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# Strengths and Difficulties Questionnaires (SDQs)

## Practice Guidance



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Target audience: Social Workers and Virtual School Caseworkers

Date effective from: 01 July 2019

Date of review: March 2021



## 1. What is the SDQ?

- 1.1 Local authorities are required to use the strengths and difficulties questionnaire (SDQ) to assess the emotional wellbeing of individual looked after children (LAC) aged 4-16. Understanding the emotional and behavioural needs of LAC is important so that the relevant support can be put in place and children are given the opportunity to achieve their full potential.
- 1.2 The SDQ is a brief behavioural screening questionnaire. All versions of the SDQ ask about 25 attributes, some positive and others negative. These 25 items are divided between 5 scales:

1. emotional symptoms
2. conduct problems
3. hyperactivity/inattention
4. peer relationship problems
5. pro-social behaviour

- 1.3 The number of SDQs completed by the local authority for looked after children is reported to the Department for Education annually to demonstrate that Social Workers and professionals working with looked after children are considering emotional and behavioural difficulties.

## 2. Why should carers complete an SDQ questionnaire?

- 2.1 It is important to routinely assess the emotional wellbeing of LAC. Based on national research, here are some of the reasons why it is important:

- Looked after children have a higher prevalence of emotional and behavioural issues arising from neglect and abuse.
- Looked after children are more likely to develop mental health problems and require provision from CAMHS/Full Circle.
- Looked after children often experience attachment difficulties and require therapeutic support.

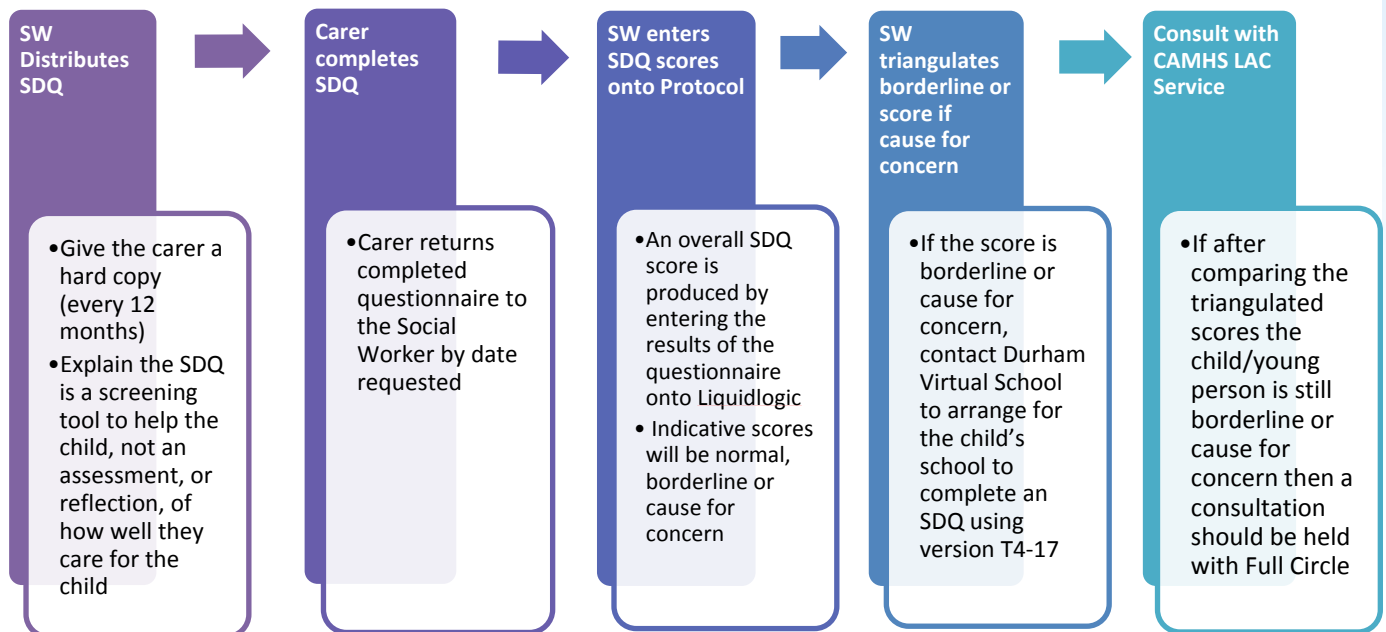
- 2.2 The completed SDQ can be used in the following ways:

- To inform statutory health assessments completed by the NHS;
- To inform whether the child/young person needs a referral into CAMHS/Full Circle;
- To evaluate progress against emotional wellbeing outcomes as part of the overall health needs of looked after children;
- To give commissioners of services a better understanding of the emotional wellbeing needs of Durham looked after children.



