



TEACHING AND  
MANAGING  
STUDENTS WITH  
**ADHD:**  
Systems, strategies solutions

Initiated and  
funded by



\*ADHD, attention deficit  
and hyperactivity disorder.

# How this booklet can **help**

**This booklet is useful if one or more of your students has been diagnosed with Attention Deficit Hyperactivity Disorder (ADHD).**

**Much has been written about ADHD from the medical, developmental and educational perspectives and you may have already received training on this subject. The aim of this booklet is to help all staff involved in teaching and learning to support students with ADHD in a positive and proactive way.**

**I have recently updated this booklet to make sure it is in line with the current thinking and practices. Although the educational and healthcare teams managing a student will be best placed to support their specific needs we hope that the following information will help in the process.**

**Fintan O'Regan**  
Educational Consultant

**Please note the information presented in the booklet is intended as a support to professional advice and care, it is not a substitute for medical advice and treatment.**

About ADHD 04

Teaching and managing students  
that have ADHD 12

Learning 18

Behaviour 26

Socialisation 34

Resources 40



# About **ADHD**

It is widely accepted that ADHD is a developmental condition that can be formally diagnosed.

ADHD is a term which is used to describe students who typically have the following problems:

- Overactive behaviour (hyperactivity)
- Impulsive behaviour
- Difficulty in paying attention and distractibility (inattention)

Students typically have a short attention span and so can find it hard to concentrate and learn, especially in group situations. This can impact on their education and many of these students underachieve at school.

It is important to recognise that not all students with ADHD have all the symptoms. There are three presentations of ADHD according to the American Psychiatric Association's diagnostic scheme (DSM V) classification.<sup>1</sup>

## The three presentations of ADHD:<sup>1</sup>

1

**ADHD (inattentive presentation) describes students who mainly have problems with concentration and attention span but who are not usually impulsive or overactive.**

2

**ADHD (hyperactive/impulsive presentation) describes students who predominantly have problems with overactive and impulsive development.**

3

**ADHD (combined presentation) is where symptoms from the ADHD hyperactive/impulsive and ADHD inattentive combine, and is the most severe form of the condition.**

ADHD is included in 2020 version of the SEND Code of Practice under the SEND category Social Emotional and Mental health.

*"I do things  
I don't mean to do...  
and it makes me  
stick out."*

**Jacob, 9**

## How do we know it is ADHD?

There are some pointers which lead medical and educational professionals to suspect a student has ADHD:<sup>2</sup>

### Inattention

- Difficulty following instructions or completing tasks
- Short attention span and difficulty 'sticking to' an activity
- Difficulty organising tasks and activities
- Easily distracted and forgetful
- Often doesn't listen when spoken to

### Hyperactivity

- Fidgets, is restless and can't sit still in class
- Can't stop talking, noisy
- Runs about when it is inappropriate

### Impulsiveness

- Interrupts others
- Blurts out answers without waiting for the question to be finished
- Difficulty in waiting or taking turns

In adolescence and adulthood, both those diagnosed and undiagnosed with ADHD in childhood are often associated with continuing emotional and social problems, including substance misuse, unemployment and involvement in crime.



## What causes ADHD?

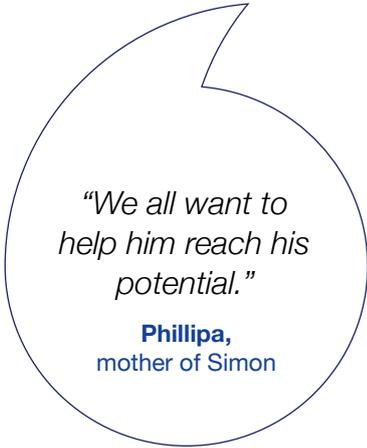
ADHD is a well recognised developmental disorder that may result from a number of risk factors. It is often inherited and genetic factors can have an influence in the causation of the majority of students with ADHD.<sup>1,2</sup> It tends to run in families and there is an increased frequency of ADHD in first-degree relatives of students with ADHD.<sup>1</sup>

Other risk factors include low birth weight, smoking, taking opioids or drinking alcohol during pregnancy, brain injury and lack of oxygen at birth, as well as some conditions such as epilepsy.<sup>3,4</sup>

## How many students are affected?

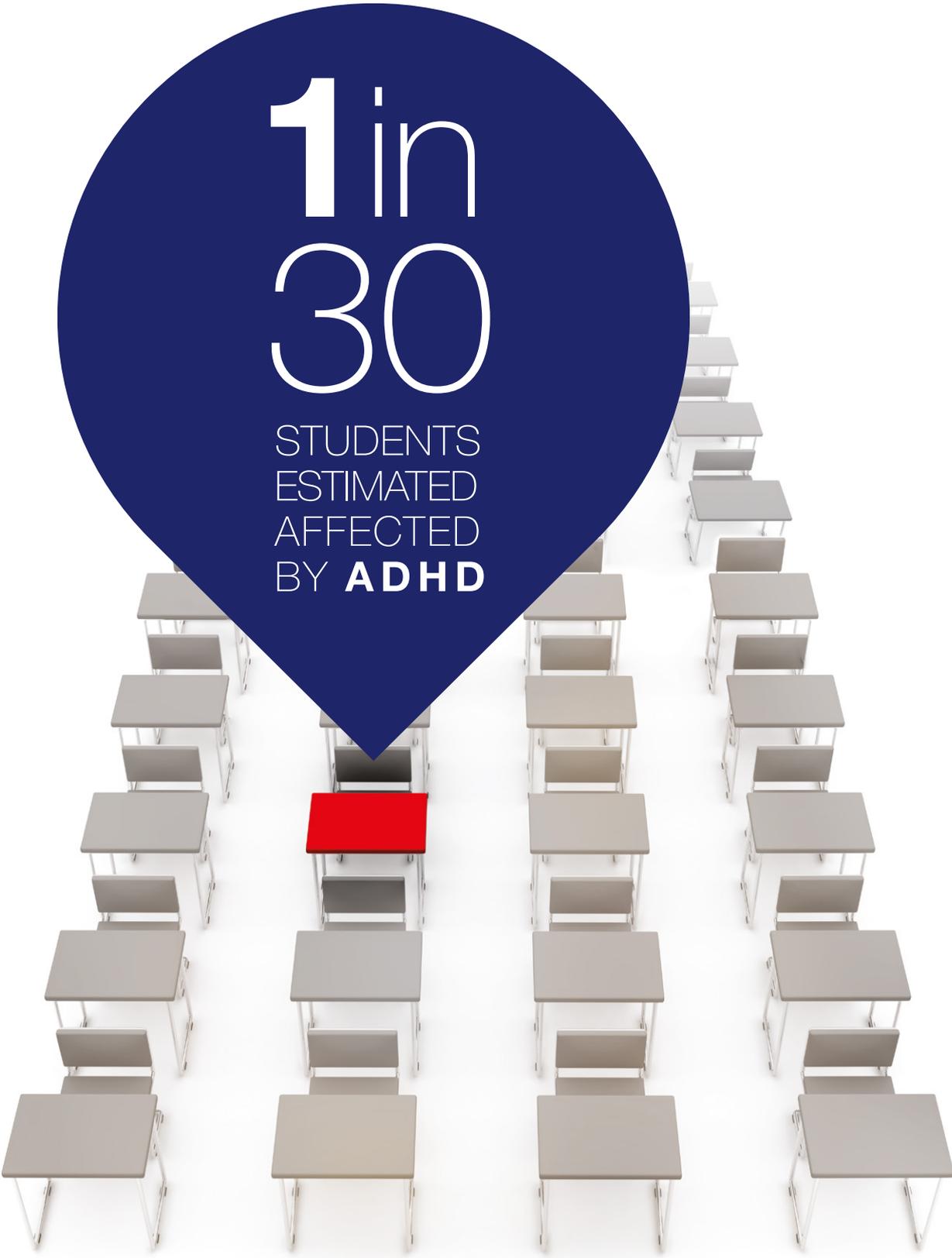
ADHD is estimated to affect about 2-5% (around 1 in 30) students at school.\*<sup>2</sup> The 'core symptoms' are usually present before the student is 12 years of age and can persist throughout their school life.<sup>1</sup>

