the pressures schools were under at this time, as they began opening to more children in June following the lockdown. Quantitative evaluation data was available via the training module scores and this data was close to being complete, with one of the seven modules and one of the three learning sets cancelled due to COVID-19.

To supplement the survey and evaluation data from programmes, interviews were conducted with contributors listed in Annex A.

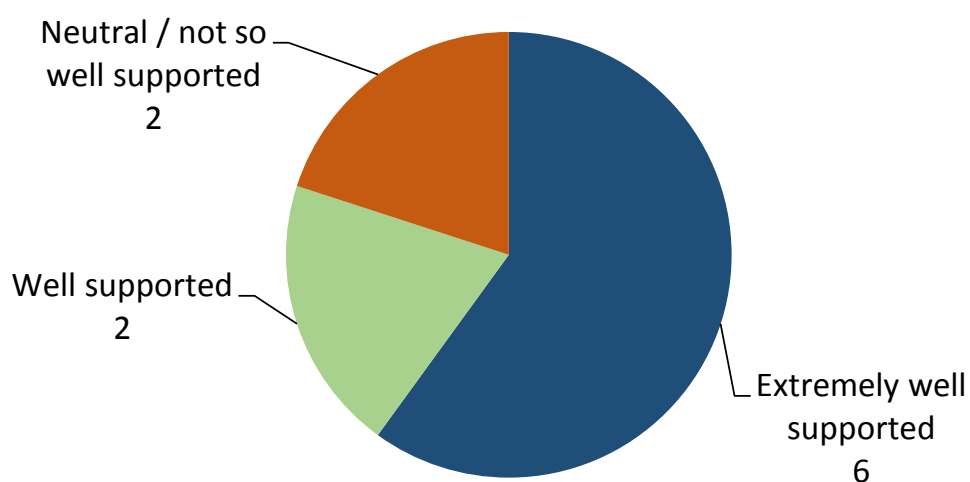


Outcomes

The outcomes below are mainly based on qualitative data, including semi-structured interviews and text-based survey feedback. Overall, responses from families and schools were positive or very positive. However, due to the pause in activity caused by the COVID-19 pandemic, programme leads and evaluators were not able to secure consistent baseline or follow up data for several areas of the programme.

Further details of participant feedback can be found in [Appendix 5](#).

Responses from 10 schools to the school progression survey (June 2020): Phase 2 Accelerator Schools project



How have the six training modules supported your learning in relation to C&YP with autism?



Key Findings and examples for NHS England Outcome Measures A- G

A. Number of schools who can evidence new ways of positively working with the child or the family (including policy/protocol change)

HOW THE OUTCOME WAS EVALUATED

Analysis of:

- qualitative data from learning modules and Autism Education Trust (AET) training
- qualitative feedback in interviews and surveys with schools, parents and carers and NHS practitioners.

KEY FINDINGS

31 schools participated fully in training (out of 33 who attended):

- overall, the learning modules scored an average of 4.5 out of 5: 'very good' to 'excellent'
- participants rated the training to be 'very useful', particularly the sensory awareness and positive behavioural support
- however, the module on self-awareness scored lower than other modules for 'quality of learning' and 'impact and usefulness'.

Survey and interview data found a range of actions, adjustments to policies, and introduction of supportive interventions. Evidence of planned implementation of

learning and change across the schools included:

- introduction of social stories (actioned during lockdown)
- one page profiles
- more autism friendly behaviour policies.

PCFs described the actions their schools had planned on transitions, such as:

- starting transition conversations for all pupils with SEND from Year 5 onwards
- PCFs representing parents reported schools making changes based on parent feedback.

AET training received strong positive feedback from educators and trainee teachers:

- 88 educators and 55 trainee teachers received the training
- 89% said the learning had significantly impacted on their practice.

Through *Understanding Myself* training (primarily designed for the young people) staff put new practices into place and felt able share advice with other teachers to help students through their learning.

NEW WAYS OF POSITIVE WORKING: EXAMPLES

Stockton PCF worked with two schools who made reasonable adjustments, including:

- timetable printed out and sent home
- home to school communication books
- menus sent home to allow children time to process
- discussions to manage children's adversity to food.

Positive behaviour support

One educator reported cascading the positive behaviour support (PBS) training to the teaching staff saying they found it 'very useful' and, in some cases:

"Life changing. I feel that the understanding of behaviour in all staff members has radically increased."

