

STARS

Specialist Training
in Autism
and
Raising
Standards



Proud to be accredited by the National Autistic Society

We provide an eclectic approach using a variety of reputable, evidence based interventions for your child.



Dear Parents / Carers

Welcome to the STARS Opening Meeting. We aim to work closely with your child's nursery or school to help staff develop their understanding of Autism. STARS also support staff to implement effective, well evidenced and reputable systems, strategies and approaches that may help to develop your child's development, inclusion and learning at your child's setting whilst also enhancing their wellbeing and confidence.

The opening pack contains some basic information about Autism, and some of the systems, strategies and approaches that may be used, together with a contacts list that provides details of website, organisations and resources you may find helpful.

Other information included in this pack include details about our monthly drop in at Leeds Central Library, information about Cygnet Parent Training and a referral form and some key information about Education and Health Care Plans (EHCP).

The STARS Team

STARS is a team of autism specialists who provide advice, support and training for Early Years Settings, Primary Schools, Secondary Schools and Post 16. We also support parents / carers through training and advice sessions. We are committed to raising standards in the well-being, education and support of children and young people with autism.

STARS aim to enable and empower settings to provide the best possible teaching and support for children and young people with autism in their care. To do this we require all settings to identify a member of their team to become the Lead Practitioner who will liaise with and work alongside the STARS Professional at all visits.

The STARS' Offer

Support for Settings/Schools is offered through a Referral Process

In discussion with the setting and at the discretion of the STARS team, the following can be offered:

- Time limited whole setting support: meetings, advice, discussion, training, and resource sharing; with a focus on creating an Autism friendly whole setting approach.
Time limited targeted support for individual pupils

Visits - (made through a referral): If needed:

- Opening meeting: with parents, teaching assistant/ key worker, lead practitioner, teacher, SENCO.
- Up to three visits if needed (at STARS discretion) in collaboration with the lead practitioner and/or SENCo. If there isn't a lead practitioner or key member of staff available then STARS will not be able to visit



- Visit 1 – STARS will take the lead on observations
- Visit 2 – Joint observation and discussion with Lead Practitioner / SENCo
- Visit 3 – Setting to provide STARS with an observation prior to the planned visit

- As part of the settings graduated approach we ask Lead Practitioner / SENCo to reflect and complete and return the challenges / progress form at least one week prior to the visit. This will inform subsequent visits.

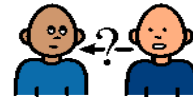
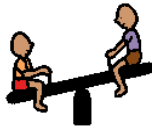
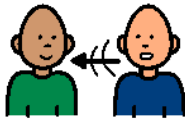
- Support Plan Meeting: with the SENCO, lead practitioner, key staff and parents to discuss the STARS support plan.

Safeguarding

The Designated Safeguarding Leads for the STARS Team are –

- Jessica Lofthouse – Jessica.lofthouse@leeds.gov.uk
- Amanda Watson – Amanda.watson2@leeds.gov.uk

What is Autism?



“A lifelong developmental disability that affects the way a person communicates and relates to people around them. Children and adults with Autism have difficulties with everyday social interaction. People with Autism often have accompanying learning disabilities but everyone with the condition shares a difficulty making sense of the world”.
National Autism Society definition.

Every child and young person on the autism spectrum will have a range of abilities and differences within each of these areas:

The four areas of difference:

Social Communication:



- Differences in using and understanding communication and language, jokes, sarcasm, tone of voice, facial expression and gestures.

Social Understanding:

- Differences in understanding social behaviour, social rules, understanding their own emotions and others, forming friendships.

Interests and Information processing

- Differences in perception, planning, understanding concepts, generalising and predicting, transitions and passions for interests.
- Some pupils may find change difficult due to the lack of flexibility of thought

Sensory Processing

- Differences in perceiving sensory information, Pupils may be under/ over sensitive to touch, sight, hearing, smell, taste, vestibular (balance), proprioception (body awareness) and interoception (internal body awareness).