ADHD is more common in boys than girls (by 6:1).<sup>5</sup> In some cases the condition can seem to affect genders in different ways. Though both can have attentional problems, boys are often reported as exhibiting overactive features and as a result can be perceived as more difficult to manage. Though girls with ADHD can exhibit hyperactive and impulsive symptoms, a number with Inattentive symptoms are harder to detect in busy classrooms. As a result their needs are often overlooked.



*"We all want to help him reach his potential."*

**Phillipa,**  
mother of Simon

A 3D-rendered classroom scene with rows of grey desks and chairs. A large dark blue teardrop-shaped graphic is overlaid on the top half of the image, containing white text. In the center of the classroom, one desk is highlighted in red, representing the '1 in 30' statistic.

1 in  
30

STUDENTS  
ESTIMATED  
AFFECTED  
BY **ADHD**

*\*In a non-selective mainstream school*

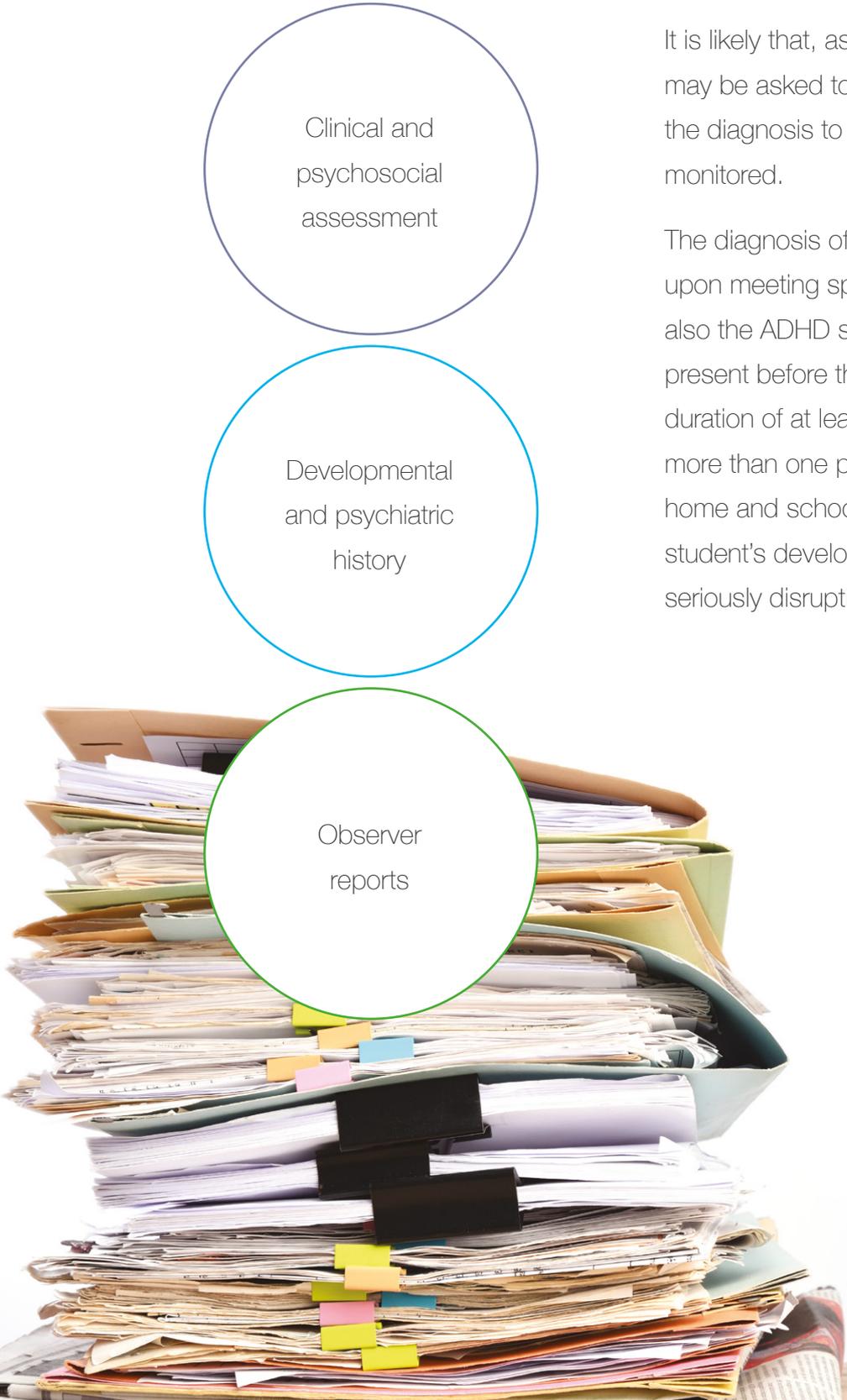
## Is it definitely ADHD?

Unfortunately, as there is no one definitive clinical test for ADHD, diagnosis can be difficult. Many students have problems with self-control periodically and it is difficult to know when this is 'ordinary' development or when it could be as a result of ADHD.



There may be other causes of disruptive behaviour such as dyslexia, language or hearing difficulties or conduct disorder which need to be considered (although these problems may also affect students with ADHD). For these reasons, a diagnosis of ADHD should only be made by a Child and Adolescent Psychiatrist, Paediatrician or other appropriately qualified healthcare professional (HCP) with training and expertise in the diagnosis of ADHD and other mental health conditions.

## ADHD diagnosis requires:<sup>2</sup>



Clinical and  
psychosocial  
assessment

Developmental  
and psychiatric  
history

Observer  
reports

It is likely that, as the student's teacher, you may be asked to provide information to enable the diagnosis to be made or progress to be monitored.

The diagnosis of ADHD can be confirmed upon meeting specific criteria (DSM V) and also the ADHD symptoms must have been present before the age of 12 years, for the duration of at least 6 months, occurring in more than one place (for example both at home and school), not appropriate to the student's developmental age and must be seriously disruptive to their performance.<sup>1</sup>

## What problems can ADHD cause?

The impact of ADHD goes beyond 'inappropriate behaviour' and problems at school.<sup>1</sup> ADHD is a developmental condition that presents difficulties for the student and those around them.<sup>1</sup> A diagnosis of ADHD will often lead to students being labelled as 'difficult, demanding and defiant' and stigmatised to a greater or lesser extent. Students with ADHD stand out from their peers and can struggle to 'fit in' at all stages of development and the impact of the condition and diagnosis can extend to their families and carers.<sup>6</sup>

## Students with severe ADHD can:<sup>6</sup>

Have low self-esteem

Underachieve at school

Develop emotional and social problems

Be at risk of school exclusion<sup>7</sup>



## Are there any other problems?<sup>1</sup>

ADHD affects students in different ways and can often overlap with other learning and/or behavioural conditions.

