Four-year-old Kane makes sense of his world in a way very few adults can even begin to understand.

At frequent intervals during his four mornings a week at Wharerangi Kindergarten he goes out to the garden and runs his fingers repeatedly around the spikey edges of the daisies.

He also regularly gets pencils then spreads them into a fan and strokes their spikey ridges.

These very specific sensory activities are important to Kane, who is non-verbal and autistic. The kindergarten staff understand how significant and calming this is for him, so they’ve planted a special plot of daisies.

When children with autism spectrum disorders (ASD) become what we call ‘dysregulated’, the emotional pressure can escalate to a point where it explodes as challenging behaviour and becomes unsafe for the child and for those around them. The team around four-year-old Kane is trying to prevent this, and is working to support his own attempts to regulate himself. The kind of strategies they use can be highly effective with all children.

The kindergarten staff have found it easier to understand Kane thanks to his involvement in a pilot programme designed specifically for children with Autism Spectrum Disorders whose progress, though very variable, can often be extremely gradual and difficult to measure.

Kane is one of five children in Hawkes Bay who have been part of the ASD Early Intervention Development Project for the past two years. As part of the project, a framework known as SCERTS is being trialled to see how this successful American model can be adapted to use in New Zealand.

The pilot is being trialled by the Ministry of Education’s Special Education early intervention teams who are working side by side with early childhood centre staff, parents and support workers, both at home and in the children’s centres.

Routine and predictability are important to Kane. He can very easily be thrown out of kilter if he is a bit sick or if there is too much going on around him or even if he decides he doesn’t want to be there on a particular day.

This can result in ‘dysregulation’, an emotional response that might see him repeatedly beating his chest or running up and down the fence line.

Early Intervention Team Psychologist Maria De Monchy says since Kane joined the pilot he has made social improvements. “He has definitely gone up a level in functioning and play. He’s more interested in people coming and interacting with him. Before, he used to be more aloof and would do his own thing.”

However, what’s most exciting is, thanks to SCERTS, they can measure his progress.

“Previously we wouldn’t have been able to measure this in such a reliable, consistent way. We can now say ‘yes, we have the evidence’ – or ‘no, what we’re doing isn’t working and we need to take a different approach.”

Adults supporting the child can measure progress because the SCERTS framework uses developmental steps (in the areas of social
communication and emotional regulation) that are tiny and very clearly defined. Similarly, Kane’s goals are very clearly articulated.

“Other assessment frameworks focus on setting goals for the child,” explains Occupational Therapist Maria Boolieris. “What’s different about this is it also sets goals for everyone working with the child so their input can be reviewed as well.

“That means there’s a really collaborative approach. It really brings people together and requires us to communicate extremely well.”

In Kane’s case there’s been a close working relationship between his four kindergarten teachers, his support worker, three members of the Hawke’s Bay Early Intervention Team: Maria Boolieris, Maria De Monchy and Speech-Language Therapist Louise Holdcroft and – most importantly – his parents.

“His mum, Karen, is an active team member. We’ve had her buy-in right from the start,” says Maria Boolieris. “She ensures things are really followed up.”

The strong collaborative focus makes a real difference for the parents, adds Maria De Monchy. “They are able to see that we are all working together. They have a strong sense of direction and hope. They can see the steps their child has taken.”

Collaborative support that is very consistent between the home and kindergarten help Kane achieve a better quality of life, she says. “It is satisfying for adults working with such children when they can find a way to help a child make sense of the world. SCERTS is a tool for doing this.”

Taking on the SCERTS work wasn’t easy at first. In early 2006 the three Early Intervention Team members together with their Hawke’s Bay colleagues joined eleven other teams from around New Zealand to undergo two-day assessment training in Wellington; parents were invited to a one-day overview.

“It initially felt like the blind leading the blind!” says Maria Boolieris. “It was very unfamiliar. It is from overseas and uses quite specific language and lots of jargon.”

A lot of reading was involved, she adds. “We had to learn this and implement it at the same time so it was quite stressful at first.”

But the more the team worked on this the more they saw its value.

“It has also highlighted for us as teachers the need to embrace programmes of this type and to be open to new ideas. The outcomes have been so positive.”

– Susan Young, Head Teacher, Wharerangi Kindergarten
They started to identify the parts that would work best in their local setting and adapted it.

