Keyhole
Autism
Project

An Evaluation of the
Keyhole® Autism Project
provided by Early Years
2005-2007

**Roy McConkey and
Victoria Milligan**
Institute of Nursing Research,
University of Ulster
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Acknowledgements

Executive Summary

With funding form the Big Lottery, Early Years (formerly known as NIPPA) organised a series of 12.5 hour training sessions for playgroup personnel throughout Northern Ireland. This was done in association with Autism NI and Barnardos whose staff had expertise in this area. The courses were based on the Keyhole® approach that had been developed by Autism NI and titled: 'Pre-School children with Autism: Developing a Visually Structured Approach'. Over the three year period, 23 courses were presented attended by over 400 participants. These were jointly tutored by an Autism specialist and an Early Years specialist.

This report summarises the rationale for the courses, describes their delivery and outcomes achieved as reported from information gathered from tutors and course participants through focus groups, self-completion questionnaires and telephone interviews.

Conclusions

From the information gathered, a number of conclusions can be drawn with respect to the training of playgroup personnel in ASD.

- There is a demand for training as evidenced by the number of enrolments and the over-subscription of places.
- The course appears to be unique in these islands in that it has been tailored to meet the training needs of playgroup personnel.
- The course is accessible to all personnel involved with playgroups and provides them with a common language and approach to children who have ASD.
- The course has been positively evaluated by participants.It has increased their understanding of this condition; nurtured their confidence in managing children with ASD within their groups and encouraged them to adjust their practice.

- A set of training resources has been developed to assist tutors with course presentation.
- There is evidence of 'spill-over' effects beyond the original intentions of the course developers. Other children in the group have benefited from the use of approaches taught on the course; children suspected of having ASD have been referred for assessment and parents feel more confident in sending their child to the playgroup.
- The course facilitates the social inclusion of children with disabilities alongside their siblings and peers, and provides equality of opportunity to the children and families.

Recommendations

The recommendations fall into four inter-linked themes:

1. The course should continue to be provided to early childhood personnel in N.I.
2. The course should be marketed in Britain and Ireland.
3. The contribution of playgroups to children with ASD and their families should be linked more closely with other services and supports.
4. Selected Playgroup personnel should have the opportunity to undertake more advanced training in ASD and all personnel should have an awareness of ASD.

The three partner agencies are to be congratulated in devising and delivering an innovative initiative for personnel in early years education. An excellent foundation has been laid on which further developments can be built so as to maximise the investment of effort and money that has been made.

Rationale for the courses

What is autism?

Autism is a complex developmental disorder that essentially affects the way a person communicates and relates to people (Howlin, 1998). It is often evident by two years of age but it affects children in varying degrees of severity. The term Autistic Spectrum Disorders (ASD) is used to reflect this variation.

Children with ASD share three common impairments. They have difficulty interacting socially and appropriately with other people; they have problems both with understanding and in using language to communicate, and their capacity to think imaginatively is impaired.

Their intellectual abilities also differ markedly. Some will have severe learning difficulties whereas others function in the average or above average range. The latter tend to be referred to as Asperger's Syndrome.

Children with ASD may look like other children but many behave inappropriately for their age.

They can experience a range of additional difficulties in everyday life such as limited attention span, anger or aggression when things go wrong, poor organisational skills, sleep irregularities and clumsiness due to poor motor control. They engage in repetitive play activities and obsessional routines. Autism appears to be a life-long condition although there are claims that 'recovery' or cures are possible for certain individuals. Recent advances strongly suggest that the condition is ameliorable and improvements are possible.

Increasing numbers

In many affluent countries there has been a reported increase in the numbers of children – boys especially – who are given a diagnosis of an autism spectrum disorder (ASD). In south London, rates among a sample of nearly 60,000 children aged 9-10 years were 116 per 10,000 (Baird et al, 2006) which is nearly double the estimated rate of around 60 per 10,000 children across 14 countries reported by Fombonne (2005). A recent survey of pupils in the Belfast Education and Library Board found 1.32% of pupils had an ASD (Clarke, 2007).

Debate continues as to whether or not this represents a real rise in these conditions or if it results from better identification, use of broaden diagnostic criteria and a greater willingness by doctors to make this diagnosis (Gernsbacher et al, 2005). Nonetheless this means that more families are reporting concerns about their child's development to healthcare professionals such as health visitors, GPs or staff in childcare facilities.

Past research suggest that parents are often aware of the child's problems by 18 months (Cassidy et al, 2008; Young et al, 2003) but often a formal diagnosis is not made until after three years of age with long waiting lists for assessments (Charman and Baird, 2002).

Promoting the development of children with ASD

The delay in obtaining a diagnosis may prevent families from availing of suitable early intervention strategies. It is crucial that these commence as soon as a problem is identified. There is accumulating evidence that interventions based around visual communication and behaviour management strategies can produce developmental gains in the preschool period especially if they are commenced at an early age (Rogers, 1996; Buschbacher and Fox, 2003). According to Jordan (1997), *"Education remains the one treatment approach with the best track record for dealing with the difficulties associated with autism".*

A five-strand approach commands wide support (McConkey, Kelly and Cassidy, 2006).

- Recognising and identifying the child's problems from an early age – 18 months onwards.
- Developing an individual education plan to address the child's particular difficulties and needs
- Training families on teaching programmes which they can use with their child at home.
- Supporting families with the extra stresses they experience.
- Encouraging the social inclusion of the child in family and community life such as preschool facilities.

Latterly increased interest has centred on the use of structured play in home-based interventions (Boucher and Wolfberg, 2003). Play activities can more easily engage the whole family. They are more ecologically valid in that they can be adjusted to the culture and circumstances of the family. Activities can be chosen to match the child's developmental level and interests and hence increase the child's intrinsic motivation to join in rather than relying on extrinsic reinforcement. They provide a link into the play activities that children will experience in playgroups and preschools. The value of enriched play environments is well attested for children with a range of developmental problems and disadvantaged backgrounds (Yawkey and Pellegrini, 1984).

However it is not known the extent to which play activities per se can assist the child with ASD and the contribution that attendance at a playgroup could make. It is clear though that many families in Northern Ireland aspire to their child attending a local preschool facility although some did feel that a specialist facility was required with a focus on explicit teaching methodologies, such as Applied Behaviour Analysis (Cassidy et al, 2008).

Keyhole® Early Intervention

This home based programme was developed in Northern Ireland by Autism NI (formerly PAPA) in conjunction with speech and language therapists and early childhood educators. It consists of a series of visits by an early intervention therapist to the child's home during which careful assessments are made of the child and an individual programme of activities is drawn up in association with parents to further the child's communication, play and social interactions. A pre-post evaluation with 36 families identified significant gains in these areas with some impact on the mother's well-being (McConkey et al, 2008).