Students with ADHD often have other problems. Several other conditions can co-exist or overlap with ADHD:

- **Oppositional Defiant Disorder** (the student is often defiant, oppositional, argumentative, angry, loses temper etc.)
- **Conduct Disorder** (there are problems such as persistent and repetitive lying, stealing, truancy, bullying, vandalism, starting fires etc.)<sup>3</sup>
- **Learning disorders**
- **Developmental Co-ordination Disorder** (co-ordination difficulties)
- **Autism Spectrum Disorder/Asperger's syndrome** (social and communication difficulties)
- **Anxiety**
- **Depression**
- **Tourette's Syndrome** (the person has tics, involuntary and uncontrollable movements and sounds)
- **Sleep problems**

*"I drift off for a few minutes... when I come back round, everyone is two pages ahead of me."*

**Lucy,**  
11

# Teaching and managing students that have **ADHD**

## How does a student with ADHD feel?<sup>1,8</sup>

**One of the most important stages in teaching and managing a student with ADHD is to try and understand how they may see the world around them.**

Students who have ADHD explain that they get lots of different thoughts at the same time. It's confusing and they are always in trouble with someone. They feel unpopular and know that sometimes they are difficult to like.

From the student's point of view, nobody seems to understand them.

*"I get picked on every day. I just get treated weird, like an alien."*

**Jack,**  
13

*This is how they feel*

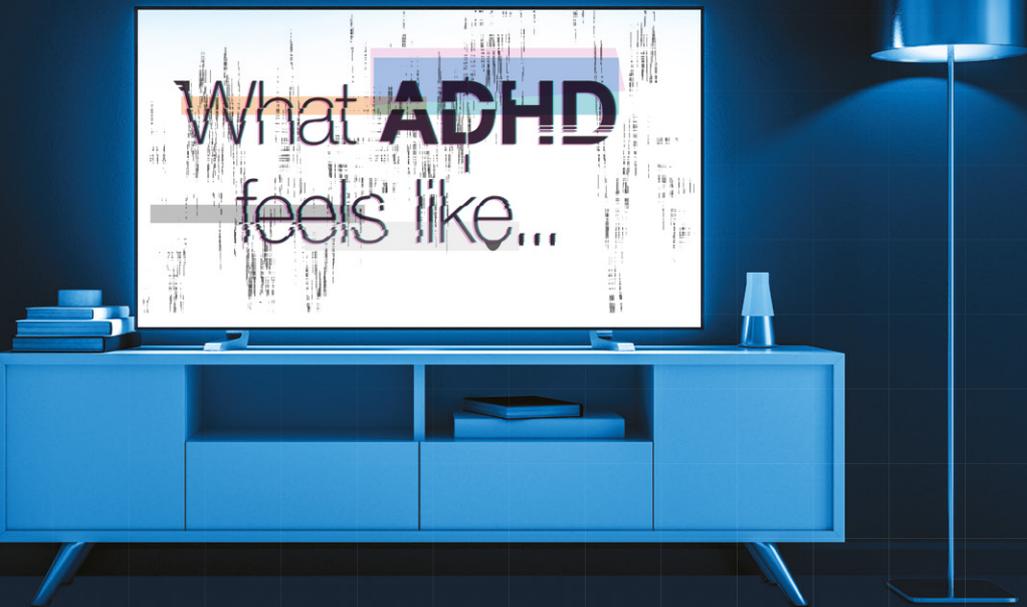
**You seem to get the blame for everything. It's miserable and unfair.**



It's hard making and keeping friends. At school, other kids wind you up because you are different.

Adults are always annoyed because you've forgotten something or done something silly. They spend ages telling you off and making you feel stupid.

If you had some type of physical disability that people could see, they'd understand, but as they can't see that your brain isn't receiving a perfect signal, you don't get any sympathy at all.



ADHD is like a TV set that isn't receiving a perfect signal. For the student, it's as if the channel keeps changing. Imagine you are watching the news on BBC1. Suddenly, somebody picks up the remote control and flicks over to ITV. A second later the programme changes to Channel 4 and then back to BBC1. Then it switches to BBC2.

If you were asked about the news on BBC1 you might find it hard to remember. For a student with ADHD, the world is a constant stream of changing images and messages. It's difficult to focus on one thing at a time because something new is always coming along. It's all rather bewildering and it's hard to keep pace.



*"I'm spending most of the class time every single day with one student; it's just not fair on the others."*

## How do teachers feel?

A student with ADHD presents every teacher with a challenge; but ADHD can also present an opportunity to find ways of teaching and managing the student successfully.

Of course, it can be frustrating when a student seems to be constantly fidgeting, jumping up from their seat, interrupting and disrupting the whole class. It's natural for you to feel that one student is in danger of holding all the others back.

Fairness is not giving every student the same, instead it is giving every student what they need. Students with ADHD will usually have a greater level of need than their peers.

The key is to find the correct balance.

## Adding to the frustration, the student with ADHD:

- Is distractible and distracting to others
- Presents work that is sloppy or incomplete and homework that is late, lost or ignored
- May often rock on his/her chair
- May often lose books and materials
- May often show a recklessness and impulsiveness that is 'scary'
- May make inappropriate comments that cause conflict and offence with classmates
- Is often a victim of teasing and bullying, as they are often perceived as strange or quirky

As a teacher, you are an expert at dealing with a range of students and different types of learners and will have plenty of experience of managing challenging behaviour. You will probably find that the methods you already use with challenging students will benefit some students with ADHD, but you may want to consider additional solutions to manage specific cases.

## One approach that may help teachers

The development of a student with ADHD can be frustrating and annoying; the key issue to accept is that the student is not doing it on purpose. ADHD is a genuine medical condition that requires specific support depending on severity of the symptoms. Understanding and acceptance of ADHD together with the desire to adapt teaching and learning strategies can enable many students with ADHD to learn more effectively.

Since students with ADHD are often in trouble, they are unable to deal with criticism and can become defiant and hostile. This can damage their whole attitude to school and to learning, and they may ultimately give up on education. It's very important to show that education has not given up on them.

One technique that can help is to reframe the condition by looking at the issues of ADHD as not so much a problem but as an opportunity. Here the key principles are to look for the positives wherever possible.

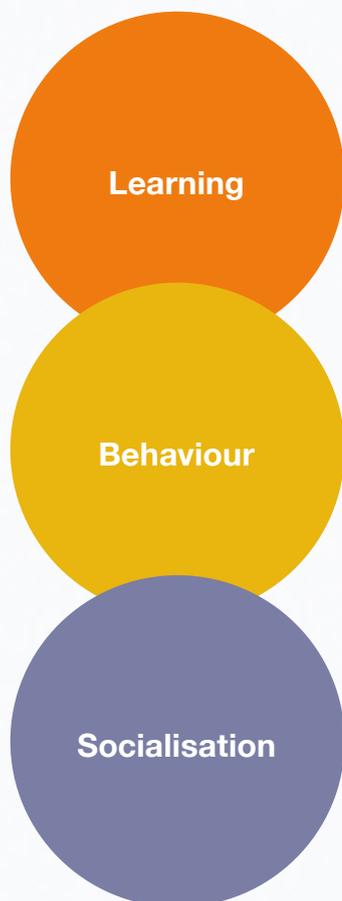
## Reframing ADHD

It's not always easy or possible to review issues that irritate us in a positive way but it may be helpful to attempt to do so, for example:

- Think of the student who is easily distracted as having high levels of awareness and observation
- Think of the restless student as being energetic and lively
- When the student with ADHD goes off at a tangent, see it as a sign of individualism and independence
- If the student forgets things, consider that they've been absorbed in their own thoughts
- If the student starts interrupting, think of it as enthusiasm to contribute
- When work is sloppy, look for signs of effort despite difficulties
- Look on a student's apparent selfishness as single-mindedness in pursuit of goals
- Try to reward good development and ignore the development that you don't want

Although some teachers will find it difficult to see situations in this way, this growth mindset approach may help to maintain a positive relationship with students with ADHD.

