Reflections on the Application of the SCERTS model in Schools in the United Kingdom

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Abstract

During my professional experience as an Assistant Psychologist in a large urban educational psychology service (EPS) it became apparent that an increasing number of children and young people were experiencing needs relating to autism and social emotional mental health (SEMH). In response, the service introduced the SCERTS model (Social Communication, Emotional Regulation, Transactional Supports) (Prizant, Wetherby, Rubin, Laurent, and Rydell, 2006), to address an increased demand for support. I used SCERTS to assist qualified EPs with casework, observation, assessment, and meeting facilitation, which enabled me to develop a good understanding of the model, its application, its strengths and its limitations.This commentary provides a summary of my reflections on using the model.

The SCERTS model

SCERTS is a model, first published in the United States of America (USA), that is designed for children and young people with autism or similar difficulties. It draws on social motivation theory (Chevallier, Kohls, Troiani, and Brodkin, 2012) and appreciative inquiry (Cooperrider, 1986).

SCERTS provides a framework for understanding social communication; emotional regulation and transactional supports. The authors of the SCERTS model define social communication (SC) as "the development of spontaneous, functional communication, emotional expression, and securing and trusting relationships with children and adults", emotional regulation (ER) as "the development of the ability to maintain a well-regulated emotional state to cope with everyday stress, and to be most available for learning and interacting", and transactional supports (TS) as "the development and implementation of supports to help partners respond to a child's needs and interests, modify and adapt the environment and provide tools to enhance learning (e.g., picture communication, written schedules, and sensory supports). The SCERTS model allows specific plans to be developed to provide educational and emotional support to

families and to foster teamwork among professionals" (Prizant et al., 2006).

SCERTS incorporates two processes: the 'SCERTS Assessment Process' and 'SCERTS in Action', both processes are underpinned by the same theory and principles. This commentary focuses on the application of 'SCERTS in Action' as summarised in Table 1.

SCERTS process	Underpinning theory
Observation of child in two settings (ideally in an unstructured and structure setting by two different professionals)	Social Motivation Theory, e.g. Chevallier et al (2012)
Completion of SCERTS assessment forms by profesisonals	Social Motivation Theory, e.g. Chevallier et al (2012)
Collaborative outcome setting with all stakeholders, i.e., parents, school staff, EP, Speech and Language Therapists, etc.	Appreciative Inquiry, e.g. Cooperrider (1986).
Six to twelve weeks of implementation	SEND Code of Practice (DfE and DoH, 2014) Assess, Plan, Do, Review (ADPR) process.
Review of outcomes	SEND Code of Practice (DfE and DoH, 2014) Assess, Plan, Do, Review (ADPR) process

Table 1: SCERTS in Action process with underpinning theory.

This commentary explores the theory and evidence base behind SCERTS, before considering how it in relation to the Special Educational Needs and Disabilities (SEND) Code of Practice (Department for Education and Department of Health, 2015) and its implementation in an EPS.

Theoretical basis for SCERTS

SCERTS is underpinned by the neuropsychological theory of social motivation (Chevallier et al., 2012). This theory proposes that typically developing individuals are biologically predisposed for social orienting, social reward, and social maintaining due to brain structures and hormonal release. It is suggested that, in children and young people with Autism, these three areas can be diminished, which results in them losing out on full benefits of natural learning opportunities which may, in turn, lead to social and emotional impairments (Chevallier

et al., 2012).

As part of the SCERTS programme, this theory is explicitly shared with the adults who are close to the child or young person, to support their understanding and engagement. This can help to shift adults' understanding of children and young people with autism or similar difficulties, by placing an importance on motivating them to seek out adults for social communication or emotional regulation rather than focusing on typical everyday routines i.e., sitting on the carpet.

The research underpinning the theory of social motivation is still in the early stages and not all neuroimaging studies are producing consistent findings. This means that the theory may evolve over time (Chevallier et al., 2012). There are also broader concerns regarding the application of neurological research in educational settings, for example, Goswami (2006) suggests that not all neuroscientific training is grounded in a firm scientific evidence

It is important to note the SCERTS model does not need to be delivered and facilitated by neuroscientists and that EPs do not necessarily have access to the most current neuroscientific academic literature. It is therefore important to encourage educators to think critically about neuroscientific theory to avoid doing so in a reductive way (Busso and Pollack, 2015).

Evidence base for the use of SCERTS in the United Kingdom

The evidence base for SCERTS is explored at two different levels. The evidence base for SCERTS is comprised of more general research that explores the use of transactional supports and research that explores the impact of the whole SCERTS approach.

There is a significant body of research investigating the effects of 'transactional supports' on social communication and emotional regulation. Begeer, Rieffe, Terwogt, and Stockmann, (2006) found that when children and young people with autism were given direct instruction to focus on emotional expression, the difference between them and their control group reduced in comparison to when no direct instruction was provided. Bono, Daley, and Sigman, (2004), meanwhile, found that children and young people who were better able to respond to bids for joint attention showed great development of language skills when appropriate intervention was put into place. SCERTS looks at joint attention under social communication and can form part of focus areas for outcomes. Some studies have also found a link between the communication skills of children and young people with autism and how attuned parents were during early play, (e.g. Siller and Sigman, 2002).