In order to facilitate the children's placement in early years facilities, the Keyhole® project also piloted a training course and materials for use with staff in playgroups and nursery schools (Crawford et al, 2004). Prior research with 56 staff working in 38 preschools of various types in the Greater Belfast area (McConkey and Burghri, 2003), found that a sizeable number had the experience of taking with children with autistic spectrum disorders and staff did receive some advice and support from a range of professionals. Nearly all were committed to enrolling such children in the future but they felt that a lack of staffing could preclude this. A majority of staff felt they have had inadequate or no training to equip them to meet the children's particular needs and they reported a lack of

knowledge and skills to help these children.

A 10 - hour training course on autism was then devised and evaluated with a self-selected group of 62 preschool personnel from a range of facilities. It aimed to enhance participants' knowledge about autism and of the intervention strategies that are effective in assisting young children with this condition to communicate and interact with others as well as structuring their learning through play and more formal tasks. The course was well received by the participants who three months later had implemented much of the advice given on the course. Course participants appeared more willing to enrol children with autistic spectrum disorders in their groups although a minority did express some reservations (Crawford et al, 2004).

Courses available in other countries

As part of the evaluation in January 2008, information was sought through Internet searches and queries about similar courses that may be available in Republic of Ireland, Scotland, Wales and England. However no equivalent course designed specifically for Playgroup staff was found. There were awareness-raising courses available on ASD that were aimed at a range of education, health or social service personnel. There were courses for playgroup staff that addressed special educational (or additional needs) in general and which led to an accredited award such as NVQ. Also early intervention courses specific to ASD (e.g. EarlyBird developed by National Autistic Society) were available but these were aimed more at parents rather than Playgroup personnel. Likewise staff from Autism Cmyru have published a set of training materials aimed at primary and secondary school staff on the topic of ASD[1] (Bowen and Primley, 2007).Hence a course on ASD aimed at playgroup personnel was an innovative and necessary development.

[1] Bowen, M. and Primley, L. (2007) *The Autism Inclusion Toolkit: Training materials and facilitator's notes*.Lodon: Sage Publications.

The Keyhole® Early Intervention with Playgroups

With this evidence base, a consortium of agencies -Early Years, Autism NI and Barnardos – who had complementary expertise in the area, made an application to the Big Lottery to fund the regional dissemination and further development of the Keyhole® Early Intervention approach to playgroups affiliated with Early Years. This was successful and Early Years became the managing agent for the Project. Fiona Scullion was appointed as Project Co-ordinator.

Profile of the Partners

Early Years: Early Years is the largest organisation in Northern Ireland for young children. It is a non-profit making organisation which has been working since 1965 to promote high quality childcare for children aged 0 - 14 and their families.

On 1st November 2007 the name changed to Early Years - the organisation for young children. In 1965 when it started, NIPPA stood for Northern Ireland Pre-School Playgroup Association, but as the work developed, this title did not fully reflect all that it did hence the change to Early Years - the organisation for young children.

Currently Early Years provides information and training for parents, childcare providers, employers and local authorities

Autism NI: Formed in 1990, Autism NI is primarily for parents of people with Autistic Spectrum Disorders. It has 23 Branches and support groups throughout the North of Ireland. Autism NI has developed its role from the provision of advice, information and support to that of a significant provider of specialist training and an effective lobbyist for quality service provision.

Barnardo's provides a specialist autism service – Forward Steps – for families with preschool children in the Belfast area. This includes a specialist preschool and parent training. Staff from Barnardo's had been involved in the design and delivery of the original Keyhole® training.

Aims of the Project

The Early Autism training aimed to provide early years workers with the skills and knowledge to be able to provide an appropriate learning environment for children with an Autism Spectrum Disorder. The training course aimed to enhance knowledge about Autism and the intervention strategies which are effective in assisting young children achieve their full potential. As a result of this project, families with a child with Autism Spectrum Disorder will have improved access to an early years setting where staff have received appropriate training. Children with Autism Spectrum Disorder will be provided with an appropriate learning environment within the early years setting.

The main outcomes that were anticipated were:

Outcomes for children with Autism

- An increase in the number of settings with trained staff who can provide an appropriate learning environment which will meet their individual needs.

- Inclusion at a mainstream early years setting

Outcomes for Staff

- Increased skills and knowledge in Autistic Spectrum Disorder

- Increased confidence and willingness to accept a child with ASD into the Early Years setting

- On-going support meetings

Outcomes for parents

- Increased number of Early Years settings willing to accept a child with ASD.

- Increased number of settings with trained staff who can now provide an appropriate learning environment.

Outcomes for other children in the setting

- Increased awareness of the different needs of others and anincreased understanding of autism

Description of the Course

Aims

The course is directed at personnel of voluntary sector, preschool Playgroups. It aims to enhance knowledge about Autism and the intervention strategies which are effective in assisting young children achieve their full potential

Course Objectives

By the end of the course in the context of equal opportunities, participants will have:

- Explored how Autism manifests in the pre-school child and what difficulties the child may have in the early years situation;

- Be familiar with the characteristics of Autism;

- Be aware of some of the strategies for effective interaction with children with Autistic Spectrum Disorder.

- Have developed their skills in interacting with pre-school children who have Autistic Spectrum Disorder and their parents.

Course Outline

- Session 1- Introduction to Autism
- Session 2 –Structured Teaching
- Session 3 -Structured Teaching
- Session 4 -Communication
- Session 5 -Bringing it all Together

NB: In the two-day courses: sessions 1 to 3 were covered on day 1 and the remaining two sessions on Day 2.

Teaching Methods

Delivery methods consisted of tutoring, use of power-point presentation, group discussions and practical activity. Participants will receive an accompanying handout.

Follow-up contact

Course participants were offered follow-up contact with tutors either by telephone or through a visit to the playgroup to give tailored advice to the leaders and assistants. However only one group availed of this.

Tutor preparation

Early Years staff who acted as co-tutors were given a one-day training and preparation course in relation to ASD. This also equipped them to provide additional support to playgroups in the course of their usual work. In addition they 'shadowed' more experienced tutors during the presentation of a course prior to tutoring an course.

The tutor group also met regularly and discussed how the training was going. They tried to work out some of the practical difficulties that arose and further development of the training.

Publicity

The courses were publicised through the Early Years database of members. No charges were made for attendance although groups had to cover participants' travelling expenses.

