Strengths and Difficulties Questionnaire (SDQ) guidance for Social Workers, Carers and education settings

Strengths and Difficulties Questionnaire (SDQ)

The Strengths and Difficulties Questionnaire, or SDQ, is a behavioural screening questionnaire that all Hampshire's looked after children and young people have completed annually as part of their care plan. There are three versions of the questionnaires: one for the social worker, one for the teacher/education professional and one for the parents/carers. Each questionnaire has 25 questions assessing the five following areas:

- Emotional symptoms- This looks at worries, fears and sadness.
- Conduct problems- This includes behaviours that can be challenging for others such as rule breaking.
- Hyperactivity- This covers attention and restlessness.
- Peer relationship problems- This reflects how well they get along with others.
- Pro- Social Behaviours-This is about kindness and helping others.

Why and how SDQs are used

Local authorities are required to use the SDQ to assess the emotional wellbeing of looked after children aged 4-17. Understanding the emotional and behavioural needs of looked after children is essential so that support can be put in place and children can achieve their full potential.

Regularly reviewing the SDQ enables the people around the child to put support in place as soon as needed. This support should be discussed in the child's Personal Education Plan. The social worker should coordinate the gathering and recording of the SDQ score on an annual





basis. Completing the SDQ would ideally be done before one of the termly PEP meetings so that the score can be discussed and any interventions or support put in place.

The three types of SDQ

The social worker SDQ

The social worker SDQ questionnaire is completed annually by the social worker. It is completed within Mosaic, Hampshire's children's social care database. It should also be added to the Social Care Section of the PEP.

The education SDQ

The teacher questionnaire should be completed annually by an education professional who knows the child well in an educational context. The score should then be recorded on the child's Personal Education Plan on the Asset system, in the 'Strengths and Needs' section. Linked is an SDQ calculator which will calculate the result and show the different areas of need. There is also a link to this in the Strengths and Needs section of the PEP.

The parent or carer SDQ

The parent or carer questionnaire is completed annually by the person they live with and shared with the social worker. This will be gathered by email. The contents of this email are shown <u>below</u>.





Process Summary

Social Worker initiates gathering SDQ scores emailing Carer/Parent and the Education Setting. The questionnaires should be completed within a four week window which is initiated by the Social Worker.

Social Worker completes their SDQ on Mosaic and records score on Social Worker section of PEP.

Social Worker sends SDQ Email to Carer/Parent. The content of this email can be found below in the Parent/Carer Section. This is completed and returned to social worker who records score on Mosaic and adds to Strengths and Needs section of PEP

Social Worker emails the education setting asking to complete the SDQ score using linked resources on the PEP system and then the education setting should record the figure in Strengths and Needs section of the PEP.

Trinagulation-The three scores are then disucssed during the PEP/ CLA review process, as appropriate, as part of a structured conversation about support for the child or young person's wellbeing.

The process of gathering the SDQ score should be repeated yearly but the scores and any identified support reviewed and discussed more regularly at every PEP meeting and CLA review.

Differences in SDQ scores

Each of the SDQ questionnaires may produce different scores. The scores can help professionals understand if more support is needed in different contexts.

In different settings, young people may show their emotions, anxieties and distress differently. They may not always feel comfortable sharing these feelings or reporting them on the questionnaire. It is helpful to look at the whole range of responses when deciding on how best to support a young person.

Context

Context is important, if a child has recently had a change of placement or education setting this may results in a higher score. Equally, an





SDQ score should not be completed until the child has been in care for three months to allow them to adjust to the new situation. This is also why the questionnaires should be completed within a four-week window which is initiated by the Social Worker.

What the scores mean

The SDQ score falls into bands;

- Close to average scores 0-13
- Slightly raised 14-16
- High 17-19
- Very high 20-40

The important thing to remember is that the SDQ calculators on Mosaic, and linked to the PEP, break the SDQ score down into the different areas. This allows us to see if a child or young person is scoring higher in one of the <u>five areas</u> than another. For instance, they may have a high SDQ score but when you look at the break down, this could be because they have a high score for Peer Relationships but score lower in the other areas. This highlights the area in which they may need support.