Structure and Routine



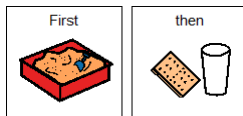
Children with autism need a high degree of environmental structure to feel secure; they need routine and predictability to decrease their anxiety. The child needs to be cued into the routine by objects of reference/ visual timetables. This will significantly improve their emotional well-being and enable their learning.

Objects of reference



The child needs to be shown an object of reference for each activity, these need to be kept the same every day e.g. a ball for playtime, a cup for snack – the objects chosen need to be familiar to the child. After a few weeks the child may become more independent at transitioning to each activity area.

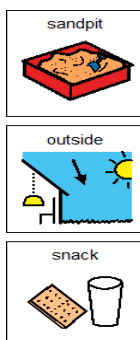
First and Then Boards



The child can be shown two symbols to show what is happening now and what is happening next. The first could be a less attractive activity followed by a more motivating activity, you may need to use hand over hand to guide the child to match the pictures in each area.

Visual Timetables

Symbols representing the planned activities can be displayed vertically at the child's eye level. When the child transitions from one area to another they take the symbol and match it to the same symbol or place near to the activity area, when they have finished the activity they post the symbol in a finished pocket and take the next symbol from their timetable.



Support with making symbols is available from: Karen Faulkner, Leeds Central Library. Karen.Faulkner@leeds.gov.uk 0113 3787035

What is Intensive Interaction?



It is recognised that children with Autism have difficulties with social communication and interaction. At one extreme, some children may be very 'difficult to reach,' may withdraw from your attempts to interact with them; appearing to prefer to be on their own. These children may not like to be touched, have a range of self-stimulatory behaviours and who may not speak or may vocalise very little.

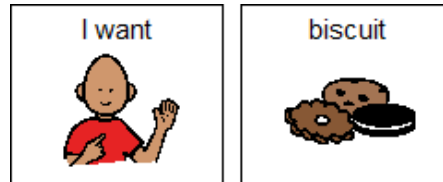
Equally the approach is also valuable for children on the higher functioning end of the autistic spectrum, who may have some speech or be developing and furthering vocalisations, enjoy being with other people, are social in many ways and experience many successful interaction activities. Nevertheless, these children may still need to develop further knowledge and ability of these early communicative skills, such as understanding and using body language and non-verbal cues and gestures, learning the basic patterns and structures of holding a conversation like turn taking.

Intensive Interaction as an approach

Intensive Interaction addresses the core difficulties of Autism. It is an approach developed by Dave Hewett, to teach early communication and interaction skills to these children. It aims to teach what is referred to as the '**Fundamentals of Communication**', these being:

- Enjoying being with another person
- Developing the ability to attend to that person
- Developing concentration and attention span
- Learning to do sequences of activity with the other person
- Sharing personal space
- Using and understanding eye contact
- Using and understanding facial expressions
- Using and understanding physical contact
- Using and understanding non-verbal communication
- Use and understanding of vocalisations, having your vocalisations become more varied and extensive, then gradually more precise and meaningful.
- Learning to regulate and control arousal levels
- Complicated emotional learning – bonding, empathy, understanding other people etc.

Picture Exchange Communication System



What is PECS?

The Picture Exchange Communication System (PECS) is an approach that supports communication skills using pictures.

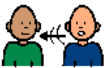
It is an easy programme to follow, created by Andrew Bondy in 1985 who wanted to teach functional communication. It is made up of six stages beginning with simple pictures to communicate needs, progressing to building complex sentences.

Who is it for?

It is appropriate for all ages and for a wide range of speech & communication difficulties such as Autism.



What about speech?



There has been research into the use of PECS and it does not delay nor hinder speech, instead it can be used to support and scaffold a child's speech. Even if a child does not learn to speak they will have a means of communicating with others using the picture exchange system.

