

## AUTISTIC SPECTRUM DISORDER PROFILE

Name:	School:	DoB	Year Group	Gender M/F	SA /SA+/ Statement/EHCP
-------	---------	-----	------------	------------	-------------------------

ASD Indicators - Highlight as appropriate. Only highlight an indicator if there is supporting evidence.		Possible Interventions: highlight and add as necessary			
	Social Interaction, Communication & Imagination	Sensory perception	School/education intervention/support	Other Agency/service intervention/support	Cost
A L o w  L e v e l	<ol style="list-style-type: none"> <li>1. Able to self-manage distress/behaviour in most mainstream situations</li> <li>2. Some social misunderstandings</li> <li>3. Some low level preoccupation with special interests,</li> <li>4. Evidence of some unusually literal verbal communication</li> <li>5. Some evidence of rigidity of thought.</li> <li>6. Some difficulties with unexpected change</li> <li>7. "Quirkiness"</li> </ol>	<ol style="list-style-type: none"> <li>1. Evidence of some sensory sensitivities or lack of sensitivity</li> </ol>	<ul style="list-style-type: none"> <li>• ASD awareness training for all staff</li> <li>• Minor changes to the whole school environment. E.g. pictorial signage.</li> <li>• Regular routines, direct language, low noise volume in rooms/dining rooms etc.</li> <li>• Clearly defined tasks with adults checking understanding</li> <li>• Access to familiar adults</li> <li>• Some Social Stories</li> <li>• Circle of Friends, Buddies</li> <li>• Assess impact of ASD on learning</li> </ul>	<ul style="list-style-type: none"> <li>• Some training/support for family/carers for joint plans</li> </ul>	
B	<ol style="list-style-type: none"> <li>1. Accepts and responds to a range of strategies, e.g. visual strategies and resources, social stories, interactive music to communicate, boundaries and structures.</li> <li>2. Successfully learning in a range of contexts</li> <li>3. Some incidental learning of social cues.</li> <li>4. Special interests beginning to be repetitive /obsessive.</li> </ol> <p><b>With appropriate support strategies in place:</b></p> <ol style="list-style-type: none"> <li>5. Can self manage anxiety/distress/behaviour and boundaries.</li> <li>6. Can accept and manage change</li> <li>7. Can manage unstructured times –</li> </ol>	<ol style="list-style-type: none"> <li>1. Evidence of some hypo and hyper sensory sensitivities.</li> <li>2. Evidence of some anxiety, maybe arising from a consistent source.</li> </ol>	<ul style="list-style-type: none"> <li>• Access to ASD trained teachers and support staff</li> <li>• Provide structures with predictable routines/boundaries and reward systems.</li> <li>• Consistent, familiar adults</li> <li>• Provide visual schedules</li> <li>• Appropriate differentiation and Some alternative programmes.</li> <li>• Self regulated access to a calming room, safe space/sanctuary at school.</li> <li>• Circle of Friends, Buddies</li> <li>• Self-Esteem raising strategies.</li> <li>• Risk Assessment and personal support/learning plan</li> </ul>	<ul style="list-style-type: none"> <li>• Planning with parents/carers for consistency</li> <li>• Family/carer support</li> <li>• Involvement of outside agencies</li> <li>• Planning and training for sensory sensitivities.</li> <li>• Calming room, safe space at home,</li> <li>• Social skills training and small group support</li> </ul>	

	breaks/lunch/before and after school 8. Can self-manage controlling behaviour				
	<b>Social Interaction, Communication &amp; Imagination</b>	<b>Sensory perception</b>	<b>School/education intervention/support</b>	<b>Other Agency/service intervention/support</b>	<b>Cost</b>
<b>C</b>	<ol style="list-style-type: none"> <li>1. Successful communication when supported by an alternative means of communication.</li> <li>2. Requires clear structures and boundaries consistently reinforced.</li> <li>3. Needs specific teaching of calming and self-regulation strategies</li> <li>4. Shows greatest comfort when not in a social context</li> </ol> <p><b>Despite support and interventions</b></p> <ol style="list-style-type: none"> <li>5. Increasing anxiety leading to some obsessive behaviour</li> <li>6. Increasing need to control and manage the environment.</li> <li>7. Increasingly at risk socially, e.g. gang involvement, bullying.</li> <li>8. Increasing difficulty in accepting and managing change</li> <li>9. Increasing inappropriate social awareness, e.g. words/phrases, eye contact, personal space</li> </ol>	<ol style="list-style-type: none"> <li>1. Some hyper and/or hypo -sensory reaction is evident.</li> <li>2. Can self-manage distress/ behaviour, arising from sensory stimuli, with support..</li> <li>3. Some evidence of low self-esteem.</li> <li>4. Some personal safety risks.</li> <li>5. Sensory perceptions present some barrier to communication, social access and learning</li> </ol>	<ul style="list-style-type: none"> <li>• Teaching of alternative communication systems.</li> <li>• Additional intervention from, trained adults and focused support/training.</li> <li>• Teaching and learning adapted.</li> <li>• Increased structure to the environment with clear routines.</li> <li>• More developed routines for self management of distress/behaviour</li> <li>• Specific visual supports</li> <li>• Social awareness and skills programmes</li> <li>• Regular home/school liaison and planning for support and consistency</li> <li>• Sensory profile and sensory diet</li> <li>• Positive handling assessment</li> </ul>	<ul style="list-style-type: none"> <li>• Increasing structure beyond the school with clear routines.</li> <li>• Routines for self management of distress/behaviour.</li> <li>• Specific visual supports.</li> <li>• Additional adult intervention and specific training.</li> <li>• Further partnership with other agencies, such as– CAMHS, Social Care. MAT, EPS.</li> <li>• Social awareness and skills programmes.</li> <li>• Social awareness and skills programmes.</li> <li>• Sensory profile and sensory diet.</li> </ul>	

