

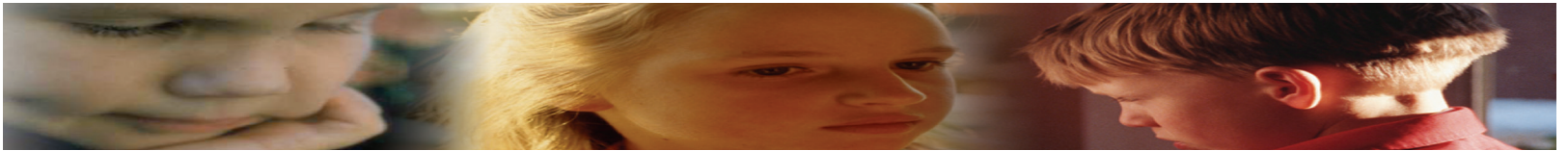
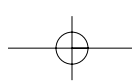


ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

A PRACTICAL GUIDE FOR SCHOOLS

ADHD Working Group





Attention Deficit Hyperactivity Disorder (ADHD): A Practical Guide for Schools

Foreword

This booklet has been prepared by a Working Group of Educational Psychologists from the five Northern Ireland Education Boards, with representation also from the National Educational Psychology Service in the Republic of Ireland. It has been prepared at the request of the Northern Ireland Regional Strategy Group on Special Educational Needs and has been funded by the Department of Education for Northern Ireland.

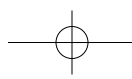
Acknowledgements

We would like to express our thanks and appreciation to those who responded to consultations in the preparation of this booklet, including teachers, classroom assistants, health professionals, NIADD (The Northern Ireland ADHD Family Support Group), parents and young people.

The information contained in this booklet has been gathered from a wide range of published sources which are not individually referenced. We also wish to acknowledge the expertise of a large number of practitioners who have helped to inform and refine the management strategies which have been included.

Authors' note

In line with current practice, in this booklet the individual child will be referred to using 'they' and 'their' in order to avoid gender-specific references.



The ADHD Working Group:

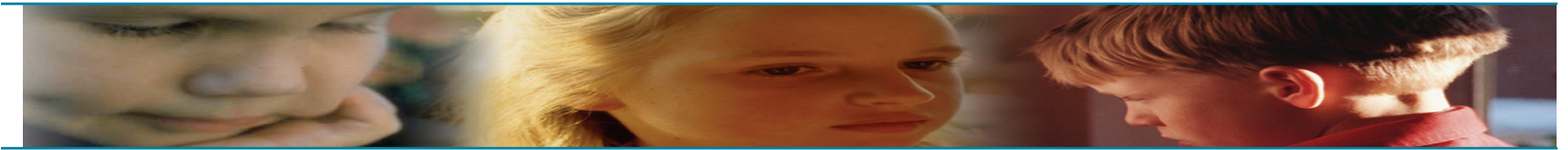
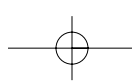
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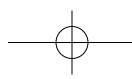
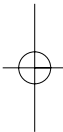
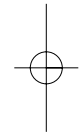
Copies of this booklet may be obtained from your local Education and Library Board. Copies can also be downloaded from the ELB web sites (See Useful Contacts - Appendix 6).

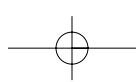
March 2004



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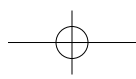


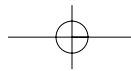
Introduction

At one time or another, most children show weak concentration, become overactive, or act without thinking. There are some children, however, who show particular and exceptional difficulties with inattention, hyperactivity and impulsivity, which have an effect on their learning and behaviour and which they themselves seem unable to control. These difficulties do not appear to be explained by usual influences such as computer games, too much TV, poor management or diet.

These children have a condition known as Attention Deficit Hyperactivity Disorder (ADHD - sometimes referred to as ADD).

The purpose of this booklet is to provide school staff with information about ADHD and how children with the condition can be helped in school. A booklet, "Your child with ADHD: A practical guide", has also been produced that is aimed primarily at parents and carers. Copies of both booklets can be obtained as previously described.





Section 1 - WHAT IS ADHD?

ADHD is a developmental disorder that occurs in 1-3% of the population. As with other developmental disorders, boys are more likely to be affected than girls. ADHD is not related to intelligence. Children with all levels of ability can have it and it can affect children from all walks of life. ADHD does not go away. The presentation of the condition, however, may change over time.

There is a strong genetic component in ADHD. Research shows that if a parent has ADHD, there is a greater than 50% chance that at least one of their children will also have the condition.

Children with ADHD show particular difficulties in some or all of the following:

Inattention

- can't focus
- don't seem to be listening
- seem to be daydreaming
- very easily distracted
- can't concentrate

Hyperactivity

- always "on the go"
- can't sit still

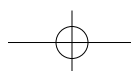
Impulsiveness

- act before thinking
- shout out in class

Remember...

These are behaviours that all of us display to some degree at different times. However, in children with ADHD the behaviours are also:

- Present for more than six months;
- Severe enough to interfere with normal functioning for children of their age;
- Not explained by developmental level or other difficulty/condition;
- Not explained by other factors such as "laziness"; lack of sleep; too much TV; videos; food additives.



How is ADHD diagnosed?

The current diagnostic criteria for ADHD can be found in DSM-IV (Diagnostic & Statistical Manual of Mental Disorders - 4th Edition, American Psychiatric Association, 1994 - see Appendix 1). Although ADHD is a complex disorder with many components, the diagnosis depends solely upon observable patterns of behaviour. There is no single medical or psychological test available to help us with the diagnosis of ADHD. The diagnostic procedure is therefore difficult and complex. Many people are often involved including parents, teachers, educational and clinical psychologists, therapists, GPs, paediatricians, and child and adolescent psychiatrists. The final diagnosis is typically made by a paediatrician or psychiatrist. Best practice in this area is recognised to be multi-modal assessment where a number of professionals consider the child's needs together.

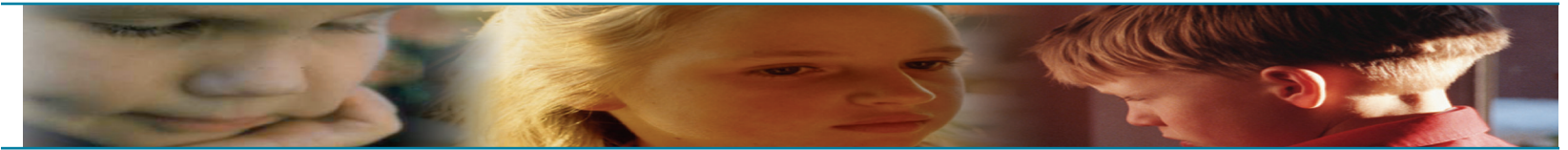
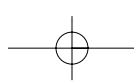
It is important to note that ADHD can often exist alongside other difficulties and developmental disorders, which means that a diagnosis of ADHD may not explain all of the difficulties the child is exhibiting.

It should be noted also that some behaviours which "look like" ADHD may be due to other causes and conditions (e.g. emotional upset, conduct disorder etc). It should not be assumed that a child has ADHD until a full professional assessment and diagnosis has been completed.

Types of ADHD

Children with ADHD are all individuals and no two are the same. However, they may be divided into three broad groups according to their behavioural presentation:

1. ADHD (Inattentive Type)
2. ADHD (Hyperactive-Impulsive Type)
3. ADHD (Combined Type)



What causes it?