Transition

Working with their local PCF, plans were made to improve transitions support between one Darlington primary school and the local secondary school SENCOs.

Autism Education Trust

Educators reported a greater understanding of how they can tweak their settings to improve the children's everyday experience

Understanding Myself

Through *Understanding Myself*, examples of educator learning included:

- avoiding asking direct questions
- not pressing for an answer, and
- adjusting how to support young people with autism to work in groups.

Mindfulness

In Mindfulness sessions, students engaged in activities which aided learning about things that worry us or are stressful, what it is like when worries build up and what can help release stress. One teacher reported positive feedback on how students were expressing and articulating their emotions.

PARTICIPANT FEEDBACK

"I have learnt a great deal about the strategies needed to best help children with autism." Programme participant, training

"As staff it has given us an insight of how [neurodiverse] students work and things that need to be put in place for them to thrive in school." Educator, involved in Daisy Chain's 'Understanding Myself' training

"One student who has autism and who often has difficulty with expressing and articulating feelings was starting to identify his emotional response to situations." Educator involved in Mindfulness for Young Life

"As a team, we have incorporated many of the ideas and resources shared during the training sessions into our work with schools, thus helping to disseminate the information shared across the Newcastle area." SENDIASS team, Newcastle City Council

- B. A reduction of days lost through absence (Total numbers per school) – to be measured over a full school year**
- C. A reduction in exclusion rates (Total numbers per school) – to be measured over a full school year**

HOW THE OUTCOME WAS EVALUATED

Data for outcomes B and C has not been made available.

KEY FINDINGS

Undoubtedly, COVID-19 will have impacted on data this year from March onwards. If the programme is repeated, planning for the evaluation should identify an action plan to help ensure consistent data collection.

Alternative measures such as metrics to measure staff attitudes and values and other data points are discussed in this report (and in the Phase 1 report), which may be useful to show change for SEND children as a result of the programme.



D. Number of avoidable admissions to hospital informed by local areas Dynamic Support Register

HOW THE OUTCOME WAS EVALUATED

Data on avoidable admissions informed by local area dynamic support registers was not made available to the evaluation.

Qualitative information via surveys and interviews provided instances of the types of activities which may help to reduce avoidable admissions.

KEY FINDINGS

Overall, there has been a significant increase in the number of Community Care Education Treatment Reviews and an increase in the number of children and young people classified as ‘at risk of admission’.

It is difficult to evaluate the impact of the Accelerator project with regard to Dynamic Support Registers and avoidable admissions in a quantitative manner. However, feedback suggests the quality and information sharing across sectors has significantly improved, with increased awareness from parents and schools/SEND leads. An additional digital training offer for CETR has been attended by over 161 professionals.

All children with SEND were risk assessed as part of COVID-19 support for families from schools and SEND leads. Admission rates fell at the start of COVID-19, all services were impacted, and many health professionals’ focus redirected to urgent services.

Early interventions

Examples included taking appropriate steps to follow up with one young person who, because of the safe environment created by the *Understanding Myself* course, had felt able to disclose they had been self-harming.

Avoiding admissions

Following involvement in Phase 1 last year, one educator at a specialist school understood the appropriate mechanisms, she felt confident to intervene and seek help to plan for the young people and support their families to prevent likely subsequent admissions.

“Last year we held two Care Education and Treatment Reviews (CETRs) after learning about them via the accelerator programme. This year we have had none, as we have a greater understanding of who to refer to before we get to that point.” Educator at a specialist school involved in Phases 1 and 2 of the Accelerator

E. Percentage of participants with increased resilience and confidence levels (School staff, pupils, parents and carers).

HOW THE OUTCOME WAS EVALUATED

Quantitative data was provided from the learning modules and the AET training data, which also provided qualitative survey information.

Qualitative survey data was provided by PCFs and schools. Further data was gathered in interviews and from the courses developed to support the young people themselves.

Not all surveys were completed due to the COVID-19 lockdown.

KEY FINDINGS

Learning modules:

- confidence scores recorded pre and post learning show an increase in confidence across all learning modules by an equivalent of 24% (an increase of 1.2 on a scale of 1-5)
- the 'increase in confidence' score (post training) by module was highest for the modules on positive behaviour support
- willingness and ability to teach others recorded as a positive score for topic specific modules
- one school reported the quality of training was mixed; the sessions on sensory processing training and positive behaviour support training were rated highly, but the style was not as engaging for the leadership training

- several teachers noted the benefits of learning and interaction with the other participants.