Where can I learn more?



www.pecs.com

www.nas.org.uk

STARS SENSORY ASSESSMENT: EARLY YEARS

We have tried to make this assessment clear and easy to for you to use. This is just an initial way of us finding out what your child is over or under sensitive to. After this we may go onto use a more in depth assessment if needed.

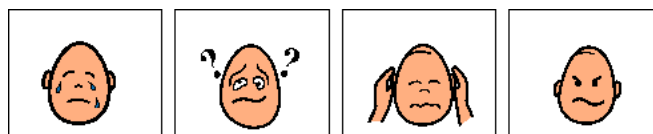
Please note that not all children on the Autistic Spectrum are either sensory seeking or sensory avoiding, they could be both!

Sensory Difficulties in Autism

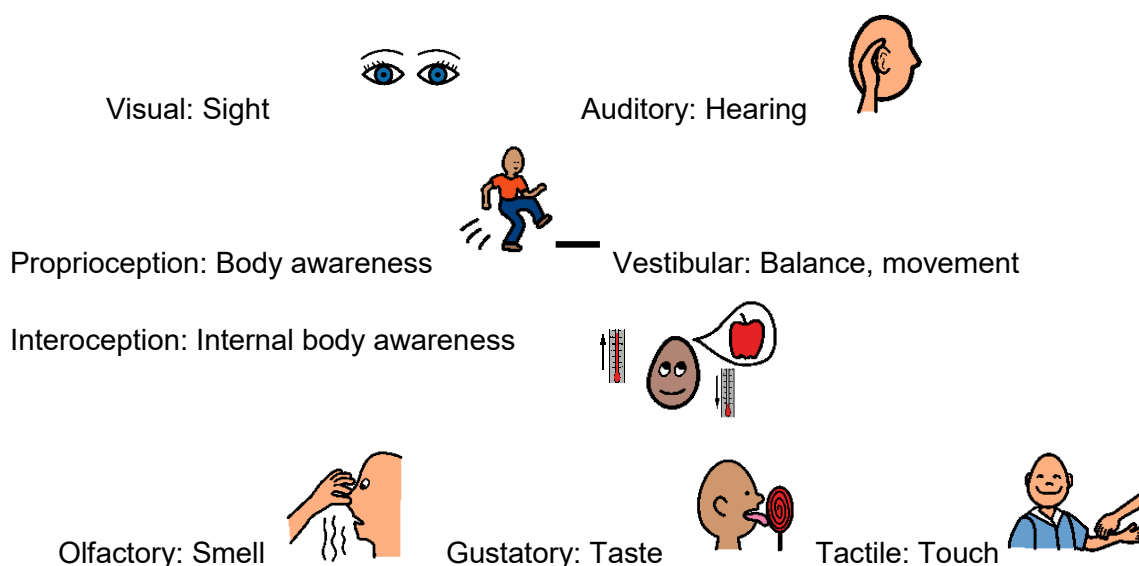
Our senses work together to organise and process information from the body and the environment around us.

Young children with Autism have difficulty in regulating their sensory levels. These levels can fluctuate between **hypersensitive** where children can be over sensitive to sensory experiences and as a result may *avoid* certain sensory experiences to **hyposensitive** where children *seek* out sensory experiences.

Negative behaviours shown can be a direct reaction to their sensory experiences.



How Many senses do we have?