Description of Participants

Using information contained in the Early Years training course database, the numbers of persons enrolled on the courses could be summarised for the three years. As Table 1 shows, 503 persons enrolled, with the bulk of these for courses held in 2006.

Table 1: The dates of courses and numbers enrolled [2]

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[2] Accurate attendance data was not available and the number of people who completed all sessions of the course may be less than these figures.

Dates	Number enrolled	Year
17, 24 Jan & 7, 15, 22 Feb 2005	29	2005
21, 28 Feb and 7, 14,21 Mar 2005	11	2005
11, 25 April 2005	24	2005
19, 26 Sept & 3, 10, 17 Oct 2005	9	2005
21, 28 Sept & 5, 12, 19 Oct 2005	13	2005
22, 29 Sept & 6, 13, 20 Oct 2005	11	2005
26 Sept & 3, 10, 17, 24 Oct 2005	4	2005
23 Nov & 12 Dec 2005	27	2005
Total attending 2005	**128**	2005
16 Jan & 3 Feb 2006	28	2006
01 Feb & 01 March 2006	21	2006
14 Feb & 21 Feb 2006	17	2006
13 March, 10 April 2006	28	2006
2, 9, 16, 23, 30 May 2006	27	2006
18 Sept and 16 Oct 2006	34	2006
21 Sept and 9 Oct 2006	23	2006
21 Sept and 12 Oct 2006	23	2006
10 Oct and 24 Oct 2006	20	2006
15 Nov and 29 Nov 2006	18	2006
04 Dec 2006 and 02 Jan 2007	20	2006
Total attending 2006	**259**	2006
10 Jan and 31 Jan 2007	27	2007
22 Jan and 05 Feb 2007	25	2007
22 Jan and 26 Feb 2007	52	2007
19 and 26 April 2007	12	2007
Total attending 2007	**116**	2007

The course had been originally presented originally over five sessions and this was maintained for the majority of course presentations in 2005. However a two-day format was introduced for reasons noted above and this became the main form of presentation from November 2005. In all, 104 persons enrolled on five-session courses and 399 on two-day courses.

In addition, three one-day information sessions were held about the course and these were attended by a further 145 persons.
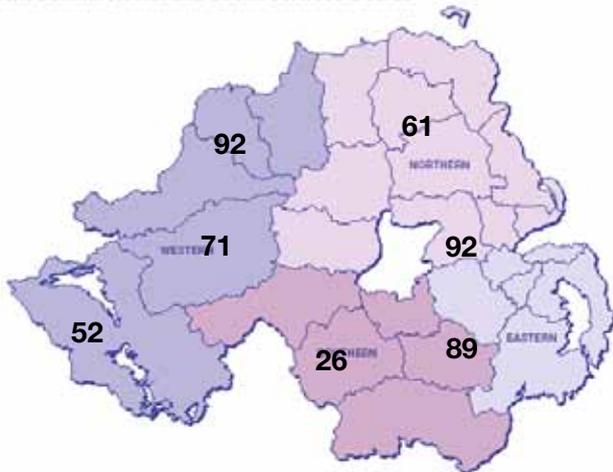
Geographical spread

Figure 1: The number of persons enrolling on training courses in Belfast and the six counties.

As the Map shows, the course enrolments came from the six counties of Northern Ireland plus Belfast although the numbers from County Armagh area were perhaps lower than elsewhere and those in County Londonderry were higher. This may reflect a differential demand for training, as early years training in ASD had been available in the Southern area prior to the project commencing.

As Figure 2 shows around one quarter of people enrolling reported having a child with ASD in their group at present. However this is likely to be an under-estimate as they may have taken children previously. Also tutors reported participants commenting that the course had increased their awareness of children in their groups who may have features of ASD even though it had not been formally diagnosed.
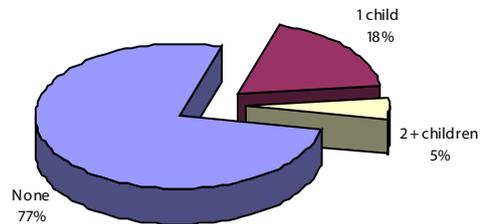
Figure 2: The proportion of people enrolled on courses who reported having a child with ASD in their group.

Characteristics of participants

The central database held sparse details of the course participants but an indication of their characteristics can be obtained from those who returned the self-completion questionnaire (N=102). These were across the three years that the courses ran (27% in 2005;27% in 2006;46% in 2007).

- All were female.

- 26% were aged under 30 yrs; 54% aged 30 – 49 years and 20% aged 50 and over.

- 52% had attained A levels or higher education; 47% had either O Levels/ GCSEs or left school at 15 years.

- 15% had a relative with ASD (3% brother/sister or son/daughter).

- 66% had at least one child with ASD attending the Playgroup when they took the course (range 1 to 10 plus). (NB: Respondents to the questionnaire may have been more likely to have a child with ASD in their group compared to the wider population of enrolled personnel on the course as shown in Figure 2.)

- 78% had attended another Early Years Training Course (most commonly Behaviour Management and Curriculum Planning).

- 36% had attended another ASD course (most often Sensory Integration and TEACCH/PECS). These tended to be personnel who had one or more children with ASD enrolled in their groups.

  NB: The higher proportion attending Early Years courses may be because some of these courses are available free-of-charge which is not usually the case for ASD courses.

Evaluation of the Courses

Our response to the evaluation tender was submitted on 15th October, 2008 and the Project Initiation meeting took place on 16 November. The first meeting of the Steering group was held on 12 December when it was decided that the information gathering would take place after Christmas in January 2008. These timings meant that considerable time had elapsed since the courses were presented.

Steering Group

A small Steering Group was formed to guide the evaluation. This consisted of Fiona Scullion(Early Years); Sue Macleod and Jackie Addis (Autism NI). They advised on the content of questionnaires and interview schedule; identified participants and arranged for access to information that had been gathered by Early Years.

Information gathered

Tutor questionnaires: All the personnel who acted as tutors were invited to complete a self-completion questionnaire relating to their experiences of delivering the course and giving further details of themselves. Two out of 23 tutors replied.

Tutor Focus Group: Five tutors (3 Early Years and 2 ASD specialists) took part in a 60 minute focus group at which issues relating the course and its future delivery were discussed.

Participant questionnaire: A self-completion questionnaire with a Freepost envelope for return was sent to all persons who had enrolled on a course. This aimed to ascertain their reactions to the course along with further personal details not available on course records (see Appendix). In all, 99 responses were received.