ADHD is not a new phenomenon. Good quality research suggests ADHD is caused by neurotransmitter dysfunction, primarily in the frontal lobe area of the brain. The neurotransmitter chemical Dopamine is implicated.

ADHD cannot be caught, transmitted or caused by environmental factors such as diet, parenting or education. However, we must remember that environmental factors can influence every child and so are still important.

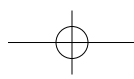
Will they grow out of it?

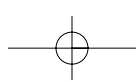
While children's concentration and behaviour usually improve with age and maturity, the problems of those with ADHD may continue in the longer term. It is not therefore safe to wait for them to "grow out of it". Proper help and care are needed to reduce the impact of ADHD on children's learning, behaviour and emotional development.

Strengths of the child with ADHD

While children with ADHD have some difficulties, they also have many strengths. Some children with ADHD may be:

- good at expressing themselves;
- quick to put what they learn into practice;
- good at "seeing the big picture";
- fun to be with;
- enthusiastic;
- curious;
- humorous;
- artistic;
- energetic.





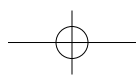
How might the child with ADHD present in class?

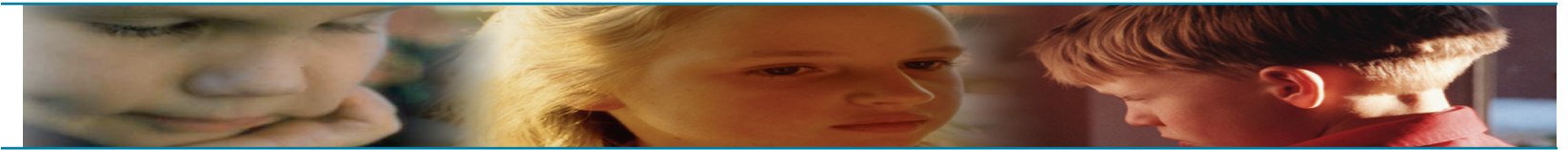
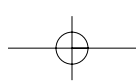
Look out for the child who, to a significant and inappropriate degree...

- Is often off-task
- Doesn't finish their work
- Makes careless mistakes
- Appears lazy / disinterested
- Daydreams / appears not to listen
- Misses instructions / asks for things to be repeated
- Can't seem to focus
- Is unable to maintain effort over time
- Is forgetful / disorganised

and / or

- Talks excessively
- Shouts / blurts out answers
- Interrupts / intrudes on others
- Can't wait their turn
- Doesn't wait to hear instructions
- Is restless / fidgety
- Is frequently out of their seat
- Is always "on the go"





What is school like for a child with ADHD?

It's so hard to concentrate, teachers don't understand this.

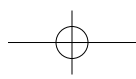
You feel left out and you can't calm yourself.

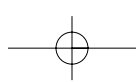
Schools should make people with ADHD feel wanted. You get bullied because you are different.

Not being able to write fast makes me feel different... Everyone else is quick at writing - it isn't hard for them.

I know it is hard without the tablets and I concentrate better with them. I think everybody is special - no matter what.

I'm not stupid, - I'm in the top form - if teachers would only repeat instructions for me





When we understand the types of difficulties children with ADHD have to cope with, we can imagine how tough school life can be for them.

Children with ADHD have difficulty: -

Screening out unwanted stimuli

Everything screams for the attention of the child with ADHD: the hunger pangs in their stomach, the noise of the distant lawn mower, thoughts about the football match, the pencil dropped by the child behind them. The teacher's voice is only a small distraction! Imagine yourself sitting in an important lecture trying to concentrate on the speaker's voice while two of your favourite films are showing at full volume in the conference room, your mobile is ringing, your friend is waving through the window and the person next to you keeps chatting to you. This might help you to imagine how the distractions of a normal classroom affect the child with ADHD.

Monitoring and regulating their own behaviour

Children with ADHD are poor self-monitors. They often require high levels of feedback to let them know what they are doing right and wrong. When these children hear, "Stop that!" they may not actually know to which behaviour the teacher is referring.

Inhibiting inappropriate verbal and physical responses

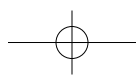
It's not that the child did not know it was a bad idea to throw the paper aeroplane; it's just that they knew it after they threw it! The mechanisms that allow us to think before we speak or act are affected in ADHD.

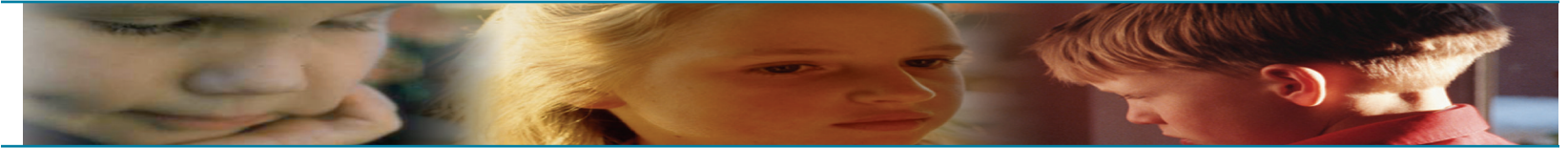
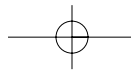
Knowing how much concentration is needed for a task

We know that it requires greater effort to read an academic journal than it does to read a magazine and we allocate mental effort accordingly. This is difficult for the child with ADHD.

Sustaining attention for prolonged periods

Children with ADHD may start an activity with great enthusiasm but they find this difficult to sustain.



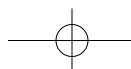
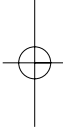
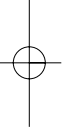


Controlling activity level

Children with ADHD can have trouble adapting their activity level so that it is appropriate to the context. They may feel the need to move as much in the classroom as they do in the playground!

These difficulties have a number of consequences for children with ADHD. They may find it hard to make and sustain friendships. They could find that, despite their best efforts to manage their behaviour, they are often in trouble in school and underachieving in the curriculum. This can clearly cause stress and anxiety, reduce the child's self-esteem and lead to negative views of school.

School staff are in a powerful position to halt this negative spiral and make a huge impact on the quality of life for children with ADHD.



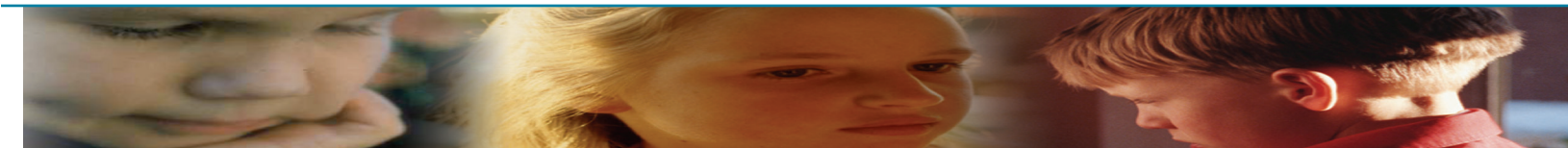
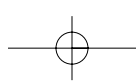
Section 2 - WHAT CAN BE DONE TO HELP?

ADHD is a complex disorder that has many components and therefore needs to be addressed in a number of ways. Very often, the most important thing that anyone can do for a child with ADHD is to take time to get to know them, and to understand their condition and how it affects them. This can include spending time with the child, talking to their parents and other professionals and reading any reports that are available.

The ADHD-friendly adult...