Parents and carers who participated in the project reported positively, indicating increased confidence and resilience, including:

- huge progress in strengthening relationships with staff
- building parents' own confidence about being able to advocate for their child within school, despite having had negative experiences of approaching staff in the past
- being part of the forum has helped parents' own mental health as well as helping their child's
- coffee mornings were welcomed as a positive chance for families to share what they are going through with someone neutral.

Daisy Chain's AET training received strong positive feedback, from educators and trainee teachers:

- 85% said their understanding of autism had significantly increased.

The *Understanding Myself* and *Mindfulness* courses both reported increased confidence, including young people gaining confidence to speak and show their emotions.

EXAMPLES OF INCREASED RESILIENCE AND CONFIDENCE

One teacher described plans to implement specific tools from the leadership training to support change management for educators and leadership in their school.

The AET training took an inclusive approach, providing 'Ideas and information to use to support all pupils in school'. This gave teachers confidence to find ways to support neurodiverse students within a mainstream setting. Participants reported plans to adjust strategies and routines to make learning environment more suited to personal needs.

One student told the trainer that he felt able to initiate a conversation with someone and this is something he has never been able to do.

"Families felt listened to and their points of view mattered." Comment from a PCF

The PCF coffee mornings were:

"A positive chance for parents to share what they're going through with someone neutral who understands. Now they're building a peer support network."

SENCO of a school in an economically disadvantaged neighbourhood

"After the training, I linked up with attendees, we spoke about how we could implement things' [around autism and communication, and speech and language needs]." Teacher from a Phase 2 school

"I feel like I understand more about autism and how it affects autistic children and how we can make simple adaptations in school to benefit them." AET training participant

"It's given us confidence to actually make changes." Educator's response to training

When asked about the parent carer forum, one SENCO said:

"We've started something wonderful!"



F. Change in culture evidenced through application of timely and specific interventions and use of best practice resources.

HOW THE OUTCOME WAS EVALUATED

Qualitative data taken from surveys and interviews.

It should be noted that culture change takes time to take effect. Due to partial school closures there was limited data on implementation.

KEY FINDINGS

Examples from schools and reflections from PCFs include;

- use of one-page profiles, sensory awareness and adapted approaches
- listening events with parents to strengthen relationships with staff
- parents said issues were now getting dealt with, either in the PCF coffee mornings, or one-to-one meetings with school.

Several schools noted a change in staff interactions with children since January with staff taking a needs-based response, indicating a shift in values and attitudes.

The AET training feedback included several hints towards a cultural shift. Whilst this is too early to judge, further follow up evaluation would be useful to test this (see examples below).

Changes to systems and processes helped special schools engage in the local authority assessment process.

Unfortunately, one school's plan to amend whole school behaviour policies to reflect the positive behaviour support approach was cancelled due to school closures for most pupils.

Whilst most schools and PCFs shared positive examples, not all schools were able to prioritise the activity expected by the Accelerator (See example on CPD below).

CHANGE IN CULTURE EXAMPLES

"I'm always telling a child off for having a backpack on his knee."

The explanations around sensory processing needs helped the teacher to make sense of this behaviour (reported by the CAMHS practitioner trainer).

One school reported they did not have space in their continuous professional development (CPD) calendar, so were not able to fully access the expert CAMHS support. This highlights the benefit of allowing greater lead-time for educators, and the need for buy-in from senior staff that could potentially change the CPD calendar.

It is noted that elsewhere, senior staff did have the flexibility to respond to emerging priorities, for example, if they felt the existing teacher training programme did not reflect the needs of neurodiverse students.

One OT practitioner provided a virtual assessment over Zoom involving school staff, the child and parents. This provided useful coaching for the staff.

When specialist schools highlighted not being aware of local authority assessment processes or how to best engage, one CAMHS practitioner encouraged schools to log each of the contacts from local children's services to help track each student. This helped to highlight the nature of the assessment process, what to expect and how the school can improve their records and systems internally.

