

**Definition:** (NICE Clinical Guideline 72, September 2008)

ADHD / ADD is a behavioural syndrome characterised by the core symptoms of inattention, hyperactivity and impulsivity. Not every person with ADHD has all of these symptoms – some people are predominantly hyperactive and impulsive; others are mainly inattentive. Symptoms of ADHD vary in severity; only those people with at least a moderate degree of psychological, social and/or educational or occupational impairment in multiple settings are diagnosed with ADHD. Determining the severity of ADHD is a matter for clinical judgement, taking into account severity of impairment, pervasiveness, individual factors and familial and social context. Symptoms of ADHD can overlap with those of other disorders.

**Characteristics seen in the classroom:**

- \* Intelligent lateral thinkers
- \* Often excellent in computer skills
- \* Quite verbally gifted
- \* Distractible and demanding
- \* Clumsy
- \* Difficulties socialising and making friends
- \* Being easily distracted
- \* Has a LOT of energy, and is perhaps Hyperactive
- \* Can't sit still very long
- \* Is fidgety, talks a LOT, can be LOUD
- \* Is very impulsive, does not think before they act
- \* Has trouble waiting their turn in line, or in games and more...
- \* Has difficulty holding information in short term memory
- \* Difficulty with organisational and planning skills
- \* Emotions may become

**Where to go for help:**

- Speak to class teacher / SENDCo in the first instance
- Educational Psychology Service
- CAMHS



**Social, Emotional and Mental Health Difficulties  
ADHD / ADD**



**Assessment and Diagnosis:** Diagnosis should only be made by a specialist psychiatrist, paediatrician or other healthcare professional with training and expertise in the diagnosis of ADHD / ADD. Diagnosis should be based on:

- \* A full clinical and psychosocial assessment. Discuss behaviour and symptoms in the different domains and settings.
- \* A full developmental history, and observer reports and an assessment of mental state. Diagnosis should be made when symptoms of hyperactivity/impulsivity and/or inattention:
  - \* meet the criteria for the disorder
  - \* are associated with at least moderate psychological, social and/or educational or occupational impairment based on interview and/or observation in multiple settings, and
  - \* are pervasive, occurring in at least two settings.

As part of the diagnostic process, include an assessment of needs, coexisting conditions, social, familial and educational or occupational circumstances and physical health.

**Frequently used Interventions:**

- \* Skills training e.g. anger management, language skills, relaxation techniques, listening skills, attention training
- \* Behaviour support
- \* Medication, such as Ritalin or Concerta
  - \* Slowing down
  - \* Managing time
  - \* Yoga and relaxation
- \* Sessions broken down into smaller units / chunks
- \* A well organised, structured learning environment
- \* A calm, yet flexible atmosphere
- \* A consistent approach to managing behaviour