- Is aware of what life is like for the child with ADHD
- Is warm and understanding
- Is prepared to be flexible
- Has a well-developed sense of humour
- Works closely with parents

These characteristics will go a long way to help make school life positive for any child, but they are particularly important for the child with ADHD. Strategies are useful, but positive relationships are more important.



Medical intervention

For significant numbers of children, psychostimulant medication has been shown to be highly effective in the management of ADHD. It is widely recognised, however, that supporting the child at home and in school is also extremely important. Strategies to support the child with ADHD will be addressed later in the booklet.

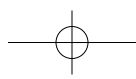
Although, as educationalists, we are not directly involved with medication, we can play a key role in monitoring its effectiveness. It is therefore important that we have a basic understanding of the medication involved.

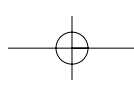
Children with ADHD are often prescribed psychostimulant medication (e.g. Ritalin & Dexedrine). These are not sedatives, they are actually stimulants that help the child to concentrate and settle to task so the child may seem calmer when they take them. They have an immediate, observable effect within half an hour or so, and wear off in around four hours so the child may need a number of doses a day. This medication is now also available in a slow-release form so some children may only need to take their tablet once a day. If medication is required during the school day, your school's own procedures for the administration of medication should be followed.

Some side effects are possible and it is therefore important for both schools and parents to monitor the child's behaviour, mood, eating and sleeping patterns and pass this information to the prescribing consultant. This will assist the consultant in devising a medication schedule (timing and dosage) appropriate to the child. Not all children with ADHD respond to medication, however, research suggests that it is the single most effective form of treatment for many when it is carefully monitored.

Some children with ADHD have been reported to respond well to vitamin and food supplements (including fish oils and essential fatty acids). Research is ongoing in this area.

It is important to remember that children with ADHD have complex difficulties and medication will not solve all of them. Perhaps it is useful to think of the medication as providing us with a window of opportunity in which to work with children to help them change their behaviour, and develop their self-esteem, social skills and peer relationships.





The Code of Practice

The “Code of Practice on the Identification and Assessment of Special Educational Needs” provides a structure for schools to address children’s difficulties.

The term “Special Educational Needs” refers not only to learning difficulties, but also covers social, emotional, behavioural and health issues. The needs of children with ADHD should therefore be met in accordance with the Code of Practice. The needs of many of these children can successfully be met within the school-based stages of the Code of Practice, without input from external agencies.

The Code of Practice has implications for both schools and parents. Regular and mutually supportive home-school contact is crucial in meeting the needs of children with ADHD in order to:

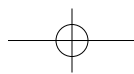
- Share information
- Share responsibility for the child’s progress
- Agree and review education plans

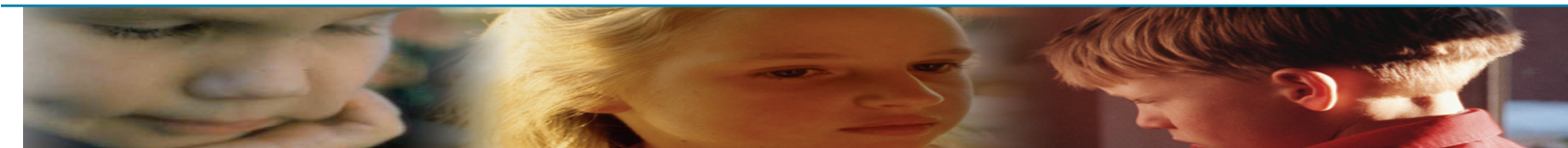
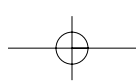
The most important, and probably the most difficult, aspects of writing education plans are:

- Identifying specific difficulties
- Setting targets
- Devising strategies

Identifying specific difficulties

It is important to have more than anecdotal evidence of the child’s difficulties. The best way to achieve good quality objective information is through structured observation and careful record keeping. The STARE chart is useful observation schedule (see Appendix 2). Other sources of information include behaviour checklists, information from others who know the child and discussion with the child.





Setting targets

To set effective targets, we should focus less on the child's difficulties and more on the things we would like the child to be able to achieve. Targets should always be achievable and something the child could manage with appropriate support. Think in terms of exact and measurable outcomes. This ensures regular success and positive outcomes for pupils, teachers and parents.

e.g. "By the end of March, John will work independently for 5 mins once a day, 3 days per week."



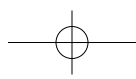
"John will work independently"

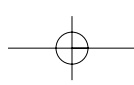


Devising strategies

You will already have a large repertoire of management strategies that you adapt to the needs of the children you teach. Hopefully there will be a few strategies within the booklet that you can add to this. It is important to note the strategies you have tried on the education plan so you can identify which are useful / beneficial for the child. See Appendix 3 for some examples of education plans.

Sometimes children with specific difficulties may be eligible for special examination arrangements at secondary level. Guidelines are published each year detailing criteria and procedures. If you are working with a child who may benefit from special arrangements, it would be worth discussing this with the SENCo and/or examinations officer in your school.



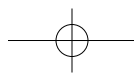


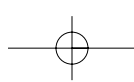
Strategies

The following strategies are not particularly new or radical. They are all things that you will find in place in many schools. They will be useful for lots of children, not only those with ADHD. In order to support these children, it is essential to put structures and supports in place to help them cope with the demands of school life. The principles behind the following strategies are applicable to children with ADHD regardless of their age. The practical application, however, will vary according to the age and ability of the child so you'll need to adapt them to your particular situation.

It is important to note that these strategies are not meant to replace the normal disciplinary procedures in your school. If a child with ADHD misbehaves, sanctions may need to be imposed to help them understand that their behaviour was unacceptable. Don't, however, expect today's sanction to moderate the child's behaviour tomorrow. The sanction simply shows right from wrong. If you want to see the behaviour change you will need to implement some supportive strategies.

The strategies target many of the difficult behaviours associated with ADHD. We must implement them sensitively and supportively remembering that life can be tough for children with ADHD and the behaviours are not deliberate. Living with ADHD without appropriate support can affect children's self-esteem, relationships with others, academic progress and can lead to low self-worth, anxiety and even feelings of hopelessness.





Favourites

These are the strategies that have been tried and tested by a number of teachers and have been found to be particularly useful.

Headphones / screen

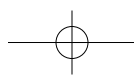
Children with ADHD have difficulty screening out external stimuli so that they can concentrate on the task in hand. As a concentration aid, try allowing them to listen to music on headphones while engaged in a piece of settled work. The music screens extraneous auditory stimuli and helps the child to concentrate on their work. This would, of course, need to be handled sensitively in a classroom situation. In order to avoid stigmatising the child with ADHD it may be necessary to allow other children to use headphones too. If you decide to play music aloud to the whole class group, give the child with ADHD headphones, because without the screening effect of the headphones, the music will simply be a further distraction.

Placing a screen around the child's desk, like a study carrel, will reduce external visual stimuli for the child. This would, obviously, only be appropriate for certain tasks/lessons and would again require extremely careful handling. Clearly interacting with peers is important for social development so screens should be used sparingly and in a way that doesn't stigmatise the child.

In the secondary setting these strategies will not be practical in all subject areas but might work well, for example, when concentrated pieces of independent work are required.

Traffic lights

This simple visual system is used in many primary classrooms as a way of managing noise level. A poster of traffic lights is displayed in the classroom with a moveable arrow. The teacher sets the arrow at an appropriate noise level for the task in hand i.e. red = silence, amber = whispering, and green = free talking. This can be a useful support for a child with ADHD because it provides a visual reminder of a verbal instruction. Using as many modalities as possible to communicate expectations to the child and providing regular, positive reminders will maximize the likelihood of compliance. For older children, the visual reminder can take the form of written instructions on the blackboard or key words displayed on the walls.