Sensory Checklist

Completed by -

Date -

Over sensitivity to sensory stimuli means a person is likely to **avoid**. has the following over sensitivities:

Doesn't like bright lights Gets headaches from artificial lights Can't tolerate certain colours	Can't tolerate certain smells Refuses to go in certain room due to smells	Has a restricted diet, may be VERY fussy eater Dislikes different types of food touching on plate	Covers ears with hands when hears loud noise Finds it hard to filter out background noise and focus in classroom	Dislikes being touched/ being in crowds A light touch can be very painful Doesn't like wearing new clothes Seams or labels in clothes can be very uncomfortable	Struggles to go up and downstairs Avoids/dislikes PE Avoids being off the ground Moves whole body to look at something		Feels constantly hungry/thirsty Feels the urge to go for a wee or a poo very often Has a low pain threshold Feels constantly too hot/too cold	<u>Motor skills differences</u> Delayed at sitting/ crawling/ walking Finds handwriting/ drawing/ using scissors difficult Finds using cutlery difficult
Sight	Smell	Taste	Hearing	Touch	Balance (vestibular)	Proprioception (body/space awareness)	Interoception (internal body awareness)	Struggles with whole body co-ordination, e.g. sports, bike

Under sensitivity to sensory stimuli means a person is likely to **seek**. has the following under sensitivities:

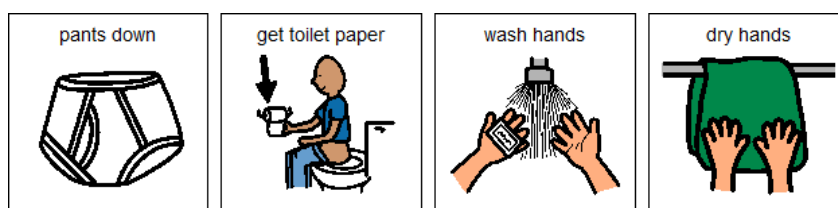
Stares at bright lights Fixates on particular colour/ pattern Moves hands or objects in front of eyes	Sniffs items deeply Is unaware of strong smells	Eats non-food items Likes very spicy or flavoursome food	Listens to music/TV very loud/puts ear to speaker Likes to hear the noise of objects being banged /dropped Makes self-stimulatory noises	Touches other people a lot Seeks out preferred fabrics/textures Finds it hard to gauge temperatures, e.g. of bath water	Likes to spin around Is constantly on the move Feels the need to jump/ trampoline Feels the need to be upside down Feels the need to climb	Leans against things Sits on legs/feet Likes deep pressure Is unaware of own strength Bumps into people/objects Walks on tip-toes Chews non-food objects	Doesn't recognise thirst/hunger Can't tell when needs a wee or poo Has a high pain threshold Can't tell if too hot/too cold	Finds it difficult to get dressed/tie shoe laces
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Toilet Training



Here are some helpful tips for toilet training:

- Look for the first signs that your child could be ready to use the toilet, e.g. if they are pulling at their nappy or aware when they are wet.
- Choose a time when you have few engagements and are feeling relatively stress free. (if possible!)
- Make sure everyone who works with the child will start toilet training at the same time and follow an agreed approach.
- Change the child's nappy in the toilet so they get used to the routine of knowing where it happens.
- Try to look for a pattern of when your child poos and then take them to the toilet at these times.
- Children with autism like routine. Teach the child a whole routine right from saying let's go to the toilet to washing and drying hands, rather than just sitting on the toilet. Keep the sequence the same every time.
- Use visual instructions and social stories to help your child understand what is expected:



- Make it fun: use something motivating in the toilet to help as a distraction if your child doesn't like sitting on the toilet/being in there, e.g. bubbles, favourite story/ toy.
- Praise- have something ready to motivate your child straight away once they have done something, e.g. sticker/ chocolate button for just sitting on the toilet could be the start.

Parent toilet skills booklet: www.continencevictoria.org.au/sites/default/files/Booklet.pdf

Sleep Recommendations

- Keep busy in the day so (s)he doesn't fall asleep

- Try to avoid naps or if they need a nap, aim to have it early afternoon



- Try to put your child to sleep at the same time each night and wake them the same time in the morning



- Towards the end of the evening plan quiet and calm activities that help your child wind down
- Stick to a bedtime routine so that your child knows that bedtime is coming. Use visuals to support



- Encourage your child to understand it is nearly bedtime by -
 - Putting toys away
 - Closing curtains
 - Dimming the lights
 - Turn TV and music down
 - Encourage everyone sit and speak quietly, no active games



- If your child won't settle down to sleep, sit with them until they fall asleep but do not talk to them
- If your child gets out of bed, return them back to bed. Sit next to them and say nothing.