<b>D</b>	<p><b>Despite support and interventions</b></p> <ol style="list-style-type: none"> <li>1. Increasingly limited communication including through alternative communication systems.</li> <li>2. Significant anxiety when in groups.</li> <li>3. Shows increasing desire to remain in a preferred location with periods of noticeable passivity</li> <li>4. Significant inappropriate physical reactions to non-physical social contact stimuli, e.g. words/phrases, eye contact,</li> </ol>	<ol style="list-style-type: none"> <li>1. Significant difficulty to self-manage distress-behaviour (including anxiety) in response to sensory stimulus.</li> <li>2. Significant Hypo/hyper sensory sensitivity and/or in seeking sensory feedback .</li> <li>3. Raised/diminished pain threshold,</li> </ol>	<ul style="list-style-type: none"> <li>• Support from ASD specialist trained teaching and support staff</li> <li>• High level of structure to the environment with visual support throughout</li> <li>• Highly predictable routine including lunch-time, and breaks</li> <li>• Personalised curriculum and teaching structures.</li> <li>• Consistent home/school</li> </ul>	<ul style="list-style-type: none"> <li>• Family support – working with partner agencies</li> <li>• CAMHS involved</li> <li>• OT programmes with Sensory profile and sensory diet</li> <li>• Positive handling approaches and behavioural support planning</li> <li>• Consistent home/school</li> </ul>	
----------	---	--	--	--	--

D cont	<p>personal space.</p> <ol style="list-style-type: none"> <li>5. Some hygiene and personal care issues</li> <li>6. Vulnerable in social contexts.</li> <li>7. Significant fixations/ obsessions on people/objects/activities</li> <li>8. Significant need to control outcomes.</li> <li>9. Significant difficulty in accepting, coping with and managing change</li> </ol>	<ol style="list-style-type: none"> <li>4. Use of self-stimulation.</li> <li>5. Confusion between fantasy and reality</li> <li>6. Sensory perceptions present some significant barriers to communication, social access and learning.</li> <li>7. Personal safety risks.</li> </ol>	<p>programmes with family support</p> <ul style="list-style-type: none"> <li>• Easy availability of quiet space</li> <li>• High level of individual support</li> </ul> <p>Sensory room,</p>	<p>programmes with family support</p>	
	<b>Social Interaction, Communication &amp; Imagination</b>	<b>Sensory perception</b>	<b>School/education intervention/support</b>	<b>Other Agency/service intervention/support</b>	<b>Cost</b>
E  H i g h  L e v e l	<ol style="list-style-type: none"> <li>1. Requires a very high level of personalised support to attend school.</li> <li>2. Has a high level of difficulty in leaving the house/bedroom</li> <li>3. Has extreme difficulty in functioning in groups</li> <li>4. Does not understand behavioural and social boundaries thus causing great impact on themselves and others.</li> <li>5. Is very vulnerable in social contexts, and can exhibit extreme physical and verbal reactions to social contacts, e.g. words/phrases, eye contact, personal space.</li> <li>6. Physical responses towards home/family, school staff, peers and property</li> <li>7. Has significant hygiene and personal care issues.</li> <li>8. Exhibits extreme passivity. Selective mutism.</li> <li>9. Very vulnerable in situations requiring communication because of minimal systemic means of communication, including in the use of alternative communication systems.</li> <li>10. Extreme literal thinking/understanding</li> <li>11. Extreme fixations /obsessions on people/objects,</li> </ol>	<ol style="list-style-type: none"> <li>1. Very significant Hypo/hyper sensory reaction.</li> <li>2. Unable to self-manage distress-behaviour. (including anxiety) in response to sensory stimulus.</li> <li>3. High/low pain threshold.</li> <li>4. Evidence of self harm.</li> <li>5. Confusion between fantasy and reality resulting in dangerous/disruptive actions.</li> <li>6. No awareness of danger.</li> <li>7. Very Vulnerable</li> </ol>	<ul style="list-style-type: none"> <li>• A highly specialist low incidence placement.</li> <li>• Very highly structured environment, visual support and highly predictable routines.</li> <li>• High level of individualised support/programmes</li> <li>• Highly structured, consistent joint home/school programme including training of parents/carers</li> <li>• Partnership planning with regular OT programmes/activities.</li> <li>• Life skills programmes</li> <li>• Personalised curriculum and</li> <li>• Teaching structures.</li> <li>• Sensory diets</li> <li>• Positive handling and 'tight' planning EPS and SLT</li> </ul>	<ul style="list-style-type: none"> <li>• A highly specialist low incidence placement</li> <li>• High level of individualised support/programmes</li> <li>• CAMHS and Health involvement</li> <li>• Highly structured consistent joint home/school programme including training of parents/carers.</li> <li>• Partnership planning with Regular OT programmes /activities.</li> <li>• Sensory diets</li> <li>• Positive handling.</li> <li>• Focused planning.</li> </ul>	

	12. Extreme resistance to change 13. High level attempts to control, demand avoidance 14. Evidence of extreme manifestation of mental and behavioural disorders identified in NICE Guidelines Summary (Page5).				
<b>STRENGTHS AND ABILITIES</b>					
<b>AGREED ACTIONS</b>			<b>New Interventions</b>		
<b>THOSE PRESENT</b>			<b>Date of this review</b>		
			<b>Date of next review</b>		