Sensory processing training enabled teachers to gain useful understanding; the trainer shared objects and toys to enable the discussion on sensory needs. However, plans to implement sensory training have been delayed due to hygiene issues with sharing fidget toys.

"Rather than focus on a child's behaviour and the consequence, several staff have shown more of a reflective approach about why the child may have acted in a certain way, and at times a teacher has altered their approach before the behaviour happened, in a pre-emptive way." Assistant Head Teacher

Training encouraged staff to:

"Think from the perspective of the children, including all the uncertainties the pupils are facing. This has enabled us to adjust our practice to make it easier for the children." Assistant Head Teacher

"It has really made me consider the children in our setting who have a diagnosis and those that are on the pathway – thinking about their 'voice' – what works for them!" AET training participant



G. Percentage of participants who can improve their access to opportunities in school and their community.

HOW THE OUTCOME WAS HOW THE OUTCOME WAS EVALUATED

Qualitative data taken from surveys and interviews.

Limited survey data meant it was not possible to provide a quantitative response to this question.

KEY FINDINGS

Responses indicated a number of the schools had begun to implement improvements to enable access to opportunities, such as through:

- specific classroom interventions
- support for individuals or groups of children
- PCF meetings which supported parents to engage with the schools.

In a number of cases, schools described expanding policies that worked well for SEND children, particularly in response to the COVID-19 lockdown. One teacher described how they had taken the booklets they normally offered to autistic pupils and were developing booklets for all students returning to school in September.

“Often you don’t need to do something different, what works for students with autism works for others too.”

The PCF activities have promoted diversity by offering opportunities to individuals and communities who may not previously have had the chance to get support. For example, one parent from a traveller community attended a coffee morning and has since become a forum member.

IMPROVED ACCESS TO OPPORTUNITIES: EXAMPLES

Interventions included using trauma informed approach to adjust a child’s curriculum. Another school reported social stories were used successfully during lockdown, following training by CAMHS practitioner which took place one week before the Government advice to close schools.

Edward’s case study describes how the teacher pre-empted a child’s behaviour and used positive reinforcement to enable a student to engage in their PE lesson.

One primary school recently appointed a teaching assistant for autism. Although this was prompted by the needs of a child, being part of the Accelerator School project helped the school understand what type of support would best enable the child to thrive and engage.

During the making of the transitions film *Talk to Me! One size fits no-one* in the focus groups and on film, the young people involved talked about their hopes and ambitions for a range of interesting jobs.

“We were in the middle of running the Understanding Myself workshops. These sessions had the most amazing impact on the students, and we are hoping to set up lunchtime groups for students involved as there was an immediate camaraderie between them!”



Case study examples

The following examples were provided by professionals working with SEND children. The names of the children have been changed to protect their identities.

Please see [Appendix 2](#) for details of Connor Richardson's journey through life, education and employment.

CASE STUDY 1: SENSORY NEEDS

An Occupational Therapist (OT) from Sensory Worx (a specialist therapy organisation) provided support for Abdul, a child whose sensory processing and proprioception is impaired. He is very active at school and as he climbs and throws a lot, the staff were finding this challenging. The OT explained his needs, including how his sensory needs were affecting his behaviour, and helped develop a programme of activities. She discussed with staff how they might respond to Abdul, and what progress they might expect to see over time, if they follow the activities and use positive behaviour support.

The school SENCO described how staff have changed their approach already:

"It makes sense to them now why he behaves like this and they can see it isn't helpful to tell him off. Now they feel empowered – they know what to do."

CASE STUDY 2: POSITIVE BEHAVIOUR SUPPORT

Edward has not been diagnosed with autism, but displays some traits of autism such as he can have a rigid outlook. If he is told off for doing something he thinks another pupil is also doing, he finds this very unfair and responds negatively. Having identified this pattern of behaviour, the teacher rethought how they would approach the situation.

In one PE class, the child was not engaging. The teacher made it obvious they were speaking to the whole class, not just one individual, about the behaviour. The teacher chose not to focus on the child, but instead highlighted the positive behaviours in the class and focused on what she wanted to see. The outcome was positive for the child and the class.

CASE STUDY 3: NEEDS-BASED CURRICULUM

Ben (age 9) has significant childhood trauma and attachment issues. Because of his level of need, he has a keyworker at school to support him, but the school was finding his behaviour challenging.