Visual timetable / chunking

Again, visual displays of what is expected of the child will provide multi-sensory reminders. This technique also has the advantage of breaking time down into manageable chunks and giving the child greater predictability and security within their day. A visual timetable helps them to focus on a manageable amount of time. In secondary school, detailed written timetables for each class displayed inside a class book can serve the same purpose.

A visual timetable can also be used in conjunction with a behaviour programme and rewards can be displayed on it.

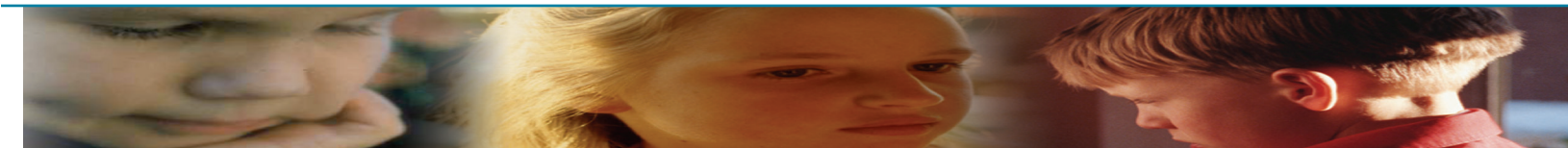
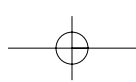
Attention training

This can be labour-intensive but is often very successful and so worth the effort. First, time how long the child can sustain attention on a routine task e.g. copying down homework. This might only be 3-4 minutes (or even 20 seconds!), but whatever it is, mark it onto an attractive chart. Show the child how long they concentrated for. The next day ask the child to try to beat their time. Make this fun. Say 'ready, steady, go' and let them see the timer. Kitchen timers that show the time ticking away are great. Failing that, just use a stopwatch. Each day repeat the procedure, marking the child's new time onto the chart. Make lots of fuss as you see the child improve.

Improvements in this area will be difficult for the child and will require lots of effort. Be sure to acknowledge this and don't make unrealistic demands.

Brain gym & stress toy

Children with ADHD will fidget / move around no matter what you say or do!!! So look for opportunities to maximize legitimate movement in your classroom. The more opportunities there are for legitimate movement the less likely the child is to fidget and wander around the classroom in a disruptive manner. Brain gym is a series of exercises designed to increase brain activity. The exercises are reported to have beneficial effects with all children. Details of the exercises can be found at www.braingym.org.uk (See Appendix 4 for details of other useful websites).



A stress toy is useful to give to a child with ADHD when you are talking to the whole class and require quiet attention. Playing with a stress toy appears to help the child to concentrate. It also keeps their hands busy so that they don't fidget with pencils and rulers. Even a piece of blu-tac could do the same job. You just want to give the child something to fiddle with that won't make a sound if it is dropped and won't injure someone if it is thrown across the classroom!!

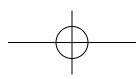
ICT

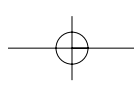
Computers are a wonderful resource for children with ADHD. They provide non-judgmental, immediate feedback in an exciting multi-sensory way every single time - much better than human beings! Incorporate as much computer-assisted instruction into your timetable for these children as possible. It could also be used as a reward on a behaviour programme. Remember, because the computer is so rewarding for the child with ADHD, getting them to move on to the next activity can be difficult. It is helpful therefore to use a timer so that the child is aware how long they can spend on the computer and when their time is up.

Circle Time

Children with ADHD often lack understanding of social rules, and can have difficulties forming and sustaining friendships. For this reason, Circle Time can provide an excellent forum for them and other children to develop the skills of turn-taking, listening, empathy, and making good decisions. Circle Time topics can be chosen with the particular needs of the ADHD child in mind.

Circle Time is often successfully implemented during Personal & Social Education or form class / tutor group in secondary school.





General classroom management strategies

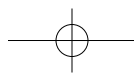
The following strategies are based on general classroom management principles and are useful for all children, not only those with ADHD. Consequently, these strategies will be very familiar to most teachers and already in place in most classrooms. They are included here for the sake of completeness and because children with ADHD, in particular, respond well to structure, consistency and positive reinforcement. Teachers will make a greater impact on children with positive rather than negative comments, rewards rather than sanctions. Children are more likely to respond to a constructive approach than to punishment for behaviours they have difficulty managing. A purely punitive approach could foster oppositional/defiant behaviour in the longer term.

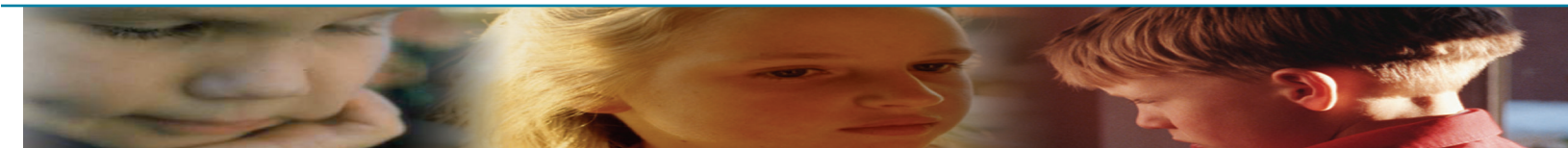
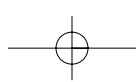
Positive reinforcement

- Provide frequent, immediate and consistent feedback about acceptable and unacceptable behaviour. This helps children monitor and regulate their behaviour.
- Praise positive achievements and behaviour and be specific (e.g. “You were kind to your friends in the playground today” instead of “Good boy, well done”).
- Where possible, ignore minor inappropriate behaviour and actively reinforce desired classroom behaviours with positive teacher attention (e.g. acknowledge the positive behaviour of a nearby pupil).
- Use careful reprimands for misbehaviour, ensuring you criticize the misbehaviour not the child (e.g. “Hitting others is wrong” instead of “You are very naughty”).
- Avoid imposing negative consequences on the whole class based on one child’s behaviour.

Classroom rules and routines

- Keep classroom rules clear and simple.
- Word them positively (e.g. “Put up your hand and wait quietly for help” instead of “Don’t shout out”).
- Discuss the rules, display them on the wall and stick a personal copy in the child’s book or on their desk.





- Ensure that pupils know what happens when the rules are kept or broken.
- Be seen to do exactly as you say you will do. Do not make false threats or promises.
- Establish a daily classroom routine and schedule and ensure that it is known, understood and practiced. This is particularly important at transition times.

Classroom layout

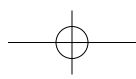
- If possible, seating in the classroom should be flexible, with several tables for group work in addition to rows or individual desks for independent work.
- It is important for the teacher to be able to move freely about the room and have access to all students.

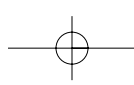
Giving instructions

- When you give instructions to the class, get their quiet attention first. Shouting over a noisy class doesn't work.
- Use lots of eye contact when speaking to the class.
- Give short sequences of instructions in the order you want them to be carried out. If necessary, give instructions one at a time.
- As an additional reminder, follow up oral instructions with written or pictorial instructions that the children can consult if required.
- Before commencing a task check that pupils know what to do.
- During tasks, make frequent checks to ensure that pupils are following instructions correctly.

