SOCIAL WORKERS and the SDQ

The SDQ is completed by the child, parent/carer and Designated Teacher, and used routinely in PEP meetings and health assessments. Social workers do have a role in the collation of the SDQ and progressing actions arising from the questionnaire. SDQ scores can also be used to inform planning for children and young people in other forums, including:

- ★ LAC reviews
- ★ Placement reviews
- ★ Care team meetings
- ★ Pathway planning meetings
- ★ Matching meetings

The SDQ is a tool that supports us to think about a young person's mental health and wellbeing. It is important to ensure SDQ information is considered as one part of the picture alongside other sources of information available about a child or young person's wellbeing.

Social workers should ensure that SDQ scores are uploaded onto the child's record and any actions arising from the score is incorporated into the child's plan.

What do the scores mean? What actions should be taken?

Normal Score 0-13 (close to average)

- Record on the child's ICS record
- No direct additional intervention is likely to be required
- Consideration of how to maintain and further enhance wellbeing is discussed at relevant care planning meetings under the consideration of what is working well.

Borderline Score 14-16 (just above average)

- Record on the child's ICS record
- Consideration in care team/PEP meeting to be given to how the child's emotional wellbeing could be enhanced
- Amend the child's timeline and trajectory accordingly.

Cause for Concern Score 17-40 (above or well above average)

- Record on the child's ICS record.
- This score indicates the child is likely to need additional support to enhance their wellbeing
- Consideration should be given in the care team /LAC review to making a referral to a mental health support service.

A HIGH or VERY HIGH score will trigger a consultation with the Virtual School, social worker and an Educational Psychologist or CYPS worker.

Things to consider when discussing the SDQ score with a child /young person

1. Are there any concerns (high / very high) in any areas?
   - What may be contributing to this?
   - What is already in place that is supporting the CYP's mental health and wellbeing?
   - How do we know if this is making a difference?
   - What else can be put in place to support these needs?

2. What other information does the network have about the chid or young person's emotional wellbeing? For example, but not limited to:
   - Parent/Foster Carer and child's SDQ if available
   - Teacher views regarding emotional wellbeing and presentation across school
   - Information from other professionals involved with the child
   - Observations from visits and contacts
   - Direct work with the child.

3. Is there a clear understanding of the child or young person's areas of strength and difficulties in relation to their emotional wellbeing? If not, what needs to happen / what information needs to be gathered and from whom in order to develop this understanding?

4. Does the information gathered from a range of sources 'fit' with what the SDQ results are indicating? Do you need to find out any more information in a particular area to further explore this?

5. Are there any differences between what different sources of information are telling you? If so:

   - What may have led to these differences?
   - Consider whether the child or young person presents differently in different contexts. If so, what do we know about when they are managing well? How can we apply what is working well in one context to another context?
   - Does the person who completed the SDQ only see them in particular types of situations? Is this representative of their presentation and behaviour more generally?

6. What are the child or young person's views about their own social, emotional and mental health needs?

   - What are their main concerns? What do they think might support them?
   - How can we take their views into consideration when identifying targets / strategies?