The CAMHS practitioner asked about Ben's history and encouraged staff to imagine Ben's early childhood experiences. The support team changed the daily afternoon curriculum into a play curriculum and the keyworker now provides four activities every week including:

- messy play, such as painting or modelling
- an ongoing activity to add to each week, such as building
- a sharing time with an adult, such as reading a book
- an activity with taking turns, like dominoes.

These are simple activities which a parent might do, but which this child had missed. The SENCO said "we wouldn't expect to see a change overnight" but she reports that by late March 2020, the approach appeared to be having some success: "the child has now built up a positive relationship with their keyworker" and his behaviour is calmer. Previously, before his afternoon sessions with the key worker, Ben would have been unsettled in the half hour after lunch. By March, teachers noted he often came in and got on with his work in class, knowing he had the play activities afterwards.

CASE STUDY 4: ACCESSING EDUCATION

Daisy Chain supported Sally, a young girl with autism, who due to her extreme anxiety was a long-term school refuser. The deputy headteacher of the school the girl was enrolled at attended training Daisy Chain provided through the AET programme to school leaders. The teacher took the strategies back into her school. Changes were made, and with Daisy Chain's help the young girl was reintegrated successfully back into the classroom.



Update on progress for schools involved in Phase 1

Since the end of Phase 1 in 2019, it was noted that schools had developed their understanding and awareness of the systems they could use, including earlier interventions to avoid potential hospital admissions and improved support and advocacy for children and families (see ‘Avoiding Admissions’ outcome, page 27).

Two of the schools from Phase 1 have reported positive action over a longer period of time, introducing specific training into their staff CPD, filtering the work down through the school systems and planning for the future, and implementation from Phase 2.

TRIPLE A FILM

In Phase 1 of the Accelerator, two films were made with young people with autism and SEND (see [Appendix 1](#) for details).

At the launch event of the Phase 1 film about school and the experience of what school is like for pupils with autism, some of the young people involved in making the film talked to the audience. They discussed their experience, what they felt about being involved in the work and how it had made a difference to them.

The Clinical Commissioning Group and Triple A received direct feedback about their 2019 film on autism in schools when they showed it in training with teachers at several schools. One teacher shared her moment of realisation with the group. The teacher described a time when a pupil had taken her words literally when she used the

phrase ‘crocodile tears’ in class: the pupil laughed as they thought the tears were tiny crocodiles running down someone’s face. The teacher had told the pupil off for being rude. Learning about social communication needs helped the teacher to have a discussion with the young person and to positively repair their relationship.

METRICS FOR EVALUATION

A specialist teacher from the SEN Teaching and Support Services team at Newcastle City Council suggested identifying other measures other than absences and exclusions to help monitor progress for autistic and SEND children.

“If schools are willing, consider looking at how schools record removals from lessons, as most schools have a safeguarding monitoring system in which incidents get recorded, including behaviour incidents, for example on ‘cpoms’; [a type of monitoring and safeguarding software] used to record incidents in relation to a child and alerts key members of staff for the child.”

While this data should be used with caution, this type of metric is more likely to provide an early indicator in terms of changes in staff attitudes, values and responses.

Data on exclusions should be looked at over the longer term, but may not help to identify what is happening for those children with a need but without a diagnosis of autism.

PROGRESS SINCE PHASE 1 – A SPECIAL SCHOOL

We developed our sensory awareness work – one of our emotional support staff gained a significantly higher awareness and understanding of the nature of sensory needs and ways in which to meet them. In 1:1 and small group settings, she continued with her good practice from Phase 1, using a range of sensory resources, depending on her knowledge of the pupils and their needs. Examples of specific actions include:

- Establishing a 'squeeze-in zone' in her room, providing calming pressure, to be accessed by secondary students on a needs basis. Staff were pleased that this was taken up spontaneously by students.
- Following up individual students and their need for wobble cushions in specific classes to help with sensory needs whilst remaining seated in class.

Once schools return in September, the school aims to order the sensory equipment so that the member of staff to can take responsibility for its use, informing and educating other staff and making sure the equipment is used appropriately for everyone that needs it.