### 3. Summary of the process: What do Social Workers (SW) and carers need to do?

Figure 1. Summary of SDQ Process



#### 4. When is the SDQ questionnaire completed?

4.1 Young people aged 4-16 are required to have an SDQ completed **annually**. The SDQ should be completed when children have been Looked After for over 12 months. It is recommended it is completed **prior to when the child's health assessment is due**, so it can inform the assessment.

#### 5. Where can you download the SDQ form?

5.1 The form is available on Liquidlogic, (see screenshots and Appendix 2). The Social Worker for the young person or fostering social worker/residential worker should complete this with the carer on visits/contacts to placement. They should input it onto Liquidlogic and ensure that this summary forms part of the child's review HA. The lead health professional is responsible for checking that appropriate services are involved to meet any requirements/needs identified.

#### 6. What does the Social Worker do with the completed questionnaire?

6.1 Once the carer/residential staff/relative & friends has returned the completed questionnaire to the Social Worker; the Social Worker should then ensure the **questionnaire is entered onto Liquidlogic and the total difficulties score is calculated**  
Below are some example screen shots:



Figure 2. Child Looked After Pathway

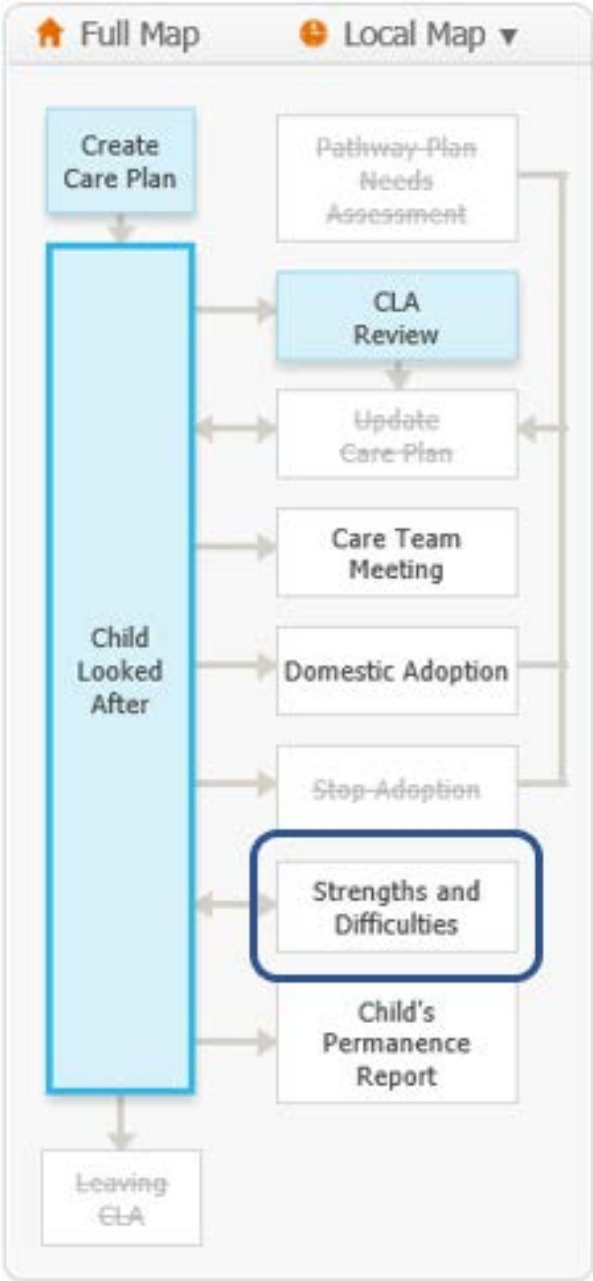




Figure 3. SDQ Form in Liquidlogic

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**Strengths and Diffi...**

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## Strengths and Difficulties Questionnaire