Telephone Interviews with participants: These were conducted with 13 course participants who had volunteered to participate in their self-completion questionnaire. The interviews explored in further detail some of the suggestions for improvements and future course delivery. *NB: All the information gathered as part of this review was done in accord with the Code of Conduct of the University of Ulster. Formal ethical approval was not required as it constituted a service audit.*

In the proposal to the Big Lottery, it was planned to use questionnaires with parents and other professionals to obtain their perceptions of the impact the training had on the Playgroup as well as undertaking observations of selected children with ASD in Playgroups whose personnel had taken the course. In the event this information was obtained informally by Early Years Specialists on their visits to groups and no written records were maintained.

Reactions of Tutors

During the three years, 24 persons were recorded as having acted as course tutors. Fifteen were recruited from Early Years Personnel who brought experience of advising playgroups and the provision of training course for leaders and assistants. Nine tutors came with particular expertise in ASD either from an early years, educational or speech and language therapy background. Both sets of tutors were paid a fee for their participation.

The self-completion questionnaire and the focus group meeting were used to obtain their views on the course and possible future developments.

Most valuable aspects of having a course on ASD

The tutors identified the following as key features of the course:

- It was a specific course on autism for pre-school children.

- The joint tutoring – speech and language therapist specialising in ASD working alongside an early year specialist who was able to explain jargon and apply it back to the playgroup setting.

- Very practical based course; participants could go away and practice the skills and very quickly put into practice. They could use them with all children and not just children with ASD.

- It increased participants' confidence in coping with children who had ASD. They were more empowered to help children.

- The variety of teaching formats used - visual, verbal, practical and different exercises so there was a good spread and format to each session.

- There is a lesson plan for each session and the tutors follow that lesson plan so everyone is working from the same sheet, using the same methods and content. The materials and the videos are all in a pack and there is a resource kit that goes along with lots of example materials.

Adaptations to the course

As the project progressed, the following adaptations made were:

- The switch to the 2 day model was good because playgroups could maybe close for two days and staff use it as a CPD. However delivery over five sessions gave participants more time to think about the children that they were working with and may be raise questions. Both options could be retained.

- Participants were given an area of play and between the sessions they had to go away and make a structured play task for that area using junk materials. In this way, all aspects of play were covered in the group and participants had lots of examples of activities they could easily make.

- The use of power point meant that we have a good use of photographs of activities taking place in groups. There was a lot more visual presentation.

- Opportunity to use different modes of learning over the course rather than relying on talks.

Distinctiveness of the Course

Tutors felt that the following features distinguished this course from other early years courses.

- It was a new topic that was not covered in any other courses or in NVQs.

- New model of course delivery.

- It was geared at participants' level and their expectations.

- It is very applied in the final session, very focused on a playgroup.

- It gave them confidence in approaching parents and identifying that something might be wrong.

- Participants were given tools to use in their own setting.

- Training was provided for Early Years Tutors and opportunities to increase their understanding of ASD.

The main differences from other autism courses, were:

- The focus on coping with the child in a group, rather than one-to-one setting.

- The application of ASD strategies to the playgroup context.

- The concentration on structured play.

- The narrow age range – 2-4 years.

Among the main benefits to participants of the course they noted were:

- The provision of information on ASD. Generally speaking playgroup personnel have no one to ask on advice on autism.

- A lot of playgroups are working with children who are not identified, or at the very early stages of diagnosis. If you asked the question on the first night, who has children with autism in the workplace you wouldn't get a

response. If you ask it at the end of the last night they were like, oh yeah that why X does that.

- Making appropriate referrals.

- Practical approaches that assist the child with ASD or suspected ASD. They also benefit other children as well.

- Making resources from junk art.

However the benefits extended beyond the playgroup as the tutors noted:

I got feedback from some parents that …they felt more confident in that some of the early years professionals in the playgroups, where they wanted their kids to go with all the other kids, had an awareness and an understanding of autism. That was felt across Northern Ireland. That was very beneficial. It relaxed them.

Staff in early years were more aware of signs and symptoms, with the lack of the 18 month assessment, playgroup staff are now picking up more signs and symptoms. They can now refer on to health visitor or speech therapist.

It was helpful in relation to the waiting list for diagnosis. They had children on the waiting list, were they were then concerned, they could use these strategies and they were very helpful for children again who were on waiting lists. They felt more empowered to do things.

Future thoughts.

Demand: The tutors felt there was continuing demand for the Keyhole® Training:

- Private day care, nurseries and child minders are untouched.

- Almost every time the course was offered it was over subscribed. Other playgroups have not been represented and those that we have taken the course may have moved on and new personnel have joined.

- More children are being identified with ASD.

- In the voluntary sector there is so little support and help, any information or knowledge gained is vital.

However it was felt that similar courses targeted at parents would be preferable to including parents in Early Years Courses.

Accreditation: They agreed that accreditation of learning should be a feature of the course.

- Younger personnel in playgroups are looking for accredited courses.

- The course is already was accredited by AQA at Level 2 through AutismNI and that should probably fit in with the NVQ framework.

- Participant learning would have to be assessed by the course tutors – hence participants would have to sign up for accreditation on enrolment.

- Costs will increase – fee for accreditation as well as increased tutor costs.

- RQIA may expect personnel to have evidence of training.

Some tutors felt that the option should remain of taking the course without being assessed.

Some staff might say that they can't really do that (assessments) so I am not going to do the course. You have to think, are they better doing the non accredited option and gaining that knowledge than not having any knowledge at all.

If the course becomes too expensive, groups will not be able to send people.

Funding: Various options were noted:

- An application had been submitted to the Big Lottery to extend the project to wider groups such as child-minders.

- Self-funding – a cluster of playgroups (and allied personnel) could commission the training. Estimated costs around £5,000 per 25 participants (recommended maximum number).

- Funded through Childcare Partnerships; Health and Social Care Trusts and Education and Library Boards. People

in statutory services could have tutoring written into their job description. This would reduce the cost. Use of community venues also reduce costs.

- Cross-Border training worth exploring.

Tutors: The use of the Training Resource by other agencies and personnel was discussed. The options seem to be:

- Core set of tutors continue to provide training in Northern Ireland.

- The original agencies franchise the training to other agencies/personnel.

- The training package is sold to the other agencies and personnel.

Further courses: The tutors noted the following as courses that could be taken after the Keyhole® Training although these could be for selected personnel from each group, e.g. the equivalent of a 'SENCO' in each group.