Recommendations and key messages the evaluation heard

FUTURE PROGRAMMES SHOULD DEVELOP A 'THEORY OF CHANGE' AND PLAN HOW TO GATHER DATA FROM SCHOOLS

The aims of this project are challenging and can take time to achieve. The evaluation went some way to achieving an impact assessment of the different strands, however the partial school closures due to COVID-19 made collating data difficult. In addition, the multiple strands of activity, involving different agencies and groups, make this a complex programme driving much needed social change

RECOMMENDATION: A 'theory of change' or 'logic model' should be prepared for future programmes of this type – to map out how the expected outcomes relate to the activities and inputs, and to identify the best means to measure these.

Published data on educational exclusions and hospital admissions have a lag time and individual groups of children may not be identifiable within the data sets. Hospital data does not currently link to show a child's school. Early indicators to show changes in staff attitudes and values, reasonable adjustments and strengthened relationships would be more useful than exclusion data to demonstrate progress and could be developed using validated measures (other data points are discussed in the [Phase 1 report](#)).

RECOMMENDATION: Early planning for the evaluation should identify an action plan to help ensure consistent data collection if the programme is repeated, for example:

- schools would need to be asked up front to agree what data they will share before and after the training (perhaps through a more detailed questionnaire)
- the programme should consider how to incentivise or require participating schools and parent carer forums (PCFs) to provide baseline and follow up data
- provision of training or funding could be contingent on baseline surveys being completed in advance of the delivery starting
- the Accelerator School project joint sponsors (for example those in local authorities) could ask schools, PCFs and others to sign up to this, which would help to set expectations and make this positive work as meaningful and impactful as possible.

Further detail on a possible approach to evaluating the CAMHS practitioner input to schools is outlined at [Appendix 3](#), which could be used as a starting point for future evaluation of this strand.

Baseline measures can be used to test educators' attitudes, values towards children with autism and SEND and their responses to children's' behaviour.

Tools such as the Challenging Behaviour Attributions Scale the (CHABA), which can be adapted for work in with educators in

schools, or the Autism Attitude Scale for Teachers (AASST) should be reviewed to decide whether a validated measure can be used to capture and reflect what the CAMHS practitioner intervention aims to achieve in schools.

RECOMMENDATION: Baseline measures of participant educator confidence and attitudes using validated tools should be carried out to support the CAMHS input workstream by future iterations of this type of project.

ENGAGING PARENTS AND CARERS AS EQUAL PARTNERS MEANS LISTENING AND RESPONDING TO THEIR NEEDS

More can be done to recognise that all forums involved in the programme are run by parents and carers of children and young people with SEND who volunteer their time to deliver this vital work.

This evaluation has found that at times, PCFs have understandably not always had capacity to meet the competing demands of schools and local partners.

During the current period, parents of disabled children are under extra pressure. Parents recognise that continuing with forum work is more important than ever and many have been instrumental in local conversations about supporting children back to school.

One positive result of the pandemic is that more families are using technology to connect, so potentially more people can engage in peer support and online opportunities.

Feedback from participants of the Accelerator suggest the need to support families is both a person-centred and a

cost-effective approach, and that bringing together families and educators has key to the success of the project.

One CAMHS practitioner noted that whilst the causes of hospital admissions are complex, often when children and young people are accessing inpatient mental health services, there is a home environment challenge as well as issues at school.

Exclusions from school can exacerbate difficulties in the home environment; sometimes school has been a protective factor in supporting the young person.

RECOMMENDATION: Support and resources for PFCs to grow their capacity, resilience and understanding of their child's needs and behaviours should be provided by future programmes of this type.

Offering opportunities of training and support directly to the young people and their families, including training families alongside educators should be included in work with families.

ADJUSTING EDUCATOR TRAINING TO MEET LEARNING NEEDS

The outcomes above highlight the need for engagement from senior staff who can adjust the CPD calendar, and the benefits of planning with schools from the outset to allow greater lead-time for CPD scheduling.

RECOMMENDATION: Schools to consider whether staff are up to date with the needs of neurodiverse students and whether the needs of this group are planned into schools' training. This includes considering pupils with individual learning needs, not just those with EHCPs.

UNDERSTANDING MYSELF AND MINDFULNESS IN YOUNG LIFE: EARLY INTERVENTION TO HELP PREVENT MENTAL HEALTH NEEDS

This evaluation has tentatively identified positive outcomes from the two courses aimed at directly supporting young people, including the safe space created to enable peer support of difficult experiences such as self-harm.