Close to average scores

If an SDQ score is close to average, the child may not need direct support but discussions about how their social, emotional and mental health can be maintained or further improved should be discussed at their Personal Education Plan meeting.

Slightly raised, high and very high scores

A child or young person's SDQ score can be above average in the slightly raised/high/very high ranges. If this is the case, appropriate interventions can be put in place to support the young person's social, emotional and mental health needs and therefore improve





their score. The suggestions for possible support and interventions for education settings are <u>linked</u> below and from the PEP.

Strengths and Difficulties Questionnaire for Parents/Carers.

Please reply directly to this email answering the questions below within the email.

For each item, please mark the box for Certainly True, Not True or Somewhat True 'with an X'. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems odd. Please give your answers on the basis of the child's behaviour over the last six months. Discuss the answers with the child/young person where appropriate. The result will be discussed during CLA reviews and PEP meetings and any actions needed to support the child or young person identified.

		Not	Somewhat	Certainly
		True	True	True
1	Considerate of other people's feelings			
2	Restless, overactive, cannot stay still for long			
3	Often complains of headaches, stomach- aches or sickness			
4	Shares readily with other children (treats, toys, pencils etc)			
5	Often has temper tantrums or hot tempers			
6	Rather solitary, tends to play alone			
7	Generally obedient, usually does what adults request			
8	Many worries, often seems worried			
9	Helpful if someone is hurt, upset or feeling ill			
10	Constantly fidgeting or squirming			
11	Has at least one good friend			
12	Often fights with other children or bullies them			





13	Often unhappy, down-hearted or tearful			
14	Generally liked by other children			
15	Easily distracted, concentration wanders			
16	Nervous or clingy in new situations, easily loses confidence			
17	Kind to younger children			
18	Often lies or cheats			
19	Picked on or bullied by other children			
		Not	Somewhat	Certainly
		True	True	True
20	Often volunteers to help others (parents,			
	teachers, other children)			
21	Thinks things out before acting			
22	Steals from home, school or elsewhere			
23	Gets on better with adults than with other			
	children			
24	Many fears, easily scared			
25	Sees tasks through to the end, good attention span			

Do you have any other comments / concerns	YES / NO
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Additional Comments:





Overall, do you think this child has difficulties in one or more of the following areas:

Emotions, concentration, behaviour or being able to get on with other people?

NO	YES – minor	YES – definite	YES – severe
	difficulties	difficulties	difficulties
If you have answere	ed "Yes", please answe	r the following question	ns about these
difficulties:			

How long have these difficulties been present?

Less than a month	1 – 5 months	6 – 12 months	Over a year

Do the difficulties upset or distress the child?

Not at all	Only a little	Quite a lot	A great deal

Do the difficulties interfere with the child's everyday life in the following areas?

	Not at all	Only a little	Quite a lot	A great deal
Homelife				
Friendships				
Classroom learning				
Leasure activities				





Do the difficulties put a burden on you or the family as a whole?

Not at all	Only a little	Quite a lot	A great deal

Possible School Based Interventions

All interventions are linked so that designated teachers, social workers, carers and IROs all have an understanding of the different interventions. This check list is by no means exhaustive but can be used to keep a record of what has already been tried to support the child or young person and will be valuable evidence for further referrals, e.g. to CAMHS, if one becomes necessary.

Assessment and Understanding Needs- Needs Analysis Tools	Impact
SDQ	
PEP Tool Kit	
Reach2Teach	
Boxhall Profile	
Thrive Assessment	
ABCC Chart	
Other	





Individual	Impact
Interventions	
ELSA	
TALA	
Mental Health Support	
Team (MHST)	
Sensory/Self-	
Regulation Tools (Zones	
of Regulation)	
Mentor/Key Person	
Targeted support for	
unstructured time.	
Other	

Group Interventions	Impact
<u>Lego Therapy</u>	
<u>Talkabout</u>	
Time to Talk	
Desty	
Nurture Group	
Other	

Classroom/Whole School Support	Impact
Training	
Safe Space	





'Timeout' Pass	
De-escalation script.	
Other	

Other resources

<u>i-THRIVE | Implementing the THRIVE Framework</u>

CAMHS

Social care and health | Health and social care | Hampshire County Council