- Connecting with Autism – Keyhole® Rainbow Resource Kit on ASD

- Short courses through AutismNI on PECS, TEACCH and ABA,

- Sensory awareness day would be good follow up for staff

- TEACCH would be more valuable to have more training on actual TEACCH and how to deliver it, elaborate more.

One of the difficulties is that tutors are doing this as part of their workload. It was felt that having a designated team contracted to carry out this specialist work, would make it more cost effective.

Participants' reactions

Information was obtained from course attenders in two ways: by self-completion questionnaires and telephone interviews conducted with volunteers who identified themselves in the questionnaire. A full transcript of participants responses has been made available to the Steering Group and copies are available on request.

Self-completion questionnaires

In all, 102 course attenders (estimated 22%) returned a self-completion questionnaire in the time available. As Table 2 shows, nearly half were in leadership or management positions although a range of other professionals also responded.

Most helpful aspect of the course

Participants were asked what they felt was the most helpful about the course. The majority of participants found that gaining a better insight into autism and having a broader knowledge was the most important outcome (N=32). Other felt that the practical sessions were most helpful (N=28).Other important aspects were, talking to parents and professionals (N=18), identifying sighs and symptoms (N=10), ideas to put into place in own setting (N=6), picture schedules and routines (N=6), an insight as to how it would feel to be autistic (N=5) and finally ideas for play (N=3).

Table 2: Job Titles of respondents (N=95)

Job title	Number
Playgroup Leader, manager, supervisor or assistants/ deputies	43
Playgroup Assistant	29
Family support worker	9
Health Visitor	2
Childcare coordinator	2
Early Years Leader	2
Play development worker	2
Others – Owner,Project worker, After-schools Co-ordinator, Speech and Language Therapist, I-CAN	5

Examples comments follow:

3. The practical sessions especially on how it felt like to be autistic. Also routines and ideas for constructive play

20. The tutor was able to relate her information in a very understandable form. And was able to listen to what problems faced groups and apply her knowledge to trying alternative methods

24. The activities / tasks set for us by the tutors to make us think more about adapting our own setting to encourage children with autism to learn successfully

49. A knowledge of autism and how to deal with suspected cases of this condition. Video clips of children and adults were helpful as it made me more aware that this is a life long experience

52. Learning all different types of autism. Learning different activities to work with autistic children. It was very good course and the people doing it were good to

Unhelpful aspects

Most respondents felt that there was nothing they did not like or found unhelpful about the course. Four persons felt that too much information was given at one time and therefore was harder to digest. Two persons felt that they would require a different venue. Other comments made included; the requirement of a feedback session, lectures were too long and lectures were rushed (N=1).

20. Could have had a feedback day several weeks later when information was digested and questions arose

2. No just the distance to get to the course

12. Professionals attending who new the basics and thought they were wasting their time so switched off and became a distraction for the rest of us

47. I felt that it was a bit rushed and a lot was crammed into the 2 ½ hours

New knowledge or information gained

Table 3 summarises respondents' comments about the new knowledge or information they had gained from attending the course.

Table 3: New knowledge or Information Gained

New Knowledge/ Information gained from course	Number
A better understanding and knowledge of what it is like to have autism	34
New approaches to apply in own setting	15
The need for visuals and pictures	13
How big the spectrum is; variation across children	11
Signs and symptoms of autism	8
Importance of routine	7
Sensory information	7
Autistic children are all different	3
Behaviour Strategies	3
The need for one to one support	1
Who to contact for support	**1**

Example comments:

26. The signs to look out for and that there needs to be more than one sign or symptom before considering any further action. What to do and how to react to children with autism and what is helpful to their families and what is not

12. Getting to listen to mothers who have a child with autism made me appreciate just how much they struggle on a daily basis

2. I really enjoyed the sensory bit of the course where we saw through a child with autism's eyes

14. How our setting which is High Scope fits in so well with a system which greatly benefits children with autism

42. I have used websites that we were told about and gained some new information and advice this way. I learnt to cut down on the language I was conveying to the child

101. Good handouts to refer to and useful information about dealing with parents of autistic children, also about the referral system.

Change in attitudes or perceptions.

When asked if their attitudes or perceptions about children with ASD had changed, the majority of people felt that they were now more understanding and supportive of a child with autism and their family (N=28).

Others felt that routines were extremely important (N=8) and through the sensory aspect of the course they now had a better understanding of what it feels like to be autistic (N=6). Other changes in attitude were: participants were now more confident in dealing with children with autism (N=12), more patience/positive attitude (N=7); knowledge that autism is a complex condition (N=5), the knowledge that there is help out there and to seek further knowledge (N=2); the importance of observation and recording (1) and being inspired to take on new challenge (1)

Example comments:

3. Much more understanding both with child and parents / carers

8. Completely changed as I know now how they must feel having it

37. I am more aware now that children with autism are very frustrated with the world around them therefore I am more understanding of them

42. I have become much more tolerant and I feel that I have a greater understanding of how the child may feel. I also try and think visually now at all times

48. My attitudes towards children with individual needs became more open due to working with early years for ten years and attending courses such as these

52. You can't make them change you have to adapt to their ways

Adaptations to group activities

Table 4 summarises the responses given when asked about the adaptations or group activities after the course.

Table 4: Adaptation and Changes in approach after the course

Changes in approach	Number
More use of visual strategies and visual learning	26
The use of designated areas/ natural work stations	7
Strategies for changing activities	6
More one to one time	5
TEACCH	2
More time given to child to process information	2
Use of routines	2
Shorter activities and adapting to child	2
Time out	1
Use of a timer	1
More patience	1
Shorter sentences	1
Using the child's name at the start of the sentence	1

Example comments:

3. Made wall day diaries with pictures, always discuss what we are going to do, provide corners / areas to be alone

17. More visual aids, direct instruction, giving them time to absorb information and give information

23. We have now a volunteer with autism who has just left school and is in training for childcare certificate

32. Since taking the course we have not had any direct need to implement any changes

42. More photographs are being used to help the child understand routines

48. We also introduced a 'feelings tent' where children can go to relax

56. We try to identify quickly unusual behaviours and during this time make written observations that can be presented to the parent.

Further training in ASD

Other topics that participants felt they would like further training on were; more information and training on autism (N=27), other parts of the spectrum e.g. Aspergers (N=5), behaviour management strategies (N=4), coping with change (N=2), toileting, feeding, preschool training, sibling course, ABA, TEACCH and Makaton; working with parents (N=1).