Form Start Date: 01-Apr-2019

Date SDQ Completed:

Considerate of other people's feelings  Not True  Somewhat True  Certainly True

Restless, overactive, cannot stay still for long  Not True  Somewhat True  Certainly True

Often complains of headaches, stomach-aches or sickness  Not True  Somewhat True  Certainly True

Shares readily with other children (treats, toys, pencils etc.)  Not True  Somewhat True  Certainly True

Often has temper tantrums or hot tempers  Not True  Somewhat True  Certainly True

Rather solitary, tends to play alone  Not True  Somewhat True  Certainly True

Generally obedient, usually does what adults request  Not True  Somewhat True  Certainly True

Many worries, often seems worried  Not True  Somewhat True  Certainly True

Helpful if someone is hurt, upset or feeling ill  Not True  Somewhat True  Certainly True

Constantly fidgeting or squirming  Not True  Somewhat True  Certainly True

Has at least one good friend  Not True  Somewhat True  Certainly True

Often fights with other children or bullies them  Not True  Somewhat True  Certainly True

Often unhappy, down-hearted or tearful  Not True  Somewhat True  Certainly True

Generally liked by other children  Not True  Somewhat True  Certainly True

Easily distracted, concentration wanders  Not True  Somewhat True  Certainly True

Nervous or clingy in new situations, easily loses confidence  Not True  Somewhat True  Certainly True

Kind to younger children  Not True  Somewhat True  Certainly True

Often lies or cheats  Not True  Somewhat True  Certainly True

Picked on or bullied by other children  Not True  Somewhat True  Certainly True

Often volunteers to help others (parents, teachers, other children)  Not True  Somewhat True  Certainly True

Thinks things out before acting  Not True  Somewhat True  Certainly True

Steals from home, school or elsewhere  Not True  Somewhat True  Certainly True

Gets on better with adults than with other children  Not True  Somewhat True  Certainly True

Many fears, easily scared  Not True  Somewhat True  Certainly True

Sees tasks through to the end, good attention span  Not True  Somewhat True  Certainly True

Do you have any other comments or concerns?



Print

Strengths and Diffi...

Page 2

Attachments (0)

## Page 2

Overall, do you think that 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 difficulties  
 Yes - definite difficulties  
 Yes - severe difficulties

**If you have answered "Yes", please answer the following questions 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 this child?
  - Not at all
  - Only a little
  - Quite a lot
  - A great deal
- Do the difficulties interfere with this child's everyday life in the following areas?
  - \*\* HOME LIFE  Not at all  Only a little  Quite a lot  A great deal
  - \*\* FRIENDSHIPS  Not at all  Only a little  Quite a lot  A great deal
  - \*\* CLASSROOM LEARNING  Not at all  Only a little  Quite a lot  A great deal
  - \*\* LEISURE ACTIVITIES  Not at all  Only a little  Quite a lot  A great deal
- 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

Signature:

Relation to Child

- Mother  
 Father  
 Other (please specify below)

*Thank you very much for your help*

- The SDQ score is automatically calculated as the SDQ is answered. The score can be viewed from the 'Overall Score' heading across the top of the form.

Figure 4. SDQ Score in Liquidlogic


Information | Questionnaire | Consolidation | Overall Score | Delegate | Revisions

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Overall Score

Total Difficulties Sc...

SDQ Score

Overall Score	Results
Total Difficulties Score	15 / 40    NT



## 7. Using the SDQ score

7.1 A number of bandings have been developed which can help predict children and young people who are likely to develop significant mental health problems, based on their SDQ score. The bandings classify scores as:

- 'normal'
- 'borderline'
- 'cause for concern'

7.2 These bandings are identified by obtaining the total difficulties score and the scores in each of the scales.

7.3 If the child's total difficulties score is outside the normal range (see Table 1) and considered as giving cause for concern, the child may benefit from triangulating the scores from the carer's SDQ with those of his or her teacher. Social Workers and the virtual school team should arrange for this to be done to provide more comprehensive information for the health assessment.

7.4 Teacher (T4-17) can be downloaded from the 'Virtual School' website <http://www.durham.gov.uk/durhamvirtualschool>. The process will be co-ordinated by the virtual school caseworker.