For more information <https://www.scope.org.uk/family-services/sleep-right/>

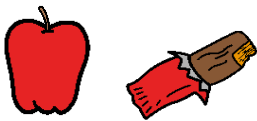
Autism and Diet



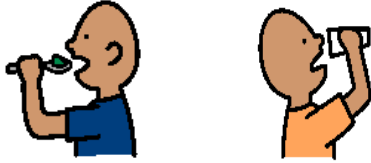
Many children with Autism can have problems relating to feeding and diet. These dietary problems can lead to a restricted diet, sometimes eating the same bland foods, other children may seek and want to eat everything.

Possible reasons for dietary problems

1. Sensory issues – children with autism can experience sensory difficulties which have an effect on food intake; the smell, taste, noise, feel or look of the food can have a huge impact on them. A child may have a craving for a specific food because they may enjoy the sensory feedback it gives or they may want to avoid it as they don't like the texture or feel of it. For example if your child is over sensitive to smells and tastes they may have a restricted diet and may only want to eat the same things. They may avoid strong tasting foods. At the other end of the scale, your child may seek out strong flavours as they are under sensitive to tastes and smells so may want to try everything including things like sand.
2. Rigidity of thought and desire for sameness- children with autism may have difficulty coping with change; they may have a desire for sameness in daily routines such as eating. Small changes in the food such as changes in packaging, shape or texture may be enough to prevent a child eating a meal.



Ways in which we can help



- Introduce messy play such as shaving foam, cooked spaghetti, jelly. Encourage the child to join in or watch you play. If they are reluctant to touch the item, use toys and things that interest them e.g. Thomas won't touch the shaving foam but will happily drive his favourite toy car through it
- Begin by introducing new foods at home in a comfortable safe environment. Keep in mind that they may try a new food for somebody different though, such as grandma or their teaching assistant
- Offer small portions – larger portions can be over whelming
- Encourage your child to explore new foods in way that is comfortable to them: touching, smelling, etc. before asking them to lick or taste it.
- Keep meal times separate to when you are tasting new foods otherwise eating may become a negative experience
- Keep it in mind it can take a child (or adult!) up to 14 'tries' of a food before showing a preference for it. It might just become familiar enough to be tolerated one day. Stick to one food for a couple of weeks before moving on to something else
- There should be no pressure for the child to eat/taste the food. Looking, picking it up, sniffing or licking are all good signs!
- Try to start with similar textured foods that the child likes e.g. John likes eating skips because of the melt in the mouth feeling, therefore his dad is trying wotsits that still give that similar melting sensation
- Don't hide or disguise food! This may trigger a negative response to eating
- Reduce sensory overload beforehand – choose a calm relaxing time to try a food. The calmer the child, the better they will cope
- Use visual supports and a meal time routine to let the child understand what is happening
- Lastly, empathise. Understand that the child's sensory reaction is real.

TACTICAL IGNORING AS A STRATEGY

- Children with autism may sometimes behave in ways that adults find challenging in order to receive to gain a predictable reaction or to receive attention. Or they may be anxious as there is not enough structure/ routine in place. It has been noted that often, the child is not concerned if the attention is negative or positive in nature, as long as it is provided.
- **What is tactical ignoring?**
- Tactical ignoring is a strategy where you give no outward sign of recognising a behaviour (e.g. no eye contact, no verbal response, and no physical response). However, you are aware of the behaviour occurring and you monitor the child to ensure their safety and the safety of others.
- **How does this differ from simply ignoring someone?**
- Tactical ignoring involves:
 - Being aware that the behaviour is occurring
 - Monitoring the behaviour and the individual to ensure safety
 - Recording the behaviour using the appropriate record sheet
- Distracting if appropriate
- **The need for consistency with tactical ignoring**
- Setting staff, parents and carers need to adopt a consistent approach when applying tactical ignoring. The behaviour will often worsen temporarily as the child realises the behaviour is not eliciting the predicted response.