Lesson structure and presentation

- Review previous lessons on the topic before describing the current lesson.
- Actively involve pupils in lesson presentation (e.g. choose someone to write key words / ideas on the board).
- A multi-sensory approach to lesson presentation aids pupils' understanding and recall of lesson material (e.g. Combining verbal instructions with demonstration). Role-playing and computer-assisted learning are also useful.





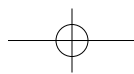
Attention Deficit Hyperactivity Disorder

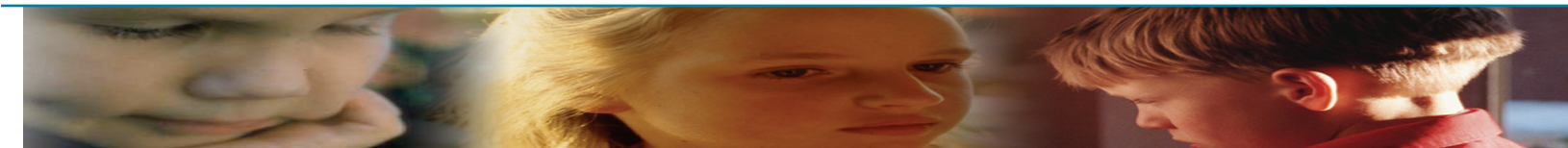
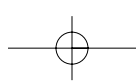
A Practical Guide for Schools

- Teaching aids (visual and audio) should relate directly to the material to be learned in order to keep distractions to a minimum.
- Include a variety of activities during each lesson and vary the pace where possible.
- State what the class is expected to learn during the lesson. Outline key concepts, vocabulary etc.
- Describe how pupils are expected to behave during the lesson (e.g. be clear about when pupil movement is permitted and when it is discouraged).
- Identify all materials that pupils will need during the lesson and make sure that they are easily accessible.
- Tell pupils how to obtain help during the lesson (e.g. refer to a specific page in their textbook, raise their hand and wait for teacher attention etc).
- Encourage concentration and on-task behaviour by providing short breaks in which pupils can engage in physical activity.
- Allow adequate time for lesson review / recap.

Worksheets

- Use large, dark black print on buff-coloured paper.
- Keep page format simple avoiding visual clutter (i.e. pictures that are not directly related to the task).
- Avoid handwritten worksheets.
- Provide only one or two activities per page and give simple, clear instructions. Four worksheets containing five questions each is preferable to a single worksheet of twenty questions.
- Divide the page into sections and devise a system to cover sections when they are not being used.





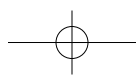
Dealing with ADHD-specific difficulties

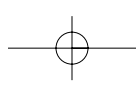
Difficulty sustaining attention / completing tasks

- Reduce task length (differentiation).
- Break long assignments into short, achievable tasks & reward completion promptly.
- Follow a difficult task with a preferred task.
- Allow short breaks between tasks.
- Use a timer to indicate a period of concentrated work.
- Emphasize quality of work rather than quantity.
- Make use of alternative methods of recording (pictures, diagrams, tape recorder, word processor).
- Develop a reward system for work and homework completion (e.g. each completed assignment earns children a raffle ticket with their name on it. Prizes or special privileges could be awarded on the basis of a random draw held daily or weekly).

Easily distracted

- Seat the pupil in the front third of the class, as close to the teacher as possible without being punitive or permanently isolating from other pupils. This will enable the teacher to monitor and reinforce on-task behaviour.
- Seat the pupil away from distracting influences (windows, doors, library corner) to minimize visual and auditory distractions.
- It can be useful to have two seats in the classroom for the child with ADHD - one away from distractions for periods of concentrated work, and the other within a group to promote social contact.
- Place the pupil between well-behaved, positive role models. This will provide opportunities for cooperative working and will enable the pupil to learn from their peers.
- Remove all objects not required for a task from the pupil's desk.
- Listening to soft music through headphones is a useful concentration aid as it blocks out other auditory distractions (see "Favourites" section).
- Use desk dividers / study carrels to reduce visual distractions (see "Favourites" section).
- The use of physical proximity helps prevent wandering attention and also alerts the pupil if they are off-task. The adult should stand next to the pupil when giving instructions / presenting a lesson.





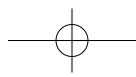
- Ensure eye contact when giving the pupil assistance / instructions.
- Attention training (see “Favourites” section).

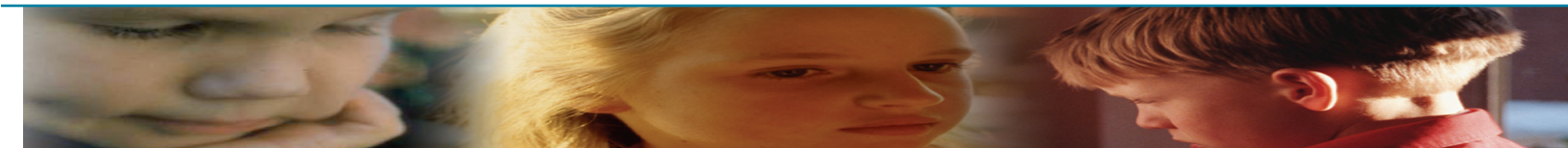
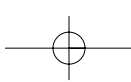
Shouting out / talking out of turn

- Ignore inappropriate comments & questions where possible. This is not always easy but avoids giving attention to the child for inappropriate behaviour. Instead, when the child shouts out, try praising another child for their behaviour.
- Provide positive reinforcement for listening. Be careful to catch the child being good and praise when possible.
- Teach the child to practise a structured routine each time they approach a task e.g. “1. Stop and listen, 2. Look and think, 3. Answer and do”.
- Traffic light system (see “Favourites” section).
- Cube box challenge (see “Behaviour programmes” section).

Untidy / disorganized

- Assist the pupil with personal organization. This can be done by colour-coding books and folders, providing lists of books and materials needed for each day/class, providing print-outs of homework and course-work requirements (including submission dates), and enlisting help from home where possible.
- Arrange for peer support. Find an organized friend who is willing to help out. If possible, find something that the child with ADHD can help them with in return so that there is some equality.
- Reward tidiness through classroom rituals. Set aside special times to tidy folders etc. and times of amnesty when long-forgotten work can be handed in and organized.
- Be willing to repeat expectations each time you set a piece of work. Instructions summarized on the board are helpful too.
- Keep worksheet format simple.
- Keep materials needed to hand. Walking across the classroom to get something provides too many opportunities for distraction!
- Develop a clear system for keeping track of completed and uncompleted work.





Difficulty with transitions

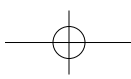
- Use individual / group work schedules in picture or written format (see “Favourites” section).
- Define requirements carefully. Remind the child of the rules for lining up, walking down the corridor and entering the next classroom.
- Aim for consistency across tasks/classes. The child will find it very difficult to respond to the different requirements of different teachers.
- Always give a 5-minute warning before ending an activity to allow time to finish off and prepare for transition.

Fidgets / squirms

- Break tasks into small steps.
- Allow alternative seating. Allow the pupil to straddle their chair horseback-style, with the back of the chair against the pupil’s desk. It is more difficult to swing or tip a chair in this position.
- Allow alternative movement where possible. Allow the pupil to stand at times when working and provide opportunities for “seat breaks” (e.g. running errands or handing out books).
- Consider using ‘Brain Gym’ or giving the child a stress toy (see “Favourites” section).