Another local adaption that had occurred earlier in the process was the sewing into the framework those strands of Te Whāriki, the New Zealand early childhood curriculum policy statement, that aligned with SCERTS.

Maria Boolieris says some forms of assessment sometimes result in staff just collecting data. “But this enabled us to really measure the work that everybody was doing. It’s really meaningful because we can use it to modify our behaviour as well.”

Kane’s SCERTS assessment makes no reference to his developmental age or what he is unable to do. The starting point is to describe in detail what Kane can do and align this with the steps defined in the SCERTS framework. That meant those working with Kane had to collect a significant amount of information via observation at home and at the kindergarten.

All members of Kane’s support team were then required to negotiate and agree on what was being recorded. The first assessment for a new child is estimated to take up to 10 hours in total. In Kane’s case it wasn’t so time-consuming as all the team members already knew him.

What followed were detailed discussions with the family about what they wanted Kane to be learning and what his goals might be. This led to a planning meeting where the whole team worked on a written plan that documented everyone’s goals – not just Kane’s.

“Goal-setting for children is a normal part of our work in early intervention. In this case we very clearly articulated the steps every person was going to undertake in order to support Kane to achieve his goals. Everyone works in the same way, as defined in the framework, and there are very specific steps in the SCERTS framework against which their progress is measured,” says Louise Holdcroft.

For example, one of Kane’s goals is to respond to verbal instructions. One of the strategies for the adults, as identified in the framework, is to use less complex language when talking to Kane.

As part of the goal-setting in the social communication area of the SCERTS framework, the family has been supported by the Early Intervention Team members to implement the Picture Exchange Communication System (PECS), which teaches a child to use pictures or symbols to communicate their needs.
We were able to incorporate PECS within the framework because SCERTS provides an umbrella which enables a range of intervention approaches. It actually helps form a common language and common goal-setting,” says Louise Holdcroft.

Susan Young, Head Kindergarten Teacher, says kindergarten staff see themselves as playing a very supportive role. An example of one of the goals for the adults was to offer consistent and predictable routines and activities at home and kindergarten. This enables Kane to make choices for himself, to feel empowered and to work towards independence.

Kane’s progress is carefully documented and measured.

GSE team members regularly visit him at home to observe, discuss and document what has happened that week. Kane’s support worker also records his progress on a weekly basis. The Early Intervention Team members and kindergarten teachers hold fortnightly discussions about what has been happening for Kane at kindergarten. They then document Kane’s learning in his Learning Profile in the form of Learning Stories and other observations. They reassess Kane’s progress regularly, measuring changes that have occurred since the initial assessment. This progress is summarised and presented in a clear and visual way.

“What is so important is that we are not just measuring Kane’s progress all the time but also whether the transactional support – the adults around Kane – are all making progress toward their own goals,” says Maria De Monchy.

Having that double set of goals makes everyone more accountable.

“It is quite critical. It tells us if we are doing things the right way for the child and alerts us if we need to change. And if one person has had more success we can then make sure everyone learns from them.”

Says Susan Young: “It [being involved in the pilot] didn’t mean extra work for us because we set goals for other children as well. It’s definitely a good tool and it’s been well worth doing.

“It has also highlighted for us as teachers the need to embrace programmes of this type and to be open to new ideas. The outcomes have been so positive.”

Phase one of the ASD Early Intervention Development Project ended in December 2008. Phase two is now underway.

SCERTS stands for: Social Communication – how children communicate, Emotional Regulation – how they modify their sensory input and emotional information to then make themselves available for learning, and Transactional Support – how adults can work together to get the best response.

A big strength of SCERTS is that it puts a lot of emphasis on prevention. Adults supporting the child take great care to observe and understand the child’s behaviour. By working with the child and appreciating their efforts – and at the same time teaching them more sophisticated and socially appropriate strategies – they can help children such as Kane to learn to be more independent in managing their emotions and their environment.

In many ways SCERTS offers a similar approach to most other effective ‘behaviour’ programmes. Understanding what the child’s behaviour is achieving for them and then teaching them other skills to substitute for the less desirable ones, is at the basis of most effective programmes.

SCERTS is unique in that it also provides adults supporting the child with a tool to understand the child’s developmental path in learning to regulate their emotions, and suggests the most effective strategies to support them.