Monthly STARS Drop-in for Parents/Carers and Professionals at Leeds Central Library

The monthly drop in is for parents and educational professionals who need advice on either their child or a pupil in their setting who is autistic.

Come along and meet other parents in a friendly environment Just drop in – no need to book.

Please note; the drop in is for parents who either live in Leeds or whose child attends a Leeds setting.

Where – Leeds Central Library (3rd Floor), Calverly Street, Leeds LS1 3AB

When – The first Friday of the Month (Term Time Only) 10-12pm

Who will be there –

- **STARS Team;** autism outreach service giving advice to parents and professionals from Early Years, Primary, Secondary/post 16.
- **ABC parent support group:** help, support and advice to parents about what services, facilities and groups are on offer in Leeds.
- **SENDIAS: Special Education Needs and Disability Information Advice Support Service:** for parents who require advice relating to EHCP, school mediation, finding the right school.
- **CAMHS: Child and Adolescent Mental Health Services:** for parents who require advice on diagnosis, mental health issues, anxiety.
- **Specialist Health Visitors:** for parents who have a child under the age of 5 who need advice and support?
- **Speech and Language Therapy:** giving advice on speech and language and communication needs.
- **Sleep right from SCOPE:** giving advice to parents on sleep issues for their child.
- **Library staff** will be available to help you use Board maker a computer programme which helps you make picture symbols.

Workshops –

Alongside the drop in sessions, STARS run workshops on specific topics. Parents and setting staff are welcome to attend the workshops. There are some workshops which are only open for parents to attend, please see our website for workshop details www.starsteam.org.uk

FAQ: Can I bring my children with me? Ideally its best if you can arrange childcare as the drop in gets very busy and noisy and we don't have childcare facilities. However, we understand if you have to bring them along if you cannot arrange childcare. Please also be



aware that if you are bringing your child who has autism then it may not be appropriate for them to be listening into the conversation.

Cygnnet Parent Training

The Cygnnet Group is a training programme for parents and carers of children aged 5-18 who have a diagnosis of autism and facilitated by the STARS team.

The Cygnnet Group was developed in Bradford, as a collaboration between the local Child and Adolescent Mental Health Service and Barnados. Parents and carers who have attended the Cygnnet Group in Bradford have given very positive feedback about the programme.

The programme consists of 7 group sessions, each lasting 2½ to 3 hours. Each session covers a different module, each building on the one before. Therefore parents and carers are strongly encouraged to attend all 7 sessions. The sessions are led by a STARS professional with experience of working with children with autism and their families but the personal experiences brought by parents and carers are an essential component to the sessions.

Please see course outline, further information and frequently asked questions below.

CYGNET Course Programme

Session 1: What is Autism?

- Welcome and session plans
- Introduction to the group and questions
- Background to the group
- What is autism

Session 2: Describing autism and parental experiences

- Social interaction
- Imagination, rigidity and strong interests
- Communication
- Sensory differences
- Strengths and challenges
- Parents' journey

Session 3: Sensory issues

- Understanding our senses
- Sensory issues in autism
- Strategies for autism sensory needs

Session 4: Communication

- Communication building blocks and challenges
- Differences
- Additional strategies

Session 5: Understanding Behaviour

- Understanding behaviour
- Understanding behavioural issues linked to autism
- Behavioural frameworks
- Understanding the Iceberg principle

Session 6: Supporting behaviour

- STARR analysis (Setting, Trigger, Action, Response, Result)
- Additional support ideas

- Evaluation

Session 7: To be agreed by group

Further Information and Frequently Asked Questions

Why Might I be interested in coming to a Cygnet Group?