Peer problems

- Utilise Circle Time, role-play and drama to teach concepts of communication, participation and cooperation.
- Arrange joint activities in class with likely friends. Encourage inclusion of the child in friendship groups by structuring some of their play activities.
- Use cooperative learning activities. These tasks require all members of the group to fulfil their role to ensure group success. This method is often found to increase co-operation and cohesion within the group.
- Reward appropriate social behaviour (involve parents and lunchtime supervisors). Again this is just catching the child being good. When they behave well with peers, notice it, draw their attention to it and praise their efforts.
- Assign the pupil responsibility in the presence of their peer group. If the other children see that the child with ADHD is highly valued by the teacher it will increase their standing in the peer group.



Behaviour programmes

Behaviour programmes are useful for many children who find it hard to comply with the expectations of school, because they:

- Help the child to focus on specific targets
- Shift the emphasis from bad to good behaviour
- Impact positively on behaviour in class, self-esteem & peer relations

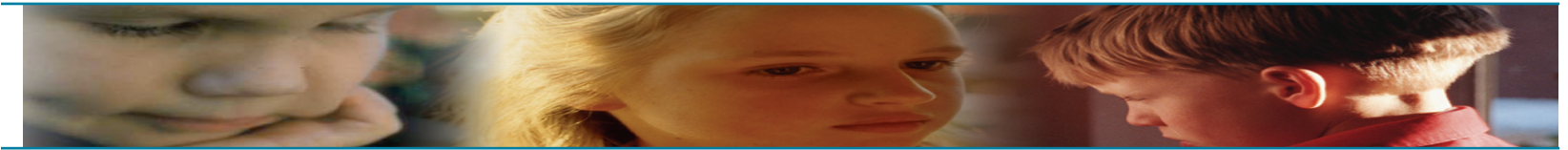
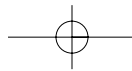
N.B. It is important not to confuse behaviour programmes with education plans. The behaviour programme is one possible strategy to support the child in achieving the behavioural targets on their education plan.

There are many ways to set up a programme; this is just a suggestion.

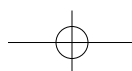
- Firstly, think carefully about the behaviour the child is currently displaying and the behaviours that you wish they were displaying! Consider the age and ability of the child before deciding how many targets to work on. For relatively able children, from late Key Stage 1 right through to secondary age, it is often good to work with 3 targets.
 1. Something the child consistently achieves already (you may have to think very hard about this one!!!)
e.g. I am kind to my friends
 2. Something the child sometimes manages
e.g. I finish my work
 3. Something that's a bit more difficult but not impossible
e.g. I put up my hand

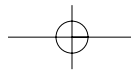
Display these targets prominently near the pupil's desk and on the programme chart or diary. If possible involve the pupil in drawing up the targets so that they feel some sense of ownership of them (while keeping the above principles at the back of your mind!).

- Divide the day into manageable chunks of time and encourage the pupil, for each period of time, to achieve their targets. At the end of each period (e.g. half hour) record on the child's chart which targets they have achieved. Clearly this is easier in secondary school because the day is already divided into classes.



- Record progress visually (on a chart / diary) and tangibly if possible, particularly with younger children (e.g. using counters, blocks or stickers). Older children also need to see evidence of their progress but this can be done more subtly, for example, using a target diary (see Appendix 5 for examples).
- Involve parents in reading the comments on the chart and encouraging progress daily.
- Only comment on positive behaviour. If there is nothing positive to say for a particular period of time, just leave the space blank.
- Build in small, regular rewards. These need not be material rewards. Instead they could be age-appropriate privileges, e.g. going on a message to another classroom, 5 mins computer / Internet time, 2 mins on teacher's chair, an extra minute of play for the whole class at break time.
- Reward the child regularly. 'Choosing time' on Friday afternoon can seem like light years away to a child with ADHD! A small reward at the end of each work period (i.e. at break time, lunchtime and home time) will be much more effective.
- Reward effort, not just achievement. Notice when the behaviour is better than yesterday. Don't wait for it to be perfect.
- Use response cost. Children with ADHD have difficulty visualizing the potential reward so it is often better to give rewards at the start of the time period with the potential to lose them (e.g. start the morning with 10 points and receive reward if 7 are intact by break time).
- Build in an early warning system. The child should always get one calm warning about their behaviour before a point is lost.
- Don't shift the goal posts too soon! Children with ADHD have often been in negative cycles of behaviour for a long time. If they begin to respond to a programme, allow them to enjoy the success they have achieved. If you change the targets too soon you could find they become disheartened and de-motivated.





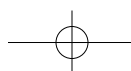
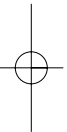
Cube box challenge

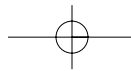
This is a miniature behaviour programme that uses response cost and focuses on one problematic behaviour.

Choose one behaviour (e.g. shouting out) and set a date on which you will work on this. The teacher starts the day with a box with about 30 cubes or counters in it and the pupil has one the same. Every time the pupil shouts out, the teacher takes a cube from the pupil's box. Every time the pupil puts their hand up and waits appropriately the teacher awards the pupil a cube from the teacher's box. At the end of the day the cubes are counted and the person with the most cubes is the 'winner'. In secondary school, an individual teacher could implement a cube box challenge during each of their lessons with a particular pupil over the course of a week.

This provides a fun, positive, supportive way to work on a difficult behaviour area. Use it sparingly, however, or you may find the novelty wears off!!

Examples of behaviour programmes, charts and diaries can be found in Appendix 5.





So, in conclusion...

We hope this booklet has given you some insight into Attention Deficit Hyperactivity Disorder (ADHD) and how it can be managed within the school context. Understanding the world from the point of view of a child with ADHD allows us to empathise more fully and provide appropriate support. The strategies mentioned are useful, however, very often children feel more positively about school and achieve greater success simply because they feel their teachers understand them and are on their side.

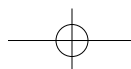
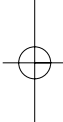
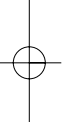
Remember...

ADHD is a genuine and complex disorder.

Life can be extremely tough for children and young people with ADHD.

The strategies used to help these children will benefit all pupils.

School staff are in a powerful position to make changes that will have a positive impact on lives of pupils with ADHD.



Appendix 1 : Diagnostic criteria

- DSM-IV
- ICD-10

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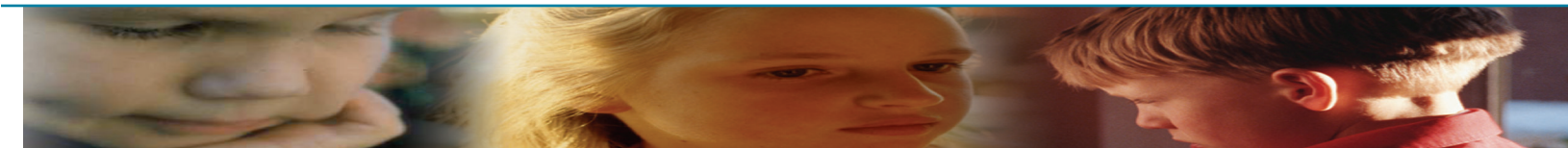
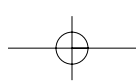
DIAGNOSTIC AND STATISTICAL MANUAL OF PSYCHIATRIC DISORDERS IVth Edition 1994 (DSM-IV)

CRITERIA FOR ATTENTION DEFICIT/HYPERACTIVITY DISORDER (AD/HD)

- A Either 1 or 2
- 1 **Six** (or more) of the following symptoms of inattention have persisted for at least six months to a degree that is maladaptive and inconsistent with developmental level:

INATTENTION

- a) Often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.
- b) Often has difficulty sustaining attention in tasks or play activities.
- c) Often does not seem to listen when spoken to directly.
- d) Often does not follow through on instructions and fails to finish schoolwork, chores or duties in the workplace (not due to oppositional behaviour or failure to understand instructions)
- e) Often has difficulty organising tasks or activities.
- f) Often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework).
- g) Often loses things necessary for tasks or activities, e.g. toys, school assignments, pencils, books, or tools.
- h) Is often easily distracted by extraneous stimuli.
- i) Is often forgetful in daily activities.



