Bromley Healthcare
community first

Please scan and email your completed questionnaire to **bromh.cypqueries@nhs.net**

COMPLEX COMMUNICATIONS DIAGNOSTIC SERVICE
SOCIAL SKILLS QUESTIONNAIRE FOR PRE-SCHOOL CHILDREN

As part of our assessment of children for the Complex Communication Diagnostic Service, we find it very helpful to have information about their social skills in their pre-school setting. We would be very grateful if you would fill in this questionnaire and return it to the address below. The parents are aware that we have sent you this questionnaire and we would recommend you share your comments with them.

Child's name: **DOB:**

Pre-school setting: _____

I have consent from parent/ carer to complete this questionnaire **YES / NO**

SOCIAL INTERACTION

How does the child interact with an adult in a one-to-one situation?

Does the child follow adult direction?

What things give the child pleasure, how do they show it and / or share it with others?

Have you noticed anything unusual about the child's eye contact?

Can the child take turns and share?

What does the child do in a group situation?

SOCIAL COMMUNICATION

Does the child respond to their name when you call them?

How do they indicate their wants or needs? (E.g. telling you, pointing, etc.)

What gestures/ facial expressions does the child use?

Do you have concerns about their understanding and use of language (please describe and give examples)?

To what extent will the child join in a conversation with you and / or their peers?

PLAY AND BEHAVIOUR

Please describe the child's typical play if undirected.

Describe the child's pretend play (e.g. feeding and dressing dolls, playing in home corner, dressing up, role play, play with miniature objects)…

Do they engage in play with other children, and, if so, how?

Does the child have difficulty with change?

Does the child have temper tantrums and, if so, what provokes them?

Does the child have any unusual or repetitive interests or activities?

Please use the space below to add any additional information you think would be helpful in our assessment.

Completed by ……. Signature …….....

Date……..

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