

# ADHD Assessments

Neurodisability Team  
Ryegate Children's Centre

Your child/ young person is on the waiting list for an assessment for possible Attention Deficit Hyperactivity Disorder (ADHD). The wait for an assessment can be long and we know that this is a difficult and frustrating time for your child and family.

This booklet is designed to help you understand:

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# What is Attention Deficit Hyperactivity Disorder (ADHD)?

ADHD is characterised by symptoms of hyperactivity, impulsivity or inattention, or by a combination of all three of these. For a diagnosis these key symptoms must be getting in the way of both home and school life. There must be evidence that these key symptoms are out of line with your child's learning ability.

All children can at times present with challenging behaviour. It is important to note that ADHD is not just poor behaviour but a medically recognised and treatable condition.

## What might I see if my child may has ADHD?

### Hyperactivity:

Children with ADHD will often find it very hard to be still, even in sleep! Such children are often described as being 'driven by a motor' or always on the go. This may demonstrate its self as fidgeting and fiddling or running and climbing where it is not always appropriate to do so. This often creates difficulties with the classroom where children can often also wander or leave their seats.

In girls hyperactivity can be more subtle, for example excessive talking and giggling or small movements such as hair twirling and foot tapping that may be more difficult to spot.

### Inattentiveness:

Younger children may have difficulty listening and following instructions. They may be very easily distracted away form a task. This means that they often find it difficult to

settle and play unless the task is something that has a strong interest or reward for them. This presents itself as flitting between games and activities.

In primary school, children may find it hard to follow the instructions given within lessons so often begin to miss information. They struggle to start and complete work so may appear to be fall behind academically. Teachers also may note daydreaming.

Children, particularly girls, with a mainly inattentive profile can be very difficult to identify in a busy classroom.

Difficulties can become apparent for the first time following the transition to secondary school, particularly for more academically able children. This is often due to increased demand and expectation to be organised and cope in a more socially and academically complex world.

Poor organisation and processing of information often leads to forgetting or losing the required equipment such as PE kit or mobile phones, failing to complete homework and not meeting expected deadlines. This can sometimes lead to feeling overwhelmed, tired or even anxious at the end of the school day.

Older children may also describe 'mind-wandering'. This is characterised by losing focus and drifting away from the topic to their own thoughts. This may be noted by peers and parents in conversation as even talking on a one to one basis may become difficult.

## Impulsivity:

Younger children may present with little or no danger awareness. This, when combined with hyperactivity may lead to impulsively running off and climbing in dangerous situations. They are not likely to have age appropriate road or home safety awareness. This can require a significant degree of supervision beyond an age expected level as they are more at risk of accidents.

For primary aged children, impulsivity can present as a problem in the classroom as well as the home. They can often be perceived as disruptive due to impulsively calling out and interrupting, often speaking over the teacher. They appear to be very impatient so struggle to wait their turn within queues or take a turn in games and class discussions. They act without thinking about consequence so can be very vulnerable amongst their peer group.

By secondary school as well as all of the above, impulsivity can become more obvious as young people are more likely to make inappropriate lifestyle and friendship choices. This can make them increasingly vulnerable as are often easily convinced to engage in more risky activity. They may have particular difficulty interpreting and managing social media.

ADHD is a neurodevelopmental condition. It will change according to the child's age and stage. It is a highly hereditary condition so there may be a family history or others within the family who have features or a diagnosis. It is also common for children with ADHD to have co-existing conditions such as Autism, Dyslexia, General learning difficulties, Tics and motor difficulties, anxiety and oppositional behaviour as examples.

In order for a child to be given a diagnosis of ADHD, an ADHD assessment must first be carried out. There needs to be evidence of significant difficulties in the above areas. These areas of difficulty are known as the diagnostic criteria and are what we use to decide if a child's difficulties can be called ADHD. If children have significant difficulties in the above areas that interfere with their daily lives and are evident in different settings, they will be given a diagnosis of ADHD.

Some children may have difficulties in some or all of the areas but not at a level that causes a significant impairment. These children may not be given a diagnosis of ADHD but may still have significant difficulties and need support.