Parents have a lot of involvement with professionals up to and around the time of diagnosis, however they can feel that there is little available to them after diagnosis – at a time when they have a lot of questions about their child and what can help them. Attending the Cygnet group gives parents an opportunity to better understand autism. It offers practical strategies that you can implement at home, gives you a chance to meet with others in a similar position and hear about their experiences.

The training is presented quite informally. The materials are flexible and can be altered to suit the needs of particular groups of parents and carers.

Problems attending a Cygnet programme because of work commitments

Under the Employment Act 2002 (parental leave) parents of disabled children are entitled to 18 weeks unpaid leave to care for their children. Parents must have worked for their employer for at least 100 days prior to taking leave and give 21 days' notice of leave.

Do I have to attend all sessions?

Ideally yes. You will gain a lot more from coming to the group if you come to all the sessions. This is because each session builds on the one before. Please do not accept a place in the group if you are only able to attend one or two sessions – you will not benefit from coming and may take the place of someone else who is able to come to all the sessions.

How do I make a referral?

Firstly your child must have a diagnosis of autism. Contact STARS for a referral form.

For further information or if you can't attend, please contact : THE STARS TEAM via email (see below)

STARS Cygnet Programme Admin Team, **Tracey Brookes, STARS Team, Adams Court, Kildare Terrace, Leeds, LS12 1DB** or email to: starsteam@leeds.gov.uk



Cygnnet Referral Form

Child's Name:	Date Of Birth:	Gender M / F	NC Year Group
Parent/Carer name and address:		School/Setting:	
Telephone Number:			
Does the child have a diagnosis of ASC? Yes / No			
If Yes:			
Which Service/agency undertook the diagnostic assessment?			
<u>Where</u> was the diagnosis made?			
Approx date of diagnosis:			
Does the child have a Statement?			
Yes / No			
Does the child have any additional learning difficulties or disabilities? Yes / No			
If yes please summarise:			
Do either parents have any special needs?			
Do either parents have issues working in small groups?			
Is the child known to CAMHS? If Yes, is this an ongoing CAMHS case?			
Do you know if any other agencies are involved with the family?			
Is there any additional information you feel we may need to be aware of?			



Name of referrer:	Signature :	Date :
Please return by post to: Tracey Brookes, STARS Team, Adams Court, Kildare Terrace, Leeds, LS12 1DB		
Or email to: starsteam@leeds.gov.uk		

EHCP (Education, Health and Care Plan)

An EHC plan describes a child's needs and all the extra help they should get. The local authority will write the plan for the child once parents and professionals have agreed the nature of a child's difficulties and have decided what extra help is needed. Before an EHC plan can be written, an assessment takes place. The purpose of assessment is to help the local authority decide what extra help your child needs.

Not every child with Autism (or any other special need) will get an EHCP, especially if the child is making good progress and their needs are being met in school or nursery.

An EHCP describes:

- a child's needs
- the views of parents and professionals about what is needed
- a clear account of the help that will be provided, either by the local authority or by voluntary organisations
- information about how this will be monitored and reviewed, including any specific educational targets

Leeds SEND Information Advice service (SENDIASS) can support you through the process and answer any questions you may have about it.

For more information see: www.sendiass.leeds.gov.uk.

More information can be found on Leeds City Council website:

<http://www.leeds.gov.uk/residents/Pages/EHCP.aspx>



Useful Contacts:

STARS TEAM

STARS

Adams Court

Kildare Terrace

Leeds LS12 1DB

Tel. 0113 3789792

Email: starsteam@leeds.gov.uk

Autism Awareness

The Autism Education Trust (AET) is dedicated to co-ordinating and improving education support for all children on the autism spectrum in England. www.autismeducationtrust.org.uk

www.aetraininghubs.org.uk/parent-guide : this site offers parents and carers a range of advice including detailed information and guidance on working with the setting to achieve the best outcomes for each child and things to look for and ask when choosing a new school.