**The three key elements of teaching and managing students with ADHD concern systems, strategies and solutions in aspects of:**



The following approaches can go a long way to maximising students' potential.





# Learning

## Set the right tone:

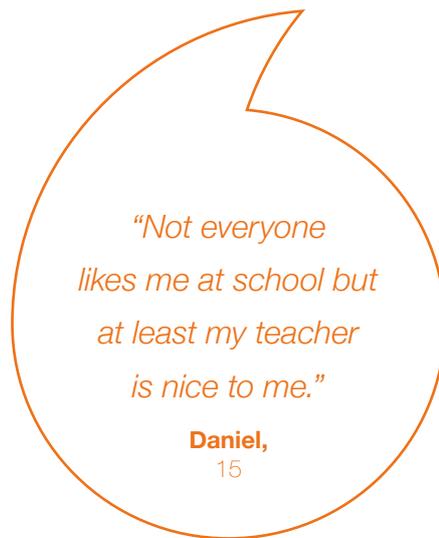
The way a teacher reacts to any student can strongly affect the way other classmates behave towards them. Although you may be very frustrated at times, it is best to try to show patience and tolerance. There's a greater chance that the whole class will follow your example, making the student with ADHD feel less isolated.

## How can we improve their skills?

With a differentiated approach to teaching and learning, you can help the student with ADHD who may be having difficulty with basic academic skills. The important thing is to help them organise their thoughts and to be aware of what is expected of them.

## In order to do this the two key attributes are:

- **Structure**
- **Flexibility**



## Developing structure

Students with ADHD feel safe and secure if they know what to expect. With regular routines and rituals, they become more familiar with what they need to do. The more you can keep to routines and rituals, the better. Any change simply creates distraction, uncertainty and confusion.

## How do we help them organise their thoughts?

A major problem facing students with ADHD is that they have problems expressing their thoughts verbally and on paper. They may also do things in the wrong order. Getting students with ADHD to learn how to develop a sequence of events in the right order will bring about real improvements in their academic performance.

One teacher talking about a student with ADHD said that *"He is like a computer without the printer attached. He knows the answer in his head but he can't give me the hard copy by writing it down on paper."*

A fun way of doing this is to ask the student to describe the sequence of events involved in various everyday activities; for example, you could ask them to explain step by step, how to clean their teeth, run a bath or play a computer game. You could also ask them to describe things in 30 seconds – like a day at school, their home or their favourite video.

## Getting students organised

Developing a sequence of events is important so students can learn how to get organised. They need to understand that things are meant to happen in a certain order. Always begin with a simple overview of what you want them to achieve. Then create a framework with simple steps so that the student knows what is meant to happen next. For some students it helps them to say out loud what they are about to do next.

## Supporting memory weaknesses

- Encourage your student to connect information or concepts being presented; for example, they're more likely to remember that someone who had six wives and was a famous English King and is called Henry is a Horrid Henry, as in the book series when they think of them
- Mnemonics can also be useful for remembering important facts
- Repeat directions individually
- Use visual maps
- Colour code their homework diary
- Use flash cards

### Make reminders and lists

Post-it notes®, student diaries and taping instructions to their book bags can all serve as memory prompts.

With adolescents it's a good idea to plan things with them in advance. You can also help them draw up a checklist of things to do. As they grow older, lists can make their lives much easier.

## Useful classroom strategies

There are a number of strategies that you can do in the classroom to help improve the performance of students with ADHD.

Obviously, how much you can do, will be restricted by the resources at your disposal, the size and nature of the classroom, the demands of the curriculum and the rest of the class, and the age of your students.

## Where should we seat them?

Students with ADHD tend to get over-stimulated when working in group situations.

Try the following:

- Pair them with less distractible students who are likely to follow the teacher's instructions
- Seat them near the front of the classroom away from doors, windows and other distractions or in an area of the room which may be more suitable
- It is often better to have them either sit at a single desk or at most a paired desk within the main classroom
- There should also be another area or workstation set up facing the wall and away from the main classroom area where they can learn as needed

## Giving previews

It is worth trying to give students with ADHD a preview of what is going to happen in tasks, projects and lessons. This will prepare them in advance of what will be expected of them and prevent them from a feeling of uncertainty and insecurity.

## Keeping them focused

As students with ADHD get bored easily, it is important to try and keep your educational content stimulating and varied. Also try to change your tone of voice and your pace of teaching presentations.

Students with ADHD tend to respond better to concrete learning experiences. They often have high levels of creativity and welcome the chance to learn independently.

Encourage them to tell you if they do not understand what they are meant to be doing. The key is to reinforce the instructions as many times as possible and to remain positive at all times.

## Are there typical classroom problems?

There are a number of typical problems facing the teachers of students with ADHD. Here are some techniques for dealing with them.

### Walking around the classroom

- Instead of trying to get students with excessive motor activity to remain still, find them opportunities for regular seat breaks
- If something needs to be written on the whiteboard, ask them to do it
- Give them a job or task that allows them to be active in a controlled way during the lesson

### Dealing with impulsiveness

As students with ADHD tend to act first and think afterwards, they may need help in processing their thoughts before responding.

## Encouraging attention

- Provide students with a brief outline of the lesson at the beginning
- During the lesson, try to include a variety of activities
- Break everything into short chunks
- In some cases it can help to have non-vocal music playing either in the background or through a headset device
- Reduce expectations of written work and use alternative ways of recording information
- Review design of worksheets and tests
- Present only one or two activities per page
- Avoid unnecessary pictures or visual stimuli
- Give prompts
- Provide alternative environments for tests and exams
- If attention seems to be waning, use special cue phrases to stimulate interest. Attention grabbers include “Right, here we go”; “Wait for it”; “Now for the interesting bit”; “The next clip is amazing”; “We’re nearly there now”

## This means learning to do things in three stages:



You can help students with ADHD by practising these processes with them. Take everyday situations stage by stage. It may help to get the student to verbalise everything they need to do.

### Calling out in class

Calling out and making inappropriate comments are common signs of impulsiveness. You may need to remind the whole class that doing this is unacceptable. If the student with ADHD continues to call out, don't address the student personally. Instead address the problem in general terms. You might say: "It makes things very difficult when people call out and interrupt me when I am talking". If you are running a reward scheme, establish a private signal in advance with the student so that they know that this sort of development will not win points. The signal could be something like visually tapping the reward card or some other pre-agreed sign.



## Encouraging better organisation

Students with ADHD typically have problems organising themselves and so they really need help with study skills:

- For daily routines, stick a timetable to their desk
- When they are working on projects, draw up a checklist to ensure every point is covered
- To avoid confusion, don't give them more than one assignment at a time
- Overall, concentrate on teaching them not what to learn, but how to learn it

## Helping students to settle

It takes time for students with ADHD to settle in different places. It can be difficult for them to wind down, especially after break time. Going from the relative calm of the classroom to the playground and back again can be quite difficult for students with ADHD to manage.