Further information about ADHD can be found at:

[www.nhs.uk/conditions/attention-deficit-hyperactivity-disorder-adhd](http://www.nhs.uk/conditions/attention-deficit-hyperactivity-disorder-adhd)

[www.adhdfoundation.org.uk](http://www.adhdfoundation.org.uk)

[www.addiss.co.uk](http://www.addiss.co.uk)

[www.nice.org.uk/guidance/ng87/informationforpublic](http://www.nice.org.uk/guidance/ng87/informationforpublic)

# What to expect at an ADHD Assessment:

In general, there are three parts to our ADHD assessment process.

## Part 1:

At the first appointment a paediatrician will take a detailed history from the parent or carer. This will cover information all the way from before your child was born to the present day. We will want to know about your child's health, their development and progress in their educational setting. We will also ask about yours and your family member's health. Due to Covid-19, this may be done via telephone or video link initially. You will have the chance to tell us about any concerns that you may have. You may be asked to fill out a short questionnaire with your paediatrician. Where possible the first appointment is face to face, or if not a video link, we will also aim to speak to your child. During this appointment we will try to build a picture their strengths and difficulties. Where the history might suggest ADHD, further investigations will be arranged.

## Part 2: Investigations used to diagnose ADHD:

The paediatrician will usually request both the parent or carer and educational setting to complete a specialist questionnaire that will give us information about your child's profile including and ADHD specific symptoms.

Usually a school observation of your child's functioning within the classroom is carried out by an ADHD specialist nurse, however due to covid-19 we may also have to gather information in different ways when this is not possible.

We also request information from your child's educational setting about their learning progress, social interaction and any ADHD symptoms observed as well as strengths and difficulties.

Some children may be asked to attend Ryegate for a computerised test of ADHD symptoms (QB testing). Where it is not possible to carry out a school observation, QB testing will be offered in most circumstances as an alternative.

## Part 3: initial Feedback

An appointment will be offered with a paediatrician to discuss the investigations carried out. Due to Covid-19, this may be via video link, telephone or face to face. There are different possible outcomes from the feedback.

- Your child may be given a diagnosis of ADHD

## What if my child doesn't get a diagnosis of ADHD?

- Your child may be given an alternative diagnosis that better describes their difficulties
- Your child may need further assessment in order to clarify if they have ADHD
- Your child may need further assessment for other conditions.
- Your child may have a mixture of difficulties that do not neatly fit under one diagnostic heading and may need a description of their difficulties that can be used to inform what help and support they may need.

### Help with video appointments:

<https://www.sheffieldchildrennhs.uk/patients-and-parents/outpatients/video-appointments/>

Link to Sophie's guide to video appointments/tips etc.

### Preparing your child for a face to face appointment:

<https://www.sheffieldchildrennhs.uk/patients-and-parents/coronavirus-resources-for-children-and-families>

## What happens if your child gets a diagnosis of ADHD?

If all of the information collected is consistent with a diagnosis of ADHD you will be given a short letter confirming the diagnosis and the next steps.

You will be offered a link to our colleagues at an organisation called family Action. They provide an initial meeting to discuss what is available to support you and your

child here in Sheffield. Following this you will be invited to attend a parent support group titled 'Managing ADHD'. You will also receive some input from our specialist nurses through this course. Due to Covid-19, this is currently being delivered virtually in groups via the internet.

Your Paediatrician, with your permission will write to your child's educational setting to inform them of the diagnosis so that specific support strategies can be put into place.

Some children will be offered medical treatment (medication) for their ADHD. Information is given regarding this by our specialist nurses in the Managing ADHD group. You will also be given the opportunity to discuss this in full with your child's paediatrician, who will carry out a face to face review, physical examination and health check before any medication is started.

Your child will then receive ongoing follow up in both medical or nurse led clinics. You will also be given the contact details of the ADHD nursing team who are able to provide ADHD related telephone support and advice as well as school liaison when required.

## Practical Advice for home and school

Practical advice and how to manage features of ADHD both at home and school can be found at [www.adhdandyou.co.uk](http://www.adhdandyou.co.uk). The resources are suitable for parents, teachers and children and are a very helpful guide on behaviour management.