

## **Additional Support / Route to Diagnosis – ADHD and related conditions**

The NICE (National Institute for Health and Care Excellence) Guidelines for assessment of suspected ADHD are detailed below:

**The formal diagnosis and treatment of ADHD should be carried out by a specialist. However, some children, with symptoms that are causing only a moderate impairment to their ability to function socially and at school, can initially be managed in primary care with self-help, simple behavioural management, or parent support programmes.**

**If ADHD is suspected in a child:**

**Assess the social and educational impact of their symptoms.**

- For school-age children, the extent of impairment should be judged in the context of self-care (for example eating, or hygiene), travelling independently, making and keeping friends, achieving in school, forming positive relationships with other family members, developing a positive self-image, avoiding criminal activity, avoiding substance misuse, maintaining emotional states free of excessive anxiety and unhappiness, and understanding and avoiding common hazards.
- For adolescents, difficulties may extend to cover occupational or educational underachievement, dangerous driving, and difficulties in carrying out daily activities (such as shopping and organizing household tasks), in making and keeping friends, and intimate relationships (for example, excessive disagreement).
- Primary care practitioners with appropriate training/expertise may wish to augment this assessment using the Strengths and Difficulties questionnaire or the Conners' rating scale. Strengths and Difficulties Questionnaires for different age groups can be found as PDF files on [www.sdqinfo.org](http://www.sdqinfo.org) and the Conners' rating scale is available to purchase from [www.pearsonclinical.co.uk](http://www.pearsonclinical.co.uk).

**If symptoms are having an adverse effect on the child/young person's development or family life, options include:**

- A period of watchful waiting of up to 10 weeks and encouraging self-help and simple behavioural management.
- Offering parents or carers a referral to group-based ADHD-focused support.

**Refer children to a CAMHS professional, specialist paediatrician, or child psychiatrist if:**

- Symptoms are severe.
- A period of watchful waiting is not acceptable.
- Behavioural and/or attention problems persist with at least moderate impairment following a period of watchful waiting or a parent support programme.

In order to support these guidelines and following the guidance of Cambridgeshire Child, Adolescent Mental Health (CAMHS) we follow the pathway described below to both offer appropriate support to the young person, and to seek a potential diagnosis.

### **Initial Profiling/Baseline of abilities**

The first step in the process is to carry out initial profiling and assessments which could include the following dependant on the students need:

- Boxhall Profile – online assessment tool for Social, Emotional and Behavioural Difficulties in young people
- Various profiling assessments to identify any underlying learning needs
- Connors 3 rating scales – this is used to help guide diagnostic decisions, and screens behaviours typical of a person with ADHD. This tool does not provide a diagnosis but would suggest if further investigation would be valuable.

### **In School Support Plan (Assess-Plan-Do-Review) Minimum 1 term**

- Behaviour Support Plan / Social / Emotional Interventions advised by Boxall Profile and Connors 3 screening tool.
- Additional interventions (literacy / numeracy support) if required, as advised by the profiling
- Pen Portrait with strategies to support class teaching team
- Possible allocation of Key Worker
- SENCO Collaborative working / planning / networking

### **Involvement of External Agencies / Parental Support (this is a requirement for diagnosis)**

- In order for CAMHS to consider a referral for assessment they need to see evidence of parental intervention, this takes the form of either attendance on a “Positive Parenting Programme” also known as Triple P parenting course, or the involvement of a Family Worker. Both options are accessed via the completion of an Early Help Assessment (EHA).
- Educational Psychologist Assessment (if appropriate)
- Education and Health Care Plan (EHCP) Application (if relevant).

### **Referral for Diagnosis**

- Neurodevelopmental Conditions: ASD/ADHD/Tourettes /OCD or related – **CAMHS (Child, Adolescent Mental Health Services)**

It is entirely possible that we get to stage 2 and find that this is an appropriate level of support for the young person and decide not to pursue a diagnosis further. In this case we would continue to review and monitor the support in place for the young person on a termly basis and modify as necessary.

If you have any questions or concerns, please contact Susan Kean, SENCO at [susan.kean@astreacottenham.org](mailto:susan.kean@astreacottenham.org).