After a break, they may need to settle down for a few minutes before focusing on specific tasks. In some cases it is a good idea to ask them to come back 2 minutes before the end of break to help settle them before the next class. Changes to daily routines are also unsettling. If there is going to be a change, explain what's going to happen in advance.

## Dealing with fidgeting

It's hard to stop students with ADHD fiddling and fidgeting but it is helpful to be proactive rather than reactive to this. It is a good idea to give them something to fiddle with, such as spinners\*, squeezable balls, tangle toys or small building blocks.

\*If allowed in your school.

## Tips for learning and homework

It takes a student with ADHD about three times as long to do the same assignment in the home environment in comparison with the school setting.

With this in mind it is recommended that the following options should be considered for students with ADHD regarding homework:

- 1 Can homework be reduced or differentiated to that which is essential? Is the homework really necessary and if so can the amount or style be adapted for the student with ADHD? Perhaps more one word answers than essays or multiple choice answers for maths.
- 2 Can bonus points be provided for doing more? In some cases it will be necessary to have extended assignments and in this case can the school provide extra incentives for a student with ADHD to complete the task as this arrangement can help to provide additional focus to task.
- 3 Could there be ways of reducing writing requirements to that which is essential by using information technology? Writing tends to be a difficult skill for many students with ADHD. Providing another option for getting thoughts on to paper will be necessary. Encourage the use of technology to assist the homework process.
- 4 Can students stay at school to finish homework or complete it during the day? It may be more productive to have the student complete homework tasks at school where there will be more structure and fewer distractions.
- 5 Can parents be allowed to be a 'parent secretary' for students with handwriting difficulties? In some cases technology will not be appropriate and so if writing is a problem then look to use the parent to write down the thoughts of the student, but obviously not to do the work for them.

Overall, bear in mind that homework sometimes can be a "bridge too far" for some students with ADHD and so the main factors are to try to reduce the burden of homework away from the student and family as much as possible.

# Behaviour

## ADHD as an explanation not an excuse

The emphasis should be firmly placed on recognising where problems exist and finding ways to solve them. The approach should be solution focussed and on missed opportunities for effective learning and development.



## How can we get better development?

Students with ADHD do not have a problem with knowing what to do but rather a problem in doing what they know. As a result they need lots of praise and encouragement. Once they feel you understand their difficulties, they'll be more likely to work with you rather than against you.

## Getting the message over loud and clear

You will often need to address students with ADHD in the clearest possible way.

Here are some examples:

- Always address the student by name
- Keep all instructions short and simple e.g., *"Pick up your books please"*
- Try to make eye contact wherever possible
- Speak clearly and concisely, and maintain an even tone
- Don't ask why, say (for example) what should you be doing now?
- Also use when, then and either or; for example, *"Nathan when you have put the book away then you can have a drink, when you have put the chair under the table then you can go"*
- Then give your instructions in a simple step-by-step way, pausing between each step and perhaps giving them the chance to do each activity

## Tell them when they are good

Praise improves concentration skills in students with ADHD. When they do something well, tell them how pleased you are that they've done it. Praise in specific terms rather than generally e.g., *"That was a really interesting story with an exciting ending"* rather than *"well done"*. If they have behaved well during a lesson, say so but be precise about what they did when and where. Always remember to praise effort rather than ability.

## Setting up a reward scheme

Rewards change behaviour and students with ADHD respond very well to incentives tied to short-term targets.

- Agree certain achievable targets such as sitting still for 10 minutes
- Negotiate rewards with the student and vary them regularly to keep up the interest
- Make sure the rewards are age appropriate

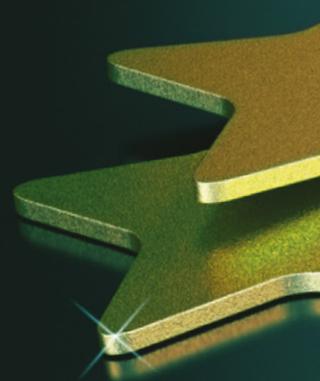
## Types of reward schemes

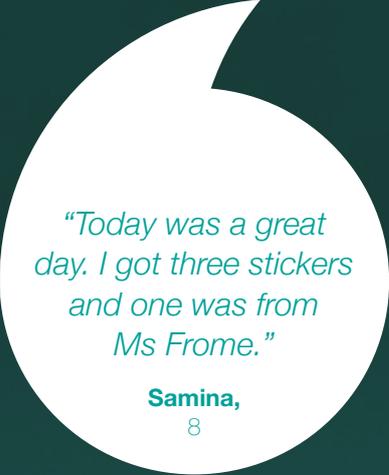
- Stickers and/or points
- A certificate of merit or acknowledgement from the head teacher at assembly
- Additional computer time
- A choice of activity
- Free time

Try to catch them being good and take every chance to help the student recognise their achievement. Reward schemes could be used by any member of staff who works with the student. But remember it's not just the reward that matters, it is often who gives the reward.

## Building on success

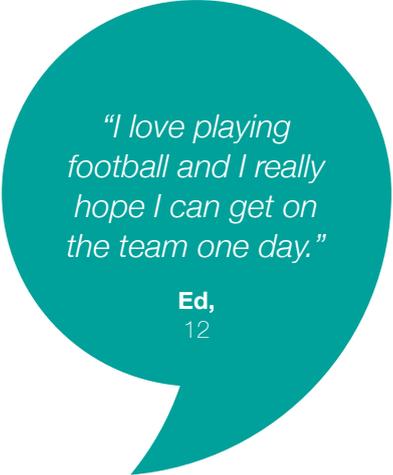
Usually there is something that students with ADHD do well. They may be good at painting, singing, swimming or computer games. Make your student feel he/she has a real talent. Create a feeling of success and it will boost confidence. Nothing succeeds like success.





*"Today was a great day. I got three stickers and one was from Ms Frome."*

**Samina,**  
8



*"I love playing football and I really hope I can get on the team one day."*

**Ed,**  
12

## Dealing with challenging development

Although you need some degree of flexibility in dealing with students with ADHD you will often still need to address challenging development. However annoying they have been, it is important to make sure the student feels that it is his/her poor behaviour that you do not appreciate and not the student personally, as students with ADHD may be hypersensitive in these situations.

## Rules and responsibilities

Many students with ADHD do not actually understand what is expected of them in terms of behaviour. So it may be helpful to sit down with the student to explain the issues specifically. Draw up a list of specific rules and responsibilities to address particular problems.

Be crystal clear on what is and what is not acceptable.



## What about discipline?

Students with ADHD often feel that they are being picked on.

- With discipline be specific. It's best to tell them what they should be doing rather than what they shouldn't; e.g., instead of saying *"Liam, can you stop talking and bothering Sadie?"* say *"Liam, please listen to me and finish the writing in your book."*
- When you impose sanctions, it's helpful to remind the student that poor development will have a consequence; remember it is never the severity, but the certainty, if you say it you must follow through
- Sometimes dig for empathy; for example, if the student has knocked a pot of paint over a classmate, you could say: *"I'm so upset/disappointed that this paint has gone all over Emma and caused such a mess on the floor."*



You could say...

*“James, please open your maths book on page 24 and start doing the sums under the title ‘Fractions’.”*

## Remind students in specific terms

Students with ADHD may simply not be doing what you’ve asked because they have forgotten the specific task. Instead of telling them in broad terms to get on with their work, remind them of the actual specific task.