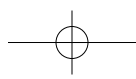
- 2 **Six**, or more, of the following symptoms of hyperactivity-impulsivity have persisted for at least six months to a degree that is maladaptive and inconsistent with developmental level;

HYPERACTIVITY

- a) Often fidgets with hands or feet, or squirms in seat.
- b) Often leaves seat in classroom or in other situations in which remaining seated is expected.
- c) Often runs about or climbs excessively in situations in which it is inappropriate (in adolescents or adults, this may be limited to subjective feelings of restlessness).
- d) Often has difficulty playing or engaging in leisure activities quietly.
- e) Is often 'on the go' or often acts as if 'driven by a motor'.
- f) Often talks excessively.

IMPULSIVITY

- g) Often blurts out answers before questions have been completed.
 - h) Often has difficulty awaiting turn.
 - i) Often interrupts or intrudes on others, e.g. butts into conversations or games.
- B** Some hyperactive-impulsive or inattentive symptoms that caused impairment were present before the age of 7 years.
- C** Some impairment from the symptoms is present in two or more settings, e.g. at school (or work) and at home.
- D** There must be a clear evidence of clinically significant impairment in social, academic or occupational functioning.
- E** The symptoms do not occur exclusively during the course of a Pervasive Developmental Disorder, Schizophrenia, or other Psychotic Disorder, and are not better accounted for by another mental disorder, e.g. Mood Disorder, Anxiety Disorder, Dissociative Disorder or Personality Disorder.



INTERNATIONAL CLASSIFICATION OF DISEASES 10th Edition - World Health Organisation 1992 (ICD 10)

CRITERIA FOR HYPERKINETIC DISORDER

- A Demonstrate abnormality of attention and activity at HOME, for the age and developmental level of the child, as evidenced by at least three of the following attention problems:

- 1 short duration of spontaneous activities
- 2 often leaving play activities unfinished
- 3 over-frequent changes between activities
- 4 undue lack of persistence at tasks set by adults
- 5 unduly high distractibility during study e.g. homework or reading assignment

and by at least two of the following activity problems:

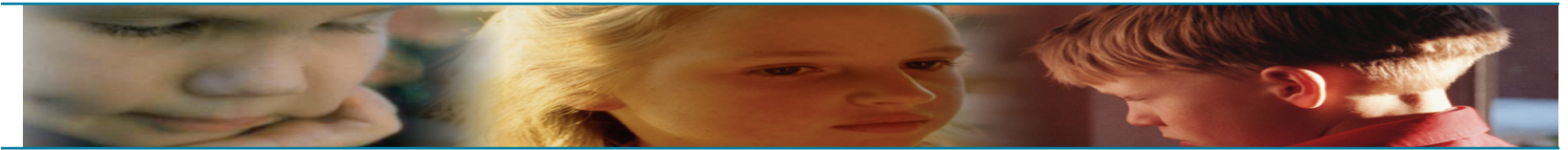
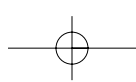
- 6 continuous motor restlessness (jumping, running etc)
- 7 markedly excessive fidgeting and wriggling during spontaneous activities
- 8 markedly excessive activity in situations expecting relative stillness, e.g. mealtimes travel, visiting, church
- 9 difficulty in remaining seated when required

- B Demonstrate abnormality of attention and activity at SCHOOL or NURSERY (if applicable), for the age and developmental level of child, as evidenced by at least two of the following attention problems:

- 1 undue lack of persistence at tasks
- 2 unduly high distractibility, e.g. often orientating towards extrinsic stimuli
- 3 over frequent changes between activities when choice is allowed
- 4 excessively short duration of play activities

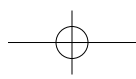
and by at least two of the following activity problems:

- 5 continuous and excessive motor restlessness (running, jumping etc.) at school



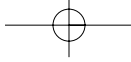
- 6 markedly excessive fidgeting and wriggling in structured situations
 - 7 excessive levels of off-task activity during tasks
 - 8 unduly often out of seat when required to be sitting.
- C Directly observed abnormality of attention or activity. This must be excessive for the child's age and developmental level. The evidence may be any of the following:
- 1 direct observation of the criteria in A or B above, i.e. not solely the report of parent and/or teacher.
 - 2 observation of abnormal levels of motor activity, or off-task behaviour, or lack of persistence.
 - 3 significant impairment of performance or psychometric tests of attention.
- D Does not meet criteria for pervasive developmental disorder, mania, depressive or anxiety disorder.
- E Onset before the AGE OF 6 YEARS.
- F Duration of AT LEAST 6 MONTHS.
- G IQ of above 50

Note: The research diagnosis of hyperkinetic disorder requires the definite presence of abnormal levels of inattention and restlessness that are pervasive across situations and persistent over time, that can be demonstrated by direct observation, and that are not caused by other disorders such as autism or effective disorders. Eventually, assessment instruments should develop to the point where it is possible to take a quantitative cut-off score on reliable, valid and standardised measures of hyperactive behaviour in the home and classroom, corresponding on the 95th percentile on both measures. Such criteria would then replace A and B above.



Appendix 2 : Observation schedules

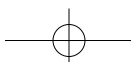
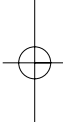
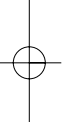
DATE	S.T.A.R.E BEHAVIOUR OBSERVATION CHART	NAME:		BEHAVIOUR TO BE OBSERVED:	
		TRIGGER	ACTION	RESULT	EXPECTATION
TIME	SETTING (i.e. place, people present, activity and child's mood state)				

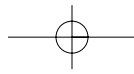


ABC Record

Name: Date:

Antecedent	Behaviour	Consequences





Appendix 3 : Education plans

Stage 3 Education Plan

Teacher Class

Child Date moved to Stage 3

Stage 1 & 2 dates

Current presentation and specific needs

General aims

Target

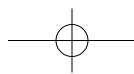
Strategies

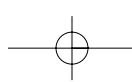
Success Criteria

Responsibilities

Monitoring & assessment arrangements

Review date:





Stage 3 Education Plan

Teacher Mr Patient Class P6

Child Eoin Brown Date moved to Stage 3 28.10.03

Stage 1 & 2 dates April 03, June 03

Current presentation and specific needs

Eoin is able pupil
Difficulties - attending to task, relating to peers

General aims

To improve Eoin's concentration, relationships in class and self esteem

Target

1. Eoin will attend to a task within his ability for 10 minutes at a time without prompting
2. Eoin will engage in unstructured play with peers at break-time without negative incident

Strategies

- Attention training
- Circle time
- Behaviour programme with targets relating to above

Success criteria

1. One 10 minutes session of concentrated work per day
2. Less than 3 negative incidents per week

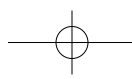
Responsibilities

Teacher - run circle time and behaviour programme
SENCo - attention training (twice a week)