**Table 1. SDQ bandings for parent/carer questionnaire results – using the score**

Main carer completed SDQ	Normal	Borderline	Cause for concern
Total difficulties score	0-13	14-16	17-40

7.5 It is important to remember that the SDQ is only a screening tool and should not replace other processes, assessments and/or knowledge of the child and their behaviours. Therefore, social workers should not wait for an SDQ to refer to Full Circle for Consultation if a child is already presenting with sign of poor emotional wellbeing or mental health. Full Circle will be the gateway to referrals to CAMHS if then required for a child or young person. An SDQ can be completed at any time should any professional feel this is needed to access services and support for a child/young person.

7.6 The completed SDQ is to be forwarded to the LAC Health Team prior to the Review Health Assessment. The RHA needs to reference any actions arising from the SDQ in relation to emotional and mental wellbeing of young people and should be included in the updated Care Plan. This all needs to be included in the Looked After Review with the oversight of the IRO.





## 8. Consultation with Full Circle

8.1 Durham CYPS has a specialist integrated team that is dedicated to working with Durham LAC and Care Leavers. The aim of the Full Circle service is to improve the mental and emotional health and wellbeing of LAC and consequently improve the stability of their placement relationships and other aspects of their life as they move towards adulthood.

8.2 If the triangulated scores confirm the carer's score i.e. is in the borderline or cause for concern range, then a consultation with the Full Circle service should take place to understand if a full mental health assessment or additional therapeutic support is required. The referral via Liquidlogic is for a one-off consultation with Full Circle.





## Appendix 1 - Frequently asked questions

### Who completes the SDQ and when?

The SDQ must be completed by the main carer; for most looked after children this will be the foster carer, family and friend's carer, residential worker and preferably in readiness for the child's annual statutory health assessment, when they have been looked after for 12 months.

Each looked after child must have a questionnaire completed within the last 12 months.

### What happens to the information on the SDQ?

Social Workers need to ensure that completed questionnaires are input into the child's record on Liquidlogic and that scores are considered i.e. does the score fall in the 'normal', 'borderline' or 'cause for concern' range?

The SDQ score should be used to inform the child/ young person's statutory health assessment, and where the score has been triangulated with school it should trigger a social work consultation with the Full Circle service.

### What happens if the child is placed outside of area?

CAMHS/Full Circle service work with young people placed inside of County Durham. Those placed outside of County Durham will need to access CAMHS through the GP.

Social workers would still need to ensure the SDQ was completed in accordance with guidance.

On requesting health assessments (RHA) for LAC placed out of the area, the LAC Health Team will provide the SDQ score to the out of area LAC Team.

### Is training provided?

No training is required, but if necessary, the Social Worker should be able to explain to the carer what the questionnaire is for and why it is important for them to complete it together. The Social Worker should:

- Check that all carers understand what they need to do and by when;
- Explain that it is important to be honest in their assessments and that the SDQ is a screening tool to help the child and is not an assessment, or reflection, of how well they care for the child;
- Make sure the carer knows the child well enough to be able to give meaningful insights in responding to questions;
- Agree a completion and return date for the questionnaire with the social worker;
- Complete the SDQ on Liquidlogic as part of the child's record.

### What if a child has changed carers?

For children who have changed placements during the course of the year, Social Workers should assess which carer is best placed to carry out the assessment.



### **What arrangements do we need to make for completing the questionnaire?**

The Social Worker should ensure that the SDQ is completed as part of discussions or visits to the placement in preparation for the RHA and is recorded on Liquidlogic. Any scores of 17 or above should trigger a consultation with Full Circle.

The SDQ requires carers to read a series of statements and judge how well it describes the young person by ticking one of three or four boxes for each question.

Local authorities should ensure that the social worker/carer completes the questionnaire in advance of the health assessment. Local authorities are responsible for ensuring that the questionnaire is completed and loaded into the child's file on Liquidlogic .

The completed summary forms should be emailed by the child's social worker to LAC Health admin ([cdd-tr.lacteam@nhs.net](mailto:cdd-tr.lacteam@nhs.net)) prior to the health assessment and should also accompany any referral to CAMHS. It should be also emailed to Durham Virtual School ([DurhamVirtualSchoolLAC@durham.gov.uk](mailto:DurhamVirtualSchoolLAC@durham.gov.uk)).