## Dealing with outbursts

Students with ADHD can have explosive outbursts. When things go wrong they may feel very frustrated and take it out on those around them. When the rage subsides they feel even more frustrated with themselves. Be calm, try not to show any emotion and show the student that you are in charge of the situation.

## Time out or take a break

There will be occasions when the student is so unruly and awkward that they need to have time away from other students. The idea of taking time out or taking a break is to have a stimuli-free place, perhaps a quiet corner in the classroom where the student goes for a short period of time. This should not exceed a time span which is more in minutes than the age of the student; e.g., if the student is 5 years old 5 minutes should suffice. This place could be called the ‘thinking space’ or ‘the time away corner’. This technique can also be used with older students to create some head space.

Allow no conversation or involvement while the student is there. When the time is up, move on with the lesson and do not refer to the recent issue. The slate is clean. It’s important that you welcome the student back into the class with warmth and carry on as usual. You could also suggest the student goes to the ‘thinking space’ if they feel they need to.

## Tips for behaviour

Oppositional Defiant Disorder is a term given to describe when a student displays a certain pattern of behaviours that includes losing their temper frequently, defying adults, being easily annoyed and deliberately annoying others.

The key elements displayed by students with ODD include the following:

- Argues with adults
- Refuses and defies
- Angry and defensive
- Spiteful and vindictive

Students with ODD are often very challenging individuals – here are some key tips to help you:

- 1 Have clear expectations of academic and development targets and agreed rewards and consequences.
- 2 Make sure they are clear that they are responsible for their actions no matter “that she started it”, “I’m tired” etc.
- 3 Be consistent in your approach and handle disruptions with a response that includes no emotion and not too much talking. Consider non aggressive body language and offer the student an escape hatch to calm down.
- 4 Catch them doing it right. Praise to correction of behaviour in a 4:1 ratio.
- 5 Sometimes look for a draw. Let very defiant students save face by providing them with two options where either one is ok with you.
- 6 Know that your job is to set boundaries and that discipline means being prepared to make unpopular decisions.
- 7 Use assertiveness as opposed to aggressiveness but eliminate sarcasm and other forms of put downs.
- 8 Don't ask “Why?” ask “What?”; “What should you be doing now?” and use either/or and when/then “*Lewis either put the phone in your bag or on my desk*”; “*Sheena when you have put the chair back under the table then you can go*”.
- 9 If it's not working in class get to know them better. “Everybody has a price” and “everybody listens to someone” find out what motivates them and who has influence with them.
- 10 It's not behaviour management, it's mood management – their mood, your mood and the mood of others. Analyse your own mood and don't take it personally.

# Socialisation

## How should we approach ADHD?

A diagnosis of ADHD can be an opportunity for teachers, students and parents to start again and build a better relationship. As with all good relationships, the keys are to understand the needs of others and to recognise the problems that they face.

When people understand that ADHD is not an excuse but an explanation of why the student behaves in a different way, this provides an opportunity to develop new methods for improved learning and development. This co-operative effort between all teachers, parents and all concerned with the welfare of the student will be of great benefit, when old attitudes of 'them and 'us' become 'we'.



## How do we deal with difficulties with peers during and outside the classroom?

Students with ADHD are easy to distract and often overreact to teasing and bullying. Try to help them not to respond to teasing and make sure that other students are aware that they may be more sensitive to this type of development than other students in the class. It may help to structure break time and lunch by having inside activities and clubs that students with ADHD may attend across the age range. Rituals for learning and praising students with ADHD frequently in class may help raise their general levels of self-esteem and make them less vulnerable. If possible set them up with a 'buddy' or peer mentor, ideally from an older class, who can help to support them especially during breaks and lunchtimes. Try to involve them proactively in games and activities with close supervision and support from conflict.

## Building bridges with the student and parents

Having ADHD is not about "shame or blame" but that there is a medical reason for the student's performance and development. No one is at fault, neither the student nor parents. As a result:

- Try to assure both parents and student that you have an understanding of the issues of ADHD
- Inform all colleagues, support staff and lunch assistants of the student's difficulties so that everyone can prepare and adopt a consistent approach; this is an opportunity to have a fresh start and for everyone to be proactive rather than reactive
- Try talking regularly with the parents and the student, to let them feel you are concerned about how they are feeling and coping

## How is ADHD treated?<sup>2</sup>

Management of students with ADHD may involve the following:

- Parent training/education programme – a structured training programme with developmental strategies to improve parenting skills in order to manage your student's challenging behaviour
- Educational interventions and support at school
- Psychological treatment to help your student cope with his/her feelings and development
- Social skills training – teaching people to be more socially aware in their relationships with other people
- Medication is also available to treat ADHD

NICE (National Institute for Health and Clinical Excellence) is the independent organisation responsible for providing national guidance on the promotion of good health and the prevention and treatment of ill health. They have produced national guidelines which recommend medication to be used in severe ADHD or moderate ADHD where developmental or other approaches have not proved effective.<sup>2</sup>

Medication may be a valuable addition to help students concentrate, learn and behave more effectively.<sup>9</sup> Most students with ADHD respond well to medication but it should only be used as part of a wide range of psychological, educational and developmental therapies. A child and adolescent psychiatrist or paediatrician can assess if medication is appropriate. Dietary fatty acids supplements are not recommended for the treatment of ADHD. Medication is not recommended for pre-school children. Developmental Parent Training is recommended for parents of students with symptoms of ADHD or Hyperkinetic Disorder.<sup>2</sup>

## **What kinds of medication are available to treat ADHD?**

There are two types of medications – stimulant and non-stimulant – that are recommended as options for the treatment of ADHD. The dose of medication will be tailored to the student's needs and may change as they get older, depending on their response and any side effects.

## **Why is taking medication important?**

To ensure that your student receives the full benefit of their medication, it is important that it is taken as prescribed. Some medications are taken before school and their effects last for the whole school day. Other medications last for a shorter amount of time and will have to be taken during the school day.

It is important to address any issues around taking medication at school to ensure that they do not miss a dose for any reason. The student's doctor or parents will explain the dosing regimen and appreciate your cooperation in ensuring your student takes the medication.

## Why is monitoring important?

It is important that student progress is monitored when they start treatment for their ADHD. The student's doctor will want to monitor not only their development and learning and whether their treatment is working, but also whether they are experiencing any side effects if they are taking medication.

The student's parents may give you a monitoring booklet and ask you to complete it at school. It's very straightforward. The HCP will need to see this, so that treatment can be adjusted if necessary. Any medication that is recommended by your student's HCP has the potential to cause side effects. These can be different in each student. It is important that your student's HCP is aware of any changes that occur, once they start taking their medication. So please try to keep a record of anything you notice at school.

## What is length of treatment?

If treatment improves your student's development, it may be continued for several years as long as it is effective, but this can vary as every student is different. It is recommended for the student's doctor to review at least annually the clinical need, benefits and side effects of medication, views of the student, parent and teacher and the need for other developmental and psychological therapies.<sup>2</sup>

## Health and safety

Some students may have to take medication at school – this could mean a supply is kept at school. ADHD medications (those that are stimulants) are controlled drugs so they must be kept in a locked container and, like all medications, they must be kept out of reach and sight of children.\*<sup>10</sup>

\* For more information about keeping drugs at school please read *Managing Medicines in Schools* (Primary Professional Development) by Joe Harvey.



## Tips for socialisation and friendship

Students with ADHD often find it difficult to make and keep friendships. This can be more of a concern to teachers and parents than even academic issues.

