

Waltham Forest Early Years Guidance

Completing a SACC Questionnaire and referral

This guidance will support SENCOs in completing a SACC Questionnaire for children in Early Years provisions, who are being referred to the Social and Communication Clinic.

What is the SACC Questionnaire (SQ)?

The SACC Questionnaire forms part of the referral requirements for the Social and Communication Clinic (SACC). This accompanies the SCS (Specialist Children's Service) referral form and will also be looked at alongside SLT reports, medical reports, school/nursery reports as appropriate.

It consists of:

- Tick box sections related to the criteria factors thought about in Autism e.g. social communication, language, sensory issues
- A section on the presence or absence of ACE's (adverse childhood experiences) e.g. domestic violence, neglect, alcohol/drug abuse in the family etc.
- A section on social and environmental factors.

The SQ, alongside SLT reports, ASQ's, Early Years SEN paperwork etc. all form part of Health's decision making when deciding to accept a child on the SACC waiting list.



How do you fill out the SACC Questionnaire (SQ)?

It is important that **all areas of the SQ** are filled in.

If possible, the questionnaire is best filled out with the parents/carers so that Health are provided with information on the child's behaviour, strengths and areas of need both at home and also in a nursery environment. This also helps to see whether this information on the child is the same or different between home and nursery, which Health need to know. Don't be discouraged or worried if you are seeing the child do something in the nursery setting that parents/carers are not seeing at home or vice versa. We all know that children, especially those with social communication issues, will often show more ability in the very familiar and context laden home situation.

Alternatively, for a number of children they may also be really helped by the routine and structure of nursery. Even if you feel the information is mismatched, it is all very valuable.

Please remember **to fill out** and complete **all** the sections of the form related to **Adverse Childhood Experiences (ACES)**. It may be that you are putting a cross or saying not applicable to all of them, but if they are left blank, Health won't know if this is just because they have not been asked.

When fully completed, the form can give Health a wealth of information before they see the child. e.g.

For a child who is living in a shared house with one bedroom between 5 people and no garden space, they will have to consider this and its effect on the child's play opportunities.

In the ACES part Health also ask about mental health issues, both in the immediate nuclear and extended family. How much support each family has and from whom. Sometimes these questions may seem intrusive and can be hard to ask, but they don't have to be just asked baldly without any preparation. After filling out the tick box, it may be relevant to say something like *'it sounds as though your hands are full with Xat home. Do you have any time to yourself, do you have people who can help you or who you can talk to about things?'*

What do Health need you to input?

As well as ticking the boxes etc. and discussion with parents/carers the SQ really benefits on you, as a SENCO/Early Years Professional, commenting on all the areas. By filling in the comment section, Health can sometimes 'see' what you are concerned about.

As nursery workers, observing children is your daily practice, so don't think you can't put down what you have seen or that it has to be very precise. Your gut feeling or instinct about a certain event or moment can be really helpful to Health, when they are deciding on whether or not to accept the referral.

Remember, if you are ticking the box about relationships with people, have a think.... Maybe this child has good relationships with parents/carers/keyperson but not with strangers or peers.

Maybe parents/carers tell you *'he's super friendly with everyone'*. Is that always appropriate based on their developmental age etc. What does that 'overfriendliness' look like?



Why do Health need this information?

A diagnosis of ASD is lifelong. Health want to make sure that they make the correct diagnosis for a child and their family. Because the diagnosis is mainly based on a child's behaviour, they need to have a good picture of that child and what that behaviour looks like in all environments.

They are not expecting you to diagnose the child, but they do expect the referral to be comprehensive and fully completed. As mentioned, the SQ will ask questions on all the areas Health need to be thinking about when diagnosing ASD and if something is missing or incomplete, they are missing that relevant information.

This may result in your referral being sent back and you being asked to resubmit with the relevant information.

As you know there is a wait for the SACC clinic, so if Health have robust information at the point of referral, when they see the child potentially 6 months to a year later, they can see if there has been any improvement, regression, or if the child has plateaued, which can also be very informative.

It may also be beneficial, with the parents/carers consent and Health's consent, for you to attend the SACC appointment with the family.

Further information

If you have any questions regarding the SQ please contact Wood Street directly on 020 8430 7970 or email WFscsReferrals@nelft.nhs.uk

For any other advice please contact SENDEYFS@walthamforest.gov.uk or speak with your allocated Early Years Area SENCO.

Please also see the completed example SQ.