RECOMMENDATION: Further evaluation should be conducted to assess whether these courses offered an early intervention which could help to prevent mental ill health for neurodiverse young people in the future.

ACTION ON TRANSITIONS: SUPPORTING LOCAL PROFESSIONAL NETWORKS

The need for a greater and continued focus on transitions, both within and between settings, particularly planning earlier for the transition from primary to secondary school, was a recurring theme of feedback from parents and carers and some good practice has been highlighted.

In the south, where primary and secondary schools were introduced to the Accelerator programme both together, this created links and conversations between the schools. In addition, with attendance of the local authority team supporting schools, the individuals and teams got to know each other.

RECOMMENDATION: Primary and secondary schools should be introduced to the project simultaneously to support an ongoing focus on transitions work in future programmes of this type.

MULTIPLE INTERVENTIONS

Providing the bespoke CAMHS interventions and young peoples' activities on top of the training modules was an extra strength to the programme which many schools noted. It was felt the timing of the evaluation was too early to fully assess the impact of some of the interventions with young people, including *Understanding Myself* and *Mindfulness*.

RECOMMENDATION: Opportunities should be sought to follow up with a further evaluation of the training elements of the project which provided direct support to groups of young people in school settings.

ACCESSING LOWER LEVEL CAMHS SUPPORT AND ADVICE IS AN ONGOING NEED FOR EDUCATORS

Several voices from schools and other agencies described schools' experiencing frustration in trying to access mental health support for SEND children. They said schools often need more information and support specific to the child's needs. One SENCO highlighted the need for better communication with CAMHS:

"It would be helpful to be able to ring CAMHS and get advice. Not necessarily for referring a child into the system, but signposting. If CAMHS are trialling models such as children's hubs, where teachers can ask for advice, this would be invaluable."

RECOMMENDATION: Ensure all Education Mental Health Practitioners working in schools as part of Mental Health Support Teams have training in SEND, particularly autism and also access to specialist learning disability and autism support, to ensure a whole school approach can be delivered.

CHALLENGES FOR REFLECTIVE LEARNING

The evaluation noted that topic-specific modules were better received than the self-awareness and action learning sessions. The latter training sessions involved reflecting on participants' own behaviour, and how this can build self confidence to lead and encourage positive action

RECOMMENDATION: Ensure reflective learning meets the expectations of the groups while providing sufficient challenge and motivation for transformative change considered in how this element is pitched and planned in future.

COVID-19 RESPONSE

The evaluation noted opportunities now available that wouldn't have been taken forward before March, for example the more widely available training for families and educators in supporting pupils experiencing anxiety. However, certain aspects of training will not be optimal online, for example sensory training. The use of fidget toys in face-to-face settings would be difficult to replicate in a virtual setting, so this needs careful consideration to achieve the same outcomes. Recording facilitators on video messages loses the live discussion dynamic, including examples from other teachers and enthusiasm from peers, which helps build the messaging and group momentum to create change.

RECOMMENDATION: Carefully prepared online training opportunities should be maximised within the new context of strengthened communications and online offers, particularly where these enhance inclusive practices for children who may have undiagnosed support needs. Future training should consider new immersive technology such as virtual reality and opportunity to replicate environments and situations to support learning.



ACCELERATOR RESPONSE TO COVID-19

Responding swiftly to the change in circumstances when schools were closed to most pupils meant that practitioners' time earmarked for the schools was used to respond differently. For example, CAMHS practitioners provided webinars and newsletters sent out via schools and PCFs to keep in touch and share information.

Quick adaptation

The strong relationship between the PCFs and the Accelerator core team meant they were able to quickly adapt to the changes required during COVID-19 including rapidly identifying the needs of parents, carers and children at home. The team also demonstrated the ability to engage with other workstreams to ensure joined up approaches across SEND and mental health.

Newsletters and webinars

The regular delivery of informative webinars and newsletters has been highly appreciated across a range of networks. For example the 'back to school' newsletter focused on a theme with strategies, ideas, links to resources, and technology. Bite-size webinars for schools focused on empowering teaching staff to support children's anxiety, managing staff's own wellbeing, managing children who may be moving towards a crisis and identifying how to provide structure and routine.

Workshops

One PCF highlighted their online sleep workshop, which parents found 'really useful and informative', as the type of continued support that has been provided by forums during the lockdown.

