**A guide to completing the school/teacher questionnaire for secondary school age children.**

You have received this form because the family/carers have asked CAMHS to assess the named child for a potential neurodiverse condition such as Autism or ADHD. The information you share with us in this form will help us to start building a picture of this student and will be part of their assessment process. There is no one single tool or test that clinicians can use to diagnose neurodiverse conditions so it is important that the information you give is as detailed as possible. No one single answer will dictate what happens next as we need to consider all the details before any next steps can be decided.

Before completing the form, it may be useful to think about who knows this child best. As no one single teacher is responsible for this student’s learning, it might be best to collate answers from teachers and learning support staff who know the child well so any common themes can be captured.

When you are answering the questions, the detail that will help us the most is if you can give examples which tell us about frequency, duration and the impact on the young person’s academic progress and or pastoral wellbeing. For example, if you are explaining a particular behaviour, tell us how often you see it (every day, once a week), how long this lasts for/when it happens (during a particular lesson, all day, right before lunch) and the impact on this child’s school life (how they feel about this if they can tell you)

A neurodivergent child may not have been spotted in primary school if they were well scaffolded and able to cope with primary school life. A change in circumstances, either at home or school, or more challenging work / routines, may trigger symptoms presenting themselves.

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The form is broken up into different sections. This guide will let you know which section the information is referring to by referencing the section’s letter i.e. SECTION A

**SECTION A – General information**

**Strengths / Weaknesses / Concerns**

It would be ideal to have some examples of any strengths the student has and any difficulties that they experience. These can be academic, behavioural or pastoral. Anything that you think may give the clinicians insight into any challenges that have a significant impact on the student’s school life.

**Agencies involved and strategies implemented**

For support, please list how long you accessed that support for and who it was from. Examples could include charities, Early Help, primary school, Speech and Language Therapy, Occupational Therapy, Educational Psychologist or other NHS services

Please give details of any strategies that are, or were previously, helpful. Please also include any assessments or reports that you feel may be helpful.

**SECTION B – Social Interaction and Communication**

Please consider how they interact with peers at break and lunch time – whilst you may not see this, consider if you ever have reports of disagreements with others during unstructured times or if they seem to be alone.

Does this young person seek to interact with other young people / peers or do they stand alone from others? Do they interact with both young people and adults or do they prefer just adults or just the company with other young people? If they struggle with this, please tell us what you see.

Imagine if you had never met this young person before, how would you describe what you see when they interact with other adults?

For communication, please include details such as if the young person communicates verbally or non-verbally, if they can give and maintain eye contact and list any gestures or actions you might see from them. It would be helpful to know if they are reciprocal with others – if the conversation is two way/one sided/ with one person at a time/more than one person at a time? If you feel there is anything unusual in their communication style, then please describe what you’ve observed.

**SECTION C - Imagination and Rigidity**

**Does the student have difficulty with the 'Theory of the Mind' which is understanding that others have different thoughts, feelings, intentions and points of view from their own? This means that their interpretation of others can be perceived as unpredictable and confusing. How does the young person tackle imagining alternative outcomes to different situations or predicting what will happen next, based on social rules, rather than the rules of logic. This is something that may be possibly seen more during creative lessons.**

**SECTION D – Learning and Academic Ability**

**Neurodiversity is distinctly different from intelligence but may impact on the student’s ability to learn in a mainstream classroom. It is therefore useful to consider the following questions in responding to this section. Does the student show a preference for certain learning styles or for specific staff members? Does the classroom environment have an impact on the young person’s engagement? Are there lessons/subjects that the student excels in or struggles more with? Are there any themes to the subjects e.g. more academic / more creative or practical. Is the student on track to hit end of Key Stage expectations? Do they receive academic support to scaffold their learning? Please describe with examples.**

**SECTION E – Attention and Concentration**

Most adults and young people have different levels of concentration, both in how long they can focus for and what on. This could be quite typical behaviour. When giving examples around concentration, please detail how the level in concentration varies and how this is significantly impacting on their school life. Try to give examples that show a level of concentration outside the norm where environmental factors have been taken away – for example, it is difficult for most people to concentrate on a tricky task if there is lot of classroom conversation so this wouldn’t be a fair example.

**SECTION F – Organisation and Co-ordination**

**Part of the transition to high school is organising yourselves with the relevant books and equipment needed for the day – does the student have everything they need or do they regularly forget or lose things? Does the young people have an awareness of time? E.g. if they were given five minutes for a task would that resonate with them? Is the student able to listen and retain task instructions and hold these in mind whilst completing the task or do they need instructions repeating? Is this young person able to sit and get on or are they always moving, either fidgeting or getting up from their chair etc?**

**SECTION E – Sensory Sensitivity or Sensory Seeking behaviours**

Please describe any sensory difficulties this young person experiences. It is helpful if you can recall when these became noticeable and what impact these have on the child’s daily tasks. Do you have any strategies to regulate these? For example, are there any changes you have made to lessen any sensory challenges?

**SECTION E – Behaviour**

Does this young person’s behaviour impact on school life, relationships with peers and staff and/or levels of stress? If yes, please indicate whether it is a lot of the time, most of the time or sometimes.

Please give examples here including when this behaviour started and how long it lasts for, e.g. this behaviour started just over a year ago and occurs every day. It usually lasts for an hour at a time.

Please note here any unusual mannerisms such as rocking or flapping of hands. You might also include any description of unusual posture.

Please describe any strategies you have used around these behaviours and have these been useful or not?

**Please also consider in this section if you have seen any evidence of tics / obsessions /compulsions**

Tics are involuntary movements caused by muscles twitching and also making involuntary noises or words. Please describe any tics and if they are still present. Include how long the duration of the tics are and if you have noticed any triggers for tics. Please note if they are distressing for the young person or not.

Compulsions are repetitive behaviours or mental acts that a person feels driven to perform in response to an obsession. What are these and can you describe them? How long have any obsessions or compulsions been present and are they constant or do they change? What impact are these having on the young person?

In this section, you can include any aggressive behaviour to self or others including self-harm or suicidal thoughts. What is their awareness of their environment and any potential risks? Please describe the frequency of any risky behaviour and how this isn’t appropriate for the environment.