It is relevant to note that these studies were predominantly conducted with males with autism, and that research has suggested there may be sex differences in the presentation of children and young people with autism; it was found parents rated girls as displaying more difficulties with social interaction, thought processing and attention (Holtmann, Bolte, and Poustka, 2007). Further research into the impact of focusing on the target areas of the SCERTS in girls with autism would be beneficial.

Studies that have considered the specific impact of the SCERTS approach have indicated that it can be a positive resource that can be used to support the people who know a Child or young person well with addressing their key areas of need. For example, Molteni, Guldberg, and Logan (2013) and O'Neill et al. (2010) used focus groups and semi-structured questionnaires to gather the views of adults involved in the implementation of a SCERTS programme.

Molteni et al., (2013) found that 89 percent of participants reported they were comfortable with using the model, with 78 percent reporting it had a positive effect on their collaborative working. They also found that participants viewed SCERTS as a positive and well-designed model. The study found that participants felt the SCERTS manual was quite large and saw this as a potential barrier to its use.

O'Neill et al., (2010) reported similar findings showing improvement across 4 of the skill areas measured by SCERTS. They also found a positive shift in how children and young people were viewed by staff members. Participants in this study identified time constraints as a possible barrier to implementation.

Further research has been conducted into programmes which are similar in design to SCERTS. For example McConachie, Randle, Hammal, and Le Couteur, (2005) evaluated a programme that trained parents to develop their skills to support their children with social communication and emotional regulation. They found that this programme had a positive impact on children and young people with autism particularly for their social communication development. Although the study did not directly examine SCERTS, there are similarities. For example, the programme used transactional supports to upskill and adapt approaches the parents already used; a key feature of the SCERTS approach.

There is a developing evidence base to support the effectiveness of SCERTS in the UK, in addition to the existing US evidence base, where SCERTS was first used.

United Kingdom legislation and policy

The SEND Code of Practice was introduced by the Department for Education (DfE) and Department of Health (DoH) in 2015. It provides "statutory guidance for organisations which work with and support children and young people

who have special educational needs or disabilities".

SEND Code of Practice (DfE and DoH, 2015)	SCERTS Model
Section 5.38 and 6.44 Graduate Response is a four-part cycle of assess, plan, do, review	The structure of the model involves observation (assess), outcome-setting meeting (plan), 6 – 12-week implementation (do), review of outcomes (review)
Section 2.21 Local authorities should offer key working approaches to all service users, which can include facilitating multi-agency meetings.	SCERTS model encourages all stakeholders involved with the child or young person to be present, when an EPS facilitates this meeting, they are complying with section 2.21
Section 9.23 A person-centred approach ensures children, young people and their families are involved in planning and decision making	SCERTS model place families as experts and at the centre of the process, therefore they actively involved in the outcomes that are collaboratively set for the child or young person.

Table 2: Comparison of the SEND Code of Practice (DfE and DoH, 2015) to the SCERTS Model (Prizant et al., 2006)

As summarised in Table 2, there are clear links between SCERTS and the SEND Code of Practice (DfE and DoH, 2015). However, the extent to which the requirements of the Code are met depends on how the model is implemented. For example, in practice SCERTS might not not always multi-agency; as despite best efforts, it is not always feasible or possibleto bring together all external agencies. In addition, whilst the person-centred approach of SCERTS means that children, young people and their families should be involved in planning and decision-making processes, children and young people with significant SEND are not always actively involved in planning their support.

Practical implications

From an implementation science perspective, (Kelly and Perkins, 2012) a strength of SCERTS is its use of Appreciative Inquiry (Cooperrider, 1986) which means all stakeholders in the life of the child or young person are involved in outcome-setting. Stakeholders who are actively involved in planning interventions are, in theory, more likely to implement what has been agreed. In practice, stakeholders may not always implement strategies properly or consistently. This could be

due to whether the stakeholders feel supported in implementing the strategies or whether the intervention fits within school policy and resources (Forman, Olin, Hoagwood, Crowe, and Saka, 2008).

One criticism of SCERTS has been that it includes a relatively high amount of paperwork. In my experience, this was sometimes a barrier to the uptake. Some professionals needed support to identify which documents were necessary for the model to run appropriately and to understand some of the intervention-specific terminology.

Conclusion

Through the sharing and application of neuroscientific research, SCERTS has helped to shift the views of stakeholders' in relation to children and young people with autism social and emotional impairments within the UK Educational system. It has shown that it is possible to apply neuroscientic research effectively when professionals remain up to date with the research, are mindful with how they are sharing the theory, and are not using it in a reductive way to explain children and young people's needs. SCERTS highlights the importance of involving all stakeholders and that this collaborative and active involvement will increase the likelihood of practitioners implementing strategies.

Educational psychologists are well placed to share the SCERTS model with school staff and families, and can help to facilitate the running of the model with children and young people. By working as 'scientist practitioners' EPs can enable a deeper understanding of the neuropsychological basis and research evidence for SCERTS, as well as supporting critical thinking. For future practice it may also be useful to consider how the materials, literature and paperwork that accompany SCERTS can best be introduced to stakeholders.

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