Social skills can be difficult for students with ADHD who cannot always wait to take their turn, blurt out inappropriate comments and may be overtly antagonistic and even aggressive. The following ideas may help to improve friendships and peer relations in schools:

- 1 Unstructured break time/lunch times can be tricky parts of day unless careful thought is given to the amount of free time and groups that students with ADHD have access to. It is a good idea to create options for inside activities and clubs.
- 2 Assign a student with ADHD a study buddy and/or peer mentor. Students with ADHD who have difficulties with study skills and socialisation should be assigned another student who could act as an “auxiliary organiser” in the classroom and advocate in the playground. The peer mentor could be rotated on weekly basis.
- 3 Educate the other students about differences in learning styles such as ADHD. All students should receive information regarding issues such as ASD and ADHD and how they affect people as part of PHSE classes. ‘Circle Time’ is also an opportunity to discuss these issues.
- 4 Have specific support and plans for situations such as field trips and sports, planning for these in advance will prevent situations occurring in terms of proactive supervision, groupings and activities.
- 5 Plan groups carefully. Students with ADHD can often do well in 1-to-1 situations so often a group of two is the best arrangement. The other common issue is that students with ADHD often appear to socialise more effectively with older and younger students rather than their peers.
- 6 Teach social skills. The issue of helping students recognise the need for impulse control and to listen more effectively does take time but this will pay long term dividends in the end in terms of helping to forge successful friendships.

Resources:

## Getting more information

More information on ADHD is available from a variety of sources.

You may find the following useful:

Books for teachers and **SENCOs**

**Successfully Teaching and Managing Children With ADHD: A Resource for SENCOs and Teachers**

by Fintan O'Regan  
published by Routledge, 2019

**Attention Deficit/Hyperactivity Disorder – A Practical Guide for Teachers**

by Paul Cooper and Katherine Bilton  
published by David Fulton Publishers  
2nd Edition, 2002

**How to Teach and Manage Children with ADHD**

by Fintan O'Regan  
published by LDA Learning, 2002

**Challenging Behaviours**

by Fintan O'Regan  
published by Teachers Pocketbooks, 2006

**Troubleshooting Challenging Behaviour**

by Fintan O'Regan  
published by Continuum International,  
2006

**Educating Children with AD/HD: A Teacher's Manual**

by Paul Cooper and Fintan O'Regan  
published by Routledge, 2016

## Books for **children**

### **My Doctor Says I Have ADHD - A Child's Journey**

by Dr C R Yemula  
published by Health Insights 4U Ltd. UK;  
2008

### **Learning to Slow Down and Pay Attention: A Book for Kids About ADHD**

by Kathleen G. Nadeau, Ellen B. Dixon  
published by Magination Press  
(American Psychological Association);  
(3rd Revised Edition) 2004

### **Putting on the Brakes: Understanding and Taking Control of Your ADD/ADHD**

by Patricia O. Quinn, Judith M. Stern  
published by Magination Press  
(American Psychological Association);  
(3rd Edition) 2012

### **Attention Girls! A Guide to Learn All About AD/HD**

by Patricia O. Quinn, MD  
published by Magination Press  
(American Psychological Association);  
2009

## Books for **parents/carers**

### **Understanding ADHD: A Parent's Guide to Attention Deficit Hyperactivity Disorder in Children**

by Christopher Green and Kit Chee  
published by Vermilion; (2nd Revised Edition) 1997

### **1-2-3 Magic: Effective Discipline for Children 2-12**

by Thomas Phelan published by Child Management Inc. (U.S.); (6th Revised Edition) 2016

### **Understanding ADHD in Girls at Primary School: A Guide for Parents**

by C R Yemula & L Doddamani  
published by Health Insights 4U Ltd. UK;  
2013

### **The Defiant Child: A Parent's Guide to Oppositional Defiant Disorder**

by Douglas Riley  
published by Taylor Trade Publishing,  
1997

## **Support groups** and other useful resources

### **ADDISS**

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

0208 952 2800

### **ADHD Foundation**

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

0157 237 2661

### **Young Minds**

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

0808 802 5544

### **ADHD and You**

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

Developed and funded by Takeda

### **Born to be ADHD**

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

Developed and funded by Takeda

## Professional Organisations

**UKAP the UK ADHD Partnership**

[www.ukadhd.com](http://www.ukadhd.com)

**NASEN**

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

01827 311500

Please be aware that Takeda does not control all of the websites noted in this leaflet. We are not responsible for, nor do we necessarily endorse, the contents of these other websites.

# Learning: **CAST** Tool

## **Child ADHD Screening Tool**

### **What is it?**

CAST is a guide to aid teachers in identifying specific children who may be struggling in the classroom and/or socially with other children. It is not a definitive diagnostic tool but the first stage in determining the level of need of specific students who may be having difficulties due to Inattention, Hyperactivity and/or Impulsivity, which are the core symptoms of ADHD (Attention Deficit Hyperactivity Disorder).

### **Who is it by?**

It has been developed by Fintan O'Regan, SEN Advisor for Surrey, Dr Somnath Banerjee, Associate Specialist in Community Paediatrics and a multi-disciplinary group of specialists working in the area of ADHD, including an Educational Psychologist, a SENCO, an ADHD Specialist Nurse, and a Mental Health Practitioner. The project was initiated and funded by Takeda Pharmaceuticals as part of an educational, awareness programme in Primary schools on ADHD. The characteristics of ADHD included in CAST highlight a number of issues that certain children may have in school. They have been adapted from the Diagnostic and Statistical Manual of Mental Disorders, published by the American Psychiatric Association, the World Health Organisation International Classification of Diseases (ICD 10) and the NICE guidelines on ADHD.

## How does it work?

As a teacher you may wish to complete this questionnaire if you have identified a child in your class who is struggling in the classroom or with his/her peers or for whom your normal teaching strategies do not appear to be working.

## What happens next?

If a child scores a high level of A and Bs, it does not mean they have ADHD, as this is a screening guide not a diagnosis tool. CAST can be seen as the first stage of the referral mechanism for the school SENCO to organise a full diagnostic assessment if needed. The classroom teacher may also wish to implement some key strategies for proactive management of children with ADHD symptoms to see if they help.

# Child ADHD Screening Tool

## Scoring:

- If a child scores twelve or more out of A and/or B then further assessment should be undertaken
- If a child scores between six and eleven out of A and/or B then further assessment should be strongly considered
- If a child scores less than six then further assessment may not be needed

# CAST

A guide for teachers to identify children who may be struggling due to Inattention, Hyperactivity and/or Impulsivity, which are the core symptoms of ADHD

Name

D.O.B.

Year Group

Frequently  
Often  
Occasionally  
Never

Please rate each item accordingly in terms of how much it has been a problem in the last month.