Example comments:

1. Toileting and feeding and how to deal with major change

12. Siblings course

15. ABA training, information on Aspergers

19. I feel that there should be a refresher course for staff and also progression courses to enable staff to continue learning in this area

31. I am always willing to do training on autism or other related issues. However it might be a good idea if a professional visited all groups for a morning to observe child / children at the start of the year if autism was suspected

34. I would like to do this course again as it has been some time ago, to refresh my memory and we have a severe case coming in September

56. Behaviour management specifically in relation to autism

Enrolment of children with ASD in Playgroups

Children presently in the group with confirmed or suspected autism.

In all, 55% of participants have a child with ASD in their group at present (compared to 68% at the time of the course). Around one quarter of respondents (26%) had no experience of a child with an ASD diagnosis in their group but half (51%) have continued to have a child with ASD. Only 6% went on to have a child with ASD attend the group after taking the course.

Problems experienced in the playgroup

For those participants who had experience a child with ASD in their workplace, they were asked to note the types of behaviour they found most difficult to deal with. The top two difficulties they noted were: Behaviour / temper tantrums (N=29) and social deficits and lack of interaction with adults and other children (N=19). Other problem behaviours included: communication difficulties (N=15), lack of imagination (N=4), other people's and parents reaction to the children, lack of staff and sensory sensitivity. Judging the child's level, settling the child in the group (N=1).

Example comments:

39. Dealing with their behaviour can be a little difficult especially when there is no one to one and also how to cope when they do not like loud noise from outside

37. When the child took a tantrum or started crying it was very hard to get him to stop

27. Their reluctance to participant in large group activities

Future enrolment of children with ASD in the playgroup

Three choices were provided regarding future enrolments of children with ASD and respondents were asked to choose one. The following responses were given:

> *Definitely willing* **73%**
> Willing to consider if asked **26%**
> Prefer not **1%**

The reasons given for being definitely willing were: all children have the right to inclusive schooling (N=24), participants were confident in supporting the child (N=18), the playgroup setting is open to all children (N=10) and the children with autism need to mix socially (N=3).

However although willing to accommodate children with autism in their setting, 6 participants felt that they would require more training and 5 felt that it would be subject to funding.

Only one person felt that they would not be willing to have a child with autism in their workplace due to the fact this child would require a on-to-one assistance and they would not have the funding to support this.

Example comments:

3. Want to give them opportunities but think a specialist environment would be better for some

22. We are a non-discriminatory and believe each child has equal value and can make a personal contribution to the group

10. Each child deserves the right to attend an after-schools no matter what their disability might be

Reasons for refusal

Participants were also asked to give reasons why they may have to refuse placement or reduce the time spent in the playgroup by a child with autism. Table 5 summarises the replies.

Table 5: Possible reasons for refusing placement to child with ASD

Reasons for refusal	Number
Lack of staff	31
Behaviour a danger to other children / staff	22
One to one help not provided	11
No places available / oversubscribed	7
Lack of funding	6
Depends on severity of autism	2
Lack of adequate facilities	1

Advice or support for managing children with autism in the group

Finally, respondents were asked what advice or support they would find helpful in the future for managing children with autism in their group. In all, 27 persons felt that they would like continued professional involvement and 22 persons felt that they would like more training. Other comments included: more funding available (N=9), more one-to-one assistants (N=5), a phone number for advice (N=3), behaviour management strategies (N=2), TEACCH and ABA training (N=1) and the availability of a support group.

Example comments:

> *4. TEACCH programme*

> *14. Qualified person to work on a one to one basis*

> *15. More courses run locally e.g. Fermanagh direction*

> *19. More refresher courses or follow up courses to ensure staff are fully up to date, more places available to groups*

> *21. Would love to visit a setting that specifically provides for children with autism to see how it runs*

> *31. Monthly visits from professionals, extra staff member and more training*

> *34. Need more information about where I would get funding for special needs. Need refresher course on how to deal with autism*

> *39. Talking to professionals courses on all aspects of autism in more depth, talking*

> *to parents and all the difficulties and coping strategies they have in helping each individual child*

> *48. Advice on the individual child and what strategies and props could be of assistance to him / her*

Telephone interviews

These were undertaken to explore certain themes in more detail. Thirteen of the 28 persons (46%) who volunteered were contactable in the time available. They were phoned by a University researcher at a convenient time.

During the course, tutors offered participants the option of them visiting the group to give further and more specific advice. However only 4 of the 13 respondents recalled having this offer made to them and none accepted mostly because they did not have a child with ASD at the time or else they felt they were receiving sufficient support.

In all 12 respondents expressed an interest in undertaking further training courses in ASD. Among the reasons given were:

> *3. I worked on a project involving children with autism and I feel that you continually need to update your training. We also have 1 child at the minute being assessed*

> *5. I have been a playgroup leader for 4 years and I find it very helpful if we were ever to have a child with ASD. With this training it might also encourage the parents of children with ASD to use our playgroup if they knew we were trained*

> *6. I currently work in a playgroup where the leader is retiring and there is new staff*

coming in and they would require this type of training. We currently don't have any children with ASD but these skills are useful to have

13. We have a child with severe Autism coming to our playgroup in September

Seven persons identified NIPPA (Early Years) as a source of information about future courses and one mentioned Family Support Worker but four stated they did not know where to get information. No one mentioned AutismNI.

Nine (82%) felt they could pay a fee (mentioning small or limited fee or a maximum of £50 whereas three persons stated they could not pay any fee.

The topics that they would welcome training on, other than ASD, were managing challenging behaviour (N=4); special needs in general (N=4); First Aid (N=1); Child protection (N=1). However 3 persons felt they had sufficient training.

Support for the Group

Two respondents reported that they receive no support for health and social services and a further three mentioned very limited support either from health visitors or social services. In all, six persons gave examples of support from speech and language therapists, Wraparound Team, early years, Surestart, family support worker and social services.

In terms of the support they would like to have, two persons felt they currently had adequate support but nine mentioned the following:

1. More SLT time,

3. More information on equipment to use, the different settings and if there are any parent groups out there.

4. Support on introducing daily schedules, planning and behaviour management

5. One to one if we had a child with autism and more speech and language therapy

6. To have literature or booklets on hand for the parents of children with ASD and

someone available that they could contact with questions

7. For the likes of the Speech and Language Therapist, social worker and us all to work together as a team

9. Someone on the field of autism to have as a contact and who may come out and see the children if we were questioning autism

10. As much as possible, any support available

11. It would be useful to have a professional to turn to

13. Practical hands on support, one to one

Limitations of the evaluation

The evaluation was undertaken some time after the final course had been presented which may account for the relatively low response from tutors and participants to our request for information.

It would have been preferable for information to be gathered on an ongoing basis throughout the project. This would have also provided feedback that could have been used by course organisers.