### **What if the questionnaire is not / cannot be completed?**

Completion of the SDQ is straightforward and there should only be rare exceptions where it cannot be completed.

Having learning difficulties should not exclude a child from having a questionnaire completed that relates to them.

However, where a looked after child has disabilities which mean that it would not be possible or appropriate to complete a questionnaire then that should be noted and recorded on Liquidlogic (see SDQ3 below). Where a score cannot be obtained, the data return does contain a field so that the local authority can give the reason for this.

The SSDA903 data collection uses the following codes for this purpose:

- SDQ1 - No form returned as child was aged under 4 or over 17 at date of latest assessment
- SDQ2 - Carer refused to complete and return the questionnaire
- SDQ3 - Not possible to complete the questionnaire due to severity of the child's disabilities
- SDQ4 - Other
- SDQ5 - Child or young person refuses to allow an SDQ to be completed



## What are the thresholds for SDQs?

**Table 2. SDQ bandings – for triangulating scores from carer, teacher and young person self-completed questionnaires**

<u>Parent/carer completed SDQ</u>	<b>Normal</b>	<b>Borderline</b>	<b>High</b>
<b>Total difficulties score</b>	<b>0-13</b>	<b>14-16</b>	<b>17-40</b>
Emotional symptoms score	0-3	4	5-10
Conduct problems score	0-2	3	4-10
Hyperactivity score	0-5	6	7-10
Peer problems score	0-2	3	4-10
Pro-social behaviour score	6-10	5	0-4
Impact score		1	2-10
<u>Teacher completed SDQ</u>			
<b>Total difficulties score</b>	<b>0-11</b>	<b>12-15</b>	<b>16-40</b>
Emotional symptoms score	0-4	5	6-10
Conduct problems score	0-2	3	4-10
Hyperactivity score	0-5	6	7-10
Peer problems score	0-3	4	5-10
Pro-social behaviour score	6-10	5	0-4
Impact score		1	2-6
<u>Self-completed SDQ (aged 11+)</u>			
<b>Total difficulties score</b>	<b>0-15</b>	<b>16-19</b>	<b>20-40</b>
Emotional symptoms score	0-5	6	7-10
Conduct problems score	0-3	4	5-10
Hyperactivity score	0-5	6	7-10
Peer problems score	0-3	4-5	6-10
Pro-social behaviour score	6-10	5	0-4
Impact score	0	1	2-10

It is agreed that prior to the RHA the social worker is notified of the date by the LAC Health admin team to ensure that the HA incorporates the SDQ summary and score to inform the HA.



## Appendix 2 – Example of Strengths and Difficulty Questionnaire

For Foster Carer/ Residential Worker / Parents if placed under Placement with Parents Regulations.

### Strengths and Difficulties Questionnaire

P 4-17

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months.

Child's Name .....

Male/Female

Date of Birth .....

	Not True	Somewhat True	Certainly True
Considerate of other people's feelings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restless, overactive, cannot stay still for long	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often complains of headaches, stomach-aches or sickness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shares readily with other children (treats, toys, pencils etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often has temper tantrums or hot tempers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rather solitary, tends to play alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generally obedient, usually does what adults request	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Many worries, often seems worried	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Helpful if someone is hurt, upset or feeling ill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Constantly fidgeting or squirming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has at least one good friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often fights with other children or bullies them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often unhappy, down-hearted or tearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Generally liked by other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily distracted, concentration wanders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nervous or clingy in new situations, easily loses confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kind to younger children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often lies or cheats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Picked on or bullied by other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Often volunteers to help others (parents, teachers, other children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thinks things out before acting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steals from home, school or elsewhere	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gets on better with adults than with other children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Many fears, easily scared	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sees tasks through to the end, good attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any other comments or concerns?

Please turn over - there are a few more questions on the other side



Overall, do you think that your 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 difficulties	Yes-definite difficulties	Yes-severe difficulties
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have answered "Yes", please answer the following questions about these difficulties:

• How long have these difficulties been present?

Less than a month	1-5 months	6-12 months	Over a year
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Do the difficulties upset or distress your child?

Not at all	Only a little	Quite a lot	A great deal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRIENDSHIPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CLASSROOM LEARNING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEISURE ACTIVITIES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• 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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signature .....

Date .....

Mother/Father/Other (please specify:)

**Thank you very much for your help**

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