If never, tick D, if occasionally, tick C, if often, tick B and if frequently, tick A. Please respond to each issue

**A** **B** **C** **D**

Please tick

**1.** Poor attention to detail and/or makes careless mistakes in written tasks

**2.** Has difficulty in sustaining attention during tasks or activities

**3.** Does not appear to focus or listen when spoken to directly

**4.** Fails to finish tasks and activities in the classroom

**5.** Has difficulty with organizing skills both self and tasks and activities

**6.** Appears unable to complete tasks that require sustained mental effort

**7.** Often loses pencils, pens or books

**8.** Appears to be very easily distracted

**9.** Is far more forgetful in comparison to peers

**10.** Often fidgets with hands and/or rocks on chair when seated

**11.** May often leave seat in the classroom without permission

**12.** Runs and/or climbs excessively in comparison to peers when not seated

**13.** Has difficulty in participating quietly in leisure activities

**14.** Appears to always be "on the go" or often acts as if "driven by a motor"

**15.** Often shouts out answers before questions have been completed

**16.** Has great difficulties in waiting turn in comparison to peers

**17.** Interrupts others (e.g. often butts into conversations or games)

**18.** May talk excessively in comparison to peers

## Academic Performance

Reading level

National Average

Writing level

National Average

Maths level

National Average

Any further comments

## Reference

- i. American Psychiatric Association. Diagnostic and Statistical Manual of Psychiatric Disorders DSM-IV-TR (2009)
- ii. The WHO ICD-10 Classification of Mental and Behavioural Disorders
- iii. National Institute for Clinical Excellence. Full Guidance – Attention deficit hyperactivity disorder: Diagnosis and management of ADHD in children, young people and adults, 14 March 2018.

# Behaviour:

## Monitoring your student's development at school

This monitoring booklet can help your student's progress. Their doctor needs to know what effect the medication is having on your student's development and whether there are any side-effects.

Please monitor your student's progress once a week over the next few weeks, preferably on the same day every week. This booklet will play an important role in informing their doctor about their wellbeing at their next check up.

Each monitoring chart covers a week and different aspects of your student's behaviour. It also includes possible side-effects. If you have any concerns, please let their parents know as soon as possible.

Looking at your student over the week, please assess each statement on the chart and how well it relates to them during the last week. Then score the statements from 0 (Not at all) to 3 (All the time) by ticking the appropriate box for that statement. If you notice anything else, please write it down in the box at the bottom of the chart.

# Behaviour:

## Week at school

If your student experiences any problems with their medicine, these should be reported as soon as possible to their parent(s)/carer(s).

Date	Developmental assessment	Never/seldom	Occasionally	Often/quite a bit	Very often/frequent
	Schoolwork is improving	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
	Works better in groups (than before)	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
	Noisy and excitable	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Has frequent fights with classmates	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Easily distracted from tasks	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Difficult to contain during break times	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Disturbs children around them	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Unable to pay attention in class	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Unable to complete homework	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Unable to sit through a whole period	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 0
	Total (add scores in each column)	_____	_____	_____	_____
					= _____

Please tick boxes below if any of the following are observed and advise the child's parent(s) and/or carer(s)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Poor appetite             | <input type="checkbox"/> Feeling/being sick     | <input type="checkbox"/> Stares a lot or daydreams |
| <input type="checkbox"/> Irritable                 | <input type="checkbox"/> Dry mouth/eyes         | <input type="checkbox"/> Looks anxious             |
| <input type="checkbox"/> Complains of stomach ache | <input type="checkbox"/> Rash/joint pain        | <input type="checkbox"/> Seems unsteady            |
| <input type="checkbox"/> Complains of headache     | <input type="checkbox"/> Flu symptoms           | <input type="checkbox"/> Displays twitches (tics)  |
| <input type="checkbox"/> Palpitations              | <input type="checkbox"/> Drowsy                 | <input type="checkbox"/> Increased aggression      |
|  | <input type="checkbox"/> Increasingly emotional |  |

# Socialisation:

## 10 suggestions for SENCOs and Teachers to pass on to parents/carers in home management of children with ADHD

**Be firm** and establish clear ground rules, rituals and routines for meals, homework, Computer/TV/Phone and getting up and going to bed.

**Accept absent mindedness** which will often happen with children with ADHD. They will need numerous prompts and reminders to complete tasks and follow instructions. Develop visual aids, post it notes and or charts to reinforce the spoken word.

**Support and encourage organisational weaknesses** in terms of putting away clothes, shoes, sports equipment and materials for school.

**Use simple language and short instructions.** Children with ADHD find it difficult to process multiple requests quickly and accurately so keep to clear one concept commands. Maybe ask the child to repeat what you have said and speak at a slower rate if this is still not working.

**Be patient** and try not to sound irritated or frustrated when children are finding it difficult to relate to an event in a proper sequence. You may need to ask who, what, where and when questions to reinforce specific issues.

**Try to teach turn taking** as children with ADHD find it difficult to wait their turn in terms of a conversation or an activity. Using something to distract them by maybe using a tangle or another suitable manipulative may initially help in this process.

**Establish good behaviour in public** and do not wait until you get home to deal with inappropriate behaviour. Act as quickly and firmly as possible, otherwise the child with ADHD will not be able to relate to the incident after the lapse of time.

**Talk to siblings** about how ADHD may affect their sister or brother and why as a parent you may have to sometimes do something different. Try to explain to them why fairness is not giving everybody the same but its giving everybody what they need.

**Find a club or an activity** that suits your children's strengths and interests. Children with ADHD can often find group activities difficult to master and supervisors may not always have the appropriate management skills. It may take a while to find the right club or activity for your child but don't give up. Also children with ADHD often get on better in terms of socialisation with younger and older children so perhaps find an activity across the age range.

**Be a Mum or a Dad rather than a teacher** especially when it comes to trying to tutor or teach your child with regards to schoolwork and/or homework. In most cases this may cause conflict between both sides and if there are problems with completion of tasks contact your child's tutor at school. This does not mean that parents cannot provide "secretarial" support in reading out difficult text and listening to developing readers and helping with questions however conceptual support often leads to strained relationships.

## References

1. Diagnostic and Statistical Manual of Mental Disorders, published by American Psychiatric Press; (5th Edition) 2013.
2. National Institute for Health and Care Excellence. Attention deficit hyperactivity disorder: diagnosis and management. NICE guideline [NG87]. March 2018. Available at: <https://www.nice.org.uk/guidance/ng87> (accessed Sept 2021).
3. Selikowitz M. ADHD the Facts. 2nd Ed. Oxford University Press, Oxford, UK, 2009.
4. Getahun D, Rhoads GG, Demissie K, et al. In utero exposure to ischemic-hypoxic conditions and attention-deficit/hyperactivity disorder. *Pediatrics*. 2013;131(1):e53-61.
5. Novik TS, Hervas A, Ralston SJ, et al. Influence of gender on attention-deficit/hyperactivity disorder in Europe—ADORE. *Eur Child Adolesc Psychiatry* 2006; 15(Suppl 1): I/15-I/24.
6. O'Regan F. Successfully Managing ADHD. A handbook for SENCOs and teachers. Routledge, Abingdon, UK, 2014.
7. O'Regan F. (2009) Persistent disruptive behaviour and exclusion. *ADHD Pract* 2009;1(1):8-11.
8. Hoza B. Peer functioning in children with ADHD. *J Pediatr Psychol*. 2007;32(6):655-63.
9. Cortese S, Adamo N, Del Giovane C, et al. Comparative efficacy and tolerability of medications for attention-deficit hyperactivity disorder in children, adolescents, and adults: a systematic review and network meta-analysis. *Lancet Psychiatry*. 2018 Aug 7. pii: S2215-0366(18)30269-4.
10. Managing Medicines in Schools (Primary Professional Development), Joe Harvey, published by Folen Publishers; 1998.



Takeda Pharmaceutical  
Company Limited  
1 Kingdom Street  
Paddington  
London W2 6BD

Date of preparation: October 2021  
C-ANPROM/GB/ADH/0014

Copyright © 2021 Takeda Pharmaceutical Company Limited. All rights reserved. Takeda and the Takeda Logo are trademarks of Takeda Pharmaceutical Company Limited, used under license.