Resources did not permit for information to be obtained from parents about the impact the training had on the group and their child with ASD in particular. Likewise, the views of Early Years Specialists, who had not been involved in the training, could have been sought around the impact it had on Playgroup practice. Both these approaches would have helped to validate the reports from tutors and course participants.

Conclusions and Recommendations

From the information gathered, a number of conclusions can be drawn with respect to the training of playgroup personnel in ASD.

- There is a demand for training as evidenced by the number of enrolments and the over-subscription of places. This may have been inflated by the courses being free of charge but the topic is of concern to playgroup personnel given the increasing numbers of children identified as having ASD.

- The course appears to be unique in these islands in that it has been tailored to meet the training needs of playgroup personnel. The dual tutoring of the course by ASD specialists and Early Years Tutors contributed greatly to this, as did the refinement of the course through its presentation during the past three years. The recent accreditation with AQA further enhances its credibility.

- The course is accessible to all personnel involved with playgroups and provides them with a common language and approach to children who have ASD. This has been facilitated by changing to a two-day format so that all personnel in a cluster of playgroups groups can attend,

- The course has been positively evaluated by participants. It has increased their understanding of this condition; nurtured their confidence in managing children with ASD within their groups and encouraged them to adjust their practice. These are valuable outcomes.

- A set of training resources has been developed to assist tutors with course presentation. This includes session outlines, suggested teaching methods and visual aids. This should facilitate its use by tutors who are new to the topic or to presenting training courses.

- There is evidence of 'spill-over' effects beyond the original intentions of the course developers. Other children in the group have benefited from the use of approaches taught on the course; children suspected of having ASD have been referred for assessment and parents feel more confident in sending their child to the playgroup.

- The course facilitates the social inclusion of children with disabilities alongside their siblings and peers, and provides equality of opportunity to the children and families. This is evident in the willingness of groups to enrol children with ASD in future years.

In summary then:

- A valuable and unique training resource has been developed which should continue to be available to Early Years Personnel within Northern Ireland.

- Consideration should be given to extending its use to other potential groups involved with preschool children and making it available to personnel in other countries.

- However some thought should be given to creating linkages between playgroups and the overall service context and supports that are available to families.

- This also raises the need for further training in ASD for certain playgroup personnel.

Each of these issues will be considered in more detail under recommendations (see below).

Recommendations

These have been grouped under four main themes but they are inter-linked hence in a final section we propose some strategic considerations that the Management Team will need to resolve.

1. The course should continue to be provided to early childhood personnel in Northern Ireland.

The rationale for this is easily summarised:

- There are many other playgroups who have not been represented on the training to date;

- The turn-over of personnel in groups will mean new people wanting and needing training;

- Other personnel such as crèche workers and child-minders would benefit from the training course.

Options for doing this:

The interim arrangements of having the course delivered by Autism NI within their training programme is one approach that can be continued. However if wider numbers of personnel are to be reached, then other options should be considered.

The present cadre of tutors (with perhaps some augmentation) are likely to be available to meet these needs. However funding is required to cover their costs and those associated with the organisation and delivery of courses. In addition, the costs of accrediting participant's learning will also need to be considered. These could be met from:

- Obtaining grant-funding. We commend the application that Early Years has made to the Big Lottery to extend the training course to child minders and other personnel in early years who have limited access to training. Their contribution will become increasing important for families in which both parents have to work.

- By incorporating the tutoring role as a core component of the job description of certain personnel in statutory or voluntary agencies. Although this would reduce the tutoring costs, some fees may still to be charged to cover other expenses, notably accreditation.

- A small core team of tutors is appointed with the remit of delivering ASD training across Northern Ireland. This could be funded as a regional initiative across Education, Health and Social Services.

One means of deciding among these options is to make an estimate of the number of participants to be trained within one year. For example, two presentations of the course in each of five HSC Trust/ELB areas in Northern Ireland (i.e. ten presentations) would accommodate 250 persons and require a minimum of 40 'tutor days' but likely an additional one per course to cover assessment of participant learning making 60 tutor days. A team of ten tutors (two in each of five areas) would each work six days per annum or a team of four tutors would be needed for 15 days per annum. (NB Additional administrative support would also be required for course organisation.).

Another approach to funding this type of course, is to place it within a continuum of training for playgroup personnel; a point we will take up later under point 4.

2.The course should be marketed in Britain and Ireland.

The rationale for this is as follows:

- The course is unique and evidently meets a need;

- It justifies the funding received from the Big Lottery and widens the beneficiaries;

- Early Years personnel in other countries are likely to want the training.

- The three partner agencies have links which could be used to promote the training.

Options for doing this:

- The existing partners set up a 'training consortium' to organise and deliver the training in GB and the Republic of Ireland. This would entail existing tutors in travelling and overnights. However the fees to be charged to cover costs may be prohibitive.

- The partners 'franchise' the course to other training agencies – providing training to their personnel as well as the course materials. This could retain some element of quality control in how the training is delivered.

- The partners sell the training materials/package to agencies/trainers. This may make the training widely available but the danger is that other agencies could take over the training from the partners in Northern Ireland as well as elsewhere.

3. The contribution of playgroups to children with ASD and their families should be linked more closely with other services and supports.

The training provided to playgroup personnel in ASD opens up opportunities for closer links with other services and supports that are available to preschool children and their families, such as therapy, home-based early intervention, specialist placements and school placement. The rationale for doing this is:

- Children and families benefit from consistent and co-ordinated supports.

- Children with ASD benefit from attendance at playgroups in ways that no other service can.

- Playgroup placements are valued by families;

- Playgroup personnel can cope and are willing to enrol the children but they would benefit from support from associated agencies as respondents noted.

Options for creating linkages:

- Tutors for the Keyhole® courses could be recruited from personnel in local specialist ASD services as a means of building relationships and providing follow-up support to groups.

- Local 'early years' networks for ASD is nurtured by the partner agencies as a means of sharing information and mutual support.

- Playgroups or a cluster of playgroups nominate one person as the equivalent of SENCo so that a point of contact is available to other services. These individuals can be encouraged to attend further training offered locally or nationally.

- Playgroups invite selected personnel in local services to form an 'advisory group' to whom they could look for advice and support.

A related consideration is to examine how other training courses provided by Early Years, such as High Scope, might be adapted to embrace the needs of children with ASD. This would help to consolidate the contribution and expertise of Playgroups to wider service provision.

4. Selected Playgroup personnel should have the opportunity to undertake more advanced training in ASD and all personnel should have an awareness of ASD.