Monitoring & assessment arrangements

Behaviour programme monitored daily by teacher and parent through chart
EP monitored by teacher against success criteria weekly

Review date: 15 December 2003



Stage 3 Education Plan

Teacher Miss Browne Class P2

Child Darren McNamee Date moved to Stage 3 1.9.03

Stage 1 & 2 dates September 02, April 03

Current presentation and specific needs

Moderate learning difficulties, aggressive behaviour towards peers

General aims

Ongoing academic progress at his own level and improved peer relationships

Target

1. Darren will be able to read the first 10/100 key words and identify 15 letters and sounds (a, e,i,o,u,s,x,t,p,m,r,d,n,c &z)
2. Darren will play cooperatively with peers during structured play with minimal adult support

Strategies

- Small group literacy support (daily)
- Behaviour programme (cube box challenge - target = kind to friends)
- Cooperative learning tasks

Success criteria

Read 10 words on 3 separate occasions without prompting
 Read 15 letters on 3 separate occasions without prompting
 1/2 hour successful play 3 mornings out of 5

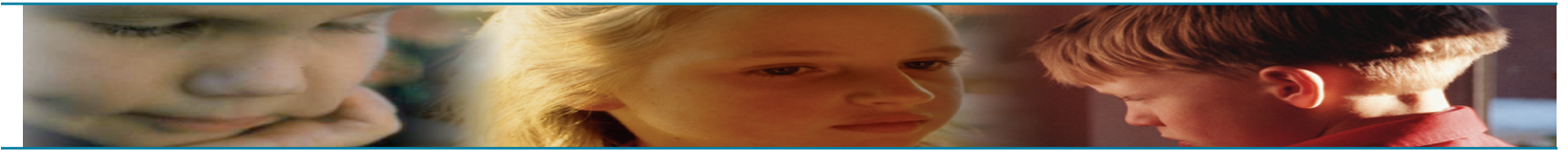
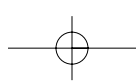
Responsibilities

Literacy support - SENCo
 Play support - Teacher and Classroom assistant
 Support behaviour and revise words / letters - parents

Monitoring & assessment arrangements

Cube box monitored daily by teacher and classroom assistant
 Literacy progress assessed weekly by SENCo

Review date: October 2003



Appendix 4 : Useful websites

Useful websites

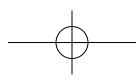
www.attention.com

www.helpforadd.com

www.adders.org

www.cdipage.com

www.add.org (this one sings!)



Appendix 5 : Behaviour programmes, charts and diaries

Behaviour management programmes for children with ADHD

Enclosed are sample behaviour management record sheets.

Targets have been chosen because there's one the child can currently manage, one that he/she achieves some of the time and one that will be a bit of a challenge.

The day is divided into time chunks according to the age and attention of the child.

The 'hints' included are applicable to use of the programme with any child.

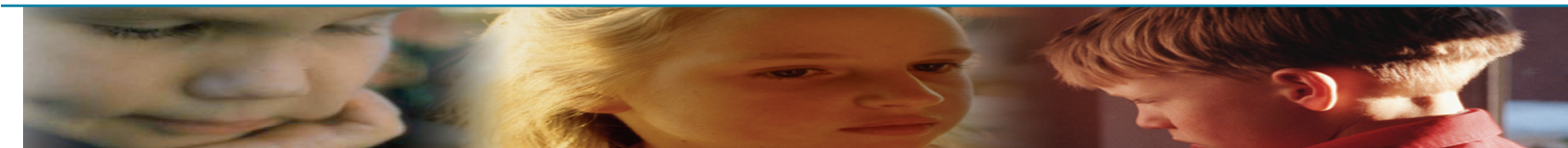
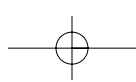
The important ingredient in the implementation of the programme with the child with ADHD is the use of response cost. It seems children with ADHD respond better to this than to the notion of a possible reward.

So for each target/session award the child has 2 or 3 points to start with. If their behaviour is inappropriate, 1 point is removed as a warning. If 1 point/tick remains for each session the child is on full marks.

Give the child the points for each target in a visible/tangible way at the start of each session, e.g.

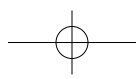
- badges on a teddy
- counters on his desk
- ticks on the blackboard
- stickers on a laminated card

The advantage of this method is that the child has a visual reminder and a built-in warning system.



Hints on using the behaviour programme

1. Try to catch the pupil being good (even when it's difficult!) so that success can be achieved early on.
2. If there is nothing good to say or if it is not appropriate to award a tick, leave the square blank rather than including anything negative. If it is not appropriate to say anything positive and you do not want to leave the square blank, try to say something that suggests that this can improve such as "Tomorrow will be better" or "We'll try again tomorrow".
3. If the pupil has a successful day, he should be given a small reward, such as being allowed to go on a message or collect in the books. Initially if the pupil achieves 5 points out of a possible 10, that should be rewarded as a successful day. As behaviour improves they could aim to achieve more.
4. The sheets could be punched and kept together in a ring binder that goes home on a Friday.
5. If three out of five days have been successes in any week, the parents may like to give a reward at home.
6. As the pupil's needs change the target behaviours can be changed accordingly. However, it is worth bearing in mind that continued success on easy criteria should have a positive effect upon the child's self-esteem and can help him get into the "habit" of appropriate behaviour. Be careful not to change the goal-posts too soon.



Sample behaviour programme for a nursery child

People involved in the programme:

- ***** (Nursery teacher)
- ***** (Nursery assistant)
- ***** (Mother)

All adults who have contact with ***** should be made aware of the behaviour programme and should follow it.

Aim of behaviour programme

To reduce the frequency of *****'s inappropriate behaviours by providing consistent, positive feedback for appropriate behaviour.

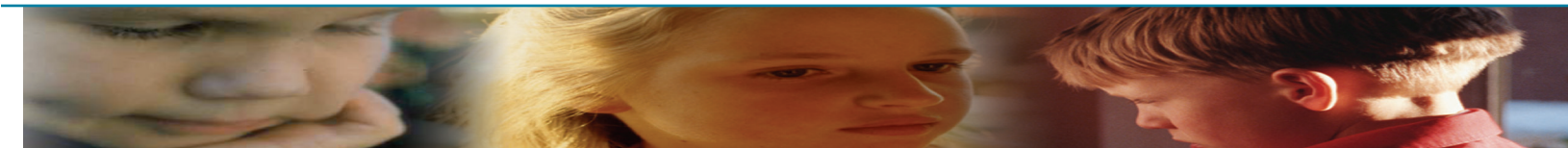
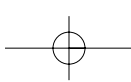
In other words, we want to shift the emphasis from bad to good behaviour.

Outline of behaviour programme

As ***** is too young at this stage to understand specific behaviour targets, the aim of the programme is for ***** to behave as directed by nursery staff during specified activity periods (e.g. free play, outside play, story, lunch etc). Nursery staff will facilitate this by (a) clearly stating behavioural expectations at the beginning of each activity and (b) explaining to ***** in explicit terms what she has done well/poorly in each activity period.

A behaviour sheet will be stamped with a smiley face for each activity where ***** behaves as expected. A target number of smiley faces will be set and ***** will be rewarded in school and at home on a daily basis if she meets this target.

For each activity, ***** has a number of "warnings". A visual reminder of the warnings will be needed (e.g. 3 badges on her jumper). If ***** misbehaves again during an activity, one of the badges is removed as a warning. If she misbehaves again, a second badge is removed. If at least one badge remains at the end of an