Looking forwards: the Accelerator Schools Project legacy and future options

During the evaluation, several schools requested continued face-to-face opportunities during the autumn term. However it is noted that some of the practitioner staff and parent carer time allocated to the Accelerator has been used during April to July 2020 to deliver alternative online provision.

A further question remains as to whether there would be an opportunity for primary schools in the north to learn from the programme, as several primary schools in this part of the region had expressed an interest.

Since the return of schools in September many are reporting they need time to help children settle and learn to live in the 'new normal' and are not in a position to take up further training. However, many are using some aspects of the Accelerator training or interventions.

Moving forward, the learning from this project and further evaluation of the CAMHS intervention will support workforce development of Education Mental Health Practitioners (EMHPs) in trailblazer sites, including:

- mental health support
- wellbeing workers
- ASC champions in schools, and/or
- other opportunities to continue this work in the future, with an aim of promoting of autism awareness in EMHP university training.

To create a strong legacy for the programme, work is underway to share learning on all aspects of the Accelerator Schools Project as widely as possible.

A number of webinars are being produced and shared to ensure wider learning into integrated care systems. The PCF and Accelerator core team are keen to adapt and continue with the offer to parents, carers, and schools – a new offer is in development.

The relationships that have developed will support a system-wide approach, and local teams will continue the combination of interventions along with supporting future developments.

This is in line with the commitments in the NHS long term plan, and the project aim to help reduce inappropriate educational exclusions and hospital admissions for children and young people with learning disabilities, autism spectrum conditions (ASCs) and/or challenging behaviour.

Coproduction and hearing the voice of parents and carers, children and young people continue to be the key driver and focus of the work.

OPPORTUNITIES FOR THE FUTURE

A number of opportunities are identified which could enable further roll out of the learning in this programme, ensuring continued support for children and young people with autism in schools. These include:

Training for Education Mental Health students

Using the learning from Phases 1 and 2 of the Accelerator Schools Project to influence the training for Education Mental Health practitioners (university modules) to include:

- awareness of autism
- impact of sensory processing
- foundations of positive behaviour support
- how to make reasonable adjustments in schools.

Alternative to traditional CAMHS support

Offer an alternative model to traditional CAMHS support via learning disability and autism school liaison roles, or wellbeing workers as ASC champions.

‘Train the trainer’ opportunities

Offer *Mindfulness for young life* and *Understanding myself* ‘training the trainer’ opportunities to mental health practitioners and identify how to provide structure and routine.



Annex A: List of contributors

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Carla Scaife	Darlington PCF
Claire Stirland	Clinical Lead Occupational Therapist and founder of Sensory Worx
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ORGANISATIONS

Autism Education Trust	autismeducationtrust.org.uk
Daisy Chain	daisychainproject.co.uk
Include 'in' Autism	includeinautism.org.uk
Triple A Films	tripleafilms.co.uk tripleaproject.org.uk

Annex B: Participating schools

NORTH- SECONDARY 11 SCHOOLS

Newcastle

Sir Charles Parsons Kenton
Trinity Academy Benfield

Northumberland

Duchess Community High
Queen Elizabeth High School

Gateshead

St Thomas More River Tyne

South Tyneside

Epinay

Sunderland

Thornhill Academy Washington

Redcar

Laurence Jackson Freebrough

Durham

North Durham Durham Federation
Croft Community School

Middlesbrough

Unity City River Tees Secondary
Outwood Acklam Outwood Ormesby

Stockton

Abbey Hill

SOUTH PRIMARY 12 SCHOOLS (11 FULLY PARTICIPATED)

Redcar

Coatham Westgarth
Grangetown Green Gates

Darlington

Northwood Harrowgate Hill

Stockton

St Marks Pentland
Bader Primary

Middlesbrough

Hemlington Hall Corpus Cristi
River Tees Primary

SOUTH SECONDARY SCHOOLS 10 SCHOOLS (9 FULLY PARTICIPATED)

Appendices

Available in a [separate Appendices document](#):

- Appendix 1: Coproduction of transition film *Talk to me! One size fits no-one*.
- Appendix 2: Case study.
- Appendix 3: Accelerator CAMHS support: Suggestions for future evaluation.
- Appendix 4: CYP peer network meetings.
- Appendix 5: Participant feedback.



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disabled children.

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families, bring
families together
and help families
take action
for others.




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