The rationale for this is:

- Children with more complex needs will require more specialised assistance than can be offered in an introductory course.

- As playgroups succeed in including children with ASD the expectation will grow among their members and families to take children who at present are directed towards specialist facilities such as special schools and units.

- Children who are placed in specialist facilities can still benefit from associated placement in playgroups.

Options for creating further training:

- Selected personnel should be identified to undertake further training in ASD. Options could be explored for meeting the costs of their fees.

- Playgroup personnel could shadow personnel in other services or undertake 'secondments' for short periods of time.

- An Early Years Specialist post in ASD is created within the organisation with a brief to network with specialist provision either locally or nationally.

Awareness courses: A related issue to be considered is the need for a shorter course (6 hours) that increases awareness of playgroup personnel of ASD and signs to look out for in children. This would be aimed at all playgroup personnel and could be thought of as Level 1 training. The Keyhole® Training could then be available to personnel who have children with ASD in their group and may consist of one further training day (6 hours) or be expanded to cover in more detail some aspect of the existing course. This could be a Level 2 course.

These two 'foundation' courses could be followed by more specialised training as noted above. A recent report to the DHSSPS on a Training Strategy for ASD in Northern Ireland (McConkey and Cassidy, 2008) has recommended the development of accredited Certificates on aspects of ASD, e.g. Early Intervention studies. This Certificate would be awarded on completion of a specified set of training courses. A consortium of agencies working together could offer these awards.

Strategic considerations

As a means of taking forward the recommendations, the Management Group should formulate a Business case that addresses the following issues:

- Is the training resource to be used solely by the three partner organisations? Under what conditions might it be made available to other agencies/personnel?

- Is the present cadre of tutors the only people who can present the courses? Under what conditions might other tutors be recruited and trained?

- Is the sole target group Playgroup personnel? What other groups could benefit from the training and do they come under the remit of the partner agencies?

- How is the training integrated with the other support services that are available to preschool children with ASD and their families?

- How does the course fit with the other training/approaches offered to Playgroup personnel and what further training do playgroup personnel require to assist children with more complex needs.

Concluding comment

The three partner agencies are to be congratulated in devising and delivering an innovative initiative for personnel in early years education. An excellent foundation has been laid on which further developments can be built so as to maximise the investment of effort and money that has been made.

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Appendix: Self-completion Questionnaire

January 2008

Dear Friends,

Keyhole® Early Years Training in Autism Spectrum Disorders

Can I ask for your help? The University has been asked by Early Years to undertake an evaluation of the Keyhole® Training Courses they provided on Autism Spectrum Disorders. These were funded by the Big Lottery. Early Years has to provide a report on how the money was spent.

According to the records, your name was listed as having attended a course in the period 2005-2007. We would like to have your reactions to it. Overleaf are some questions which should take you about 10 minutes to answer. A FREEPOST envelope is provided for you to return the questionnaire to us.

You do not have to give your name and all replies are confidential to us. We will compile a summary report that will be shared with Early Years and its partners.

However we would also like the opportunity to speak to some individuals by telephone. If you are willing for us to do this please let us have your number and a convenient time when we might call you. Once again you comments will be confidential to us.

We very much hope that you will give this project your full co-operation and we thank you in advance for your participation.

With all good wishes,
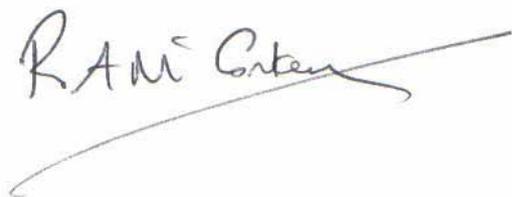
Professor Roy McConkey

NB Responses should be sent by *15th January, 2008 in the envelope provided or* to Professor Roy McConkey Please Freepost NAT 4851, School of Nursing, University of Ulster, Newtownabbey, BT37 0QB

Participant's Questionnaire: Keyhole® Training Course

We would value your opinion on the Training course you attended. All answers are confidential to the researchers and no one will be identified in any reports. You do NOT have to give your name.

Section 1: Reactions to the Course

In what year did you attend the course? *(Tick one)*

☐ 2005   ☐ 2006   ☐ 2007

Was your course run *(tick one)*:

☐ As six weekly sessions   ☐ Over two days   ☐ Other

Of the six sessions of the course on autism, how many did you attend?

Overall what for you was most helpful about the course?

Was there anything you did not like or found unhelpful about the course?

What new **knowledge or information** about autism, if any did you gain from the course?

How have your **attitudes or perceptions** about children with autism changed since taking the course, if at all?

In what ways have you **adapted the activities of the group** or changed your approach to children with autism since taking the course, if at all?

Since taking the course, are you aware of any other topics or issues related to autism on which you would like further training or advice?

What other courses on ASD, if any, have you attended since the Keyhole® Autism Training?

Section 2: Children with Autism

2.1   When you took the course, how many children with either confirmed or suspected autism were attending or had attended your group?

2.2   Since taking the course, how many children are there presently in the group with confirmed or suspected autism?

2.3   If you have experience of a child with ASD in your group, which of the child's problems do you find most difficult to deal with in the playgroup?

2.4   In the future, how willing would you be to have children with autism in your playgroup? *(please tick one)*

☐ Prefer not   ☐ Willing to consider if asked   ☐ Definitely willing

Please give a reason for your answer.

2.5   Under what circumstances would you have to refuse placement or reduce the time spent in the playgroup by a child with autism?

2.6   What advice or support would you find helpful in the future for managing children with autism in your group?

Section 3: Details about you

What was your 'job' title when you attended the course?

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Your gender ☐

Which age group do you fall into? *(Tick one)*

☐ Under 30   ☐ 30-39   ☐ 40-49   ☐ 50-59   ☐ 60+

What is your educational background? *(please tick one)*

☐ Left school at 15 years   ☐ 2. O'levels/ GCSEs   ☐ 3.A levels or Higher Education

Is there anyone with autism in your family?

☐ No-one   ☐ on or daughter   ☐ Brother or sister   ☐ Other relative

Please tick which of the following early years courses, if any, you have attended.

☐ Behaviour Management   ☐ Curriculum Planning   ☐ I want to play
☐ Voice of the Child   ☐ Others

Please tick which of the following Autism courses, if any, you have attended.

☐ TEACCH/PECS   ☐ ABA   ☐ Sensory Awareness
☐ Rainbow Resource Kit ☐ Others

If am willing to talk to you by phone. My number is ☐

Many thanks for your help. Please return the questionnaire in the envelope provided

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