Some useful documents:

- **Working together with your child's school**
- **Finding a school for your child with autism**

The National Autistic Society (NAS) is a UK charity for people with autism and their families. They provide information, support and pioneering services, and campaign for a better world for people with autism.

NAS Helpline: 0808 800 4104

www.autism.org.uk

www.nas.org.uk



PECS

www.pecs.org.uk

Intensive Interaction

www.intensiveinteraction.co.uk

Sensory toys

www.sensorytoywarehouse.com

www.sensetoys.com

<https://newlifecharity.co.uk/docs/care-services/Play-Therapy-Pods.shtml> for free loan of specialist toys

Emotional and Mental Wellbeing for Early Years

Mindmouse – www.mindmouse.co.uk

CAMHS – www.camhs-resources.co.uk

Support group info

www.abcleeds.org.uk – to find the latest newsletter which will have lots of information on parent support groups, activities, etc. They also have a Facebook page

www.thefamilyhubleeds.org – will have info on playschemes, playgroups, etc

www.sendiass.leeds.gov.uk - (SENDIASS) for free and impartial advice

www.scope.org.uk – provides practical information and emotional support for families

Zig Zag Leeds Autism Support Services – see Facebook page. Offers practical advice and guidance for families and autism friendly activities.

<https://www.through-the-maze.org.uk/organisation/epic-leeds/> - Parent, carers and families participation forum, working in partnership with services, organisations and professionals.

www.Zarrach.org – support for families experiencing poverty (school referrals only)

www.littlehiccupps.co.uk – support group run by parents of children with additional needs



www.abcleeds.org.uk – to find the latest newsletter which will have lots of information on parent support groups, activities, etc. They also have a Facebook page

www.thefamilyhubleeds.org – will have info on playschemes, playgroups, etc.

www.leedsparentpartnership.co.uk (Now known as SEND Information Advice Service or SENDIAS) Tel: 0113 3951200

Training for Parents

NHS Speech and Language Therapy training for parents: **UPDATE PATHWAY**

http://www.leedscommunityhealthcare.nhs.uk/our_services_az/childrens_speech_and_language_therapy_service/training_workshops_for_parents_and_carers/

Leeds Child and Adolescent Mental Health Services (CAMHS)

<u>West CAMHS</u>	<p><u>LS1-6, LS12, LS13, LS16, LS18-21, 28, LS29 6, BD3</u></p> <p><u>Kirkstall Health Centre</u></p> <p><u>15 Morris Lane, Leeds LS5 3DB</u></p> <p><u>Tel: 0113 843 2710</u> <u>Fax: 0113 843 2711</u> <u>Email: camhs.west@nhs.net</u></p>
<u>East CAMHS</u>	<p><u>LS7-9, LS14, LS15, LS17, LS22-24</u></p> <p><u>The Reginald Centre</u></p> <p><u>1st Floor, 263 Chapeltown Road, Leeds LS7 3EX</u></p> <p><u>Tel: 0113 8434468</u> <u>Fax: 0113 8434494</u> <u>Email: camhs.east@nhs.net</u></p>
<u>South CAMHS</u>	<p><u>LS10, LS11, LS25-27, WF3, BD11, WF10</u></p> <p><u>South Leeds CAMHS</u></p> <p><u>Parkside Community Health Centre, 311 Dewsbury Road, Leeds LS11 5LQ</u></p>



	<p><u>Tel: 0113 843 0804</u> <u>Fax: 0113 843 0803</u> <u>Email: camhs.south@nhs.net</u></p>
<p><u>In Patient and CAMHS Outreach</u></p>	<p><u>Little Woodhouse Hall</u> <u>18 Clarendon Road, Leeds LS2 9NT</u></p> <p><u>Tel: 0113 305 7200</u> <u>Fax: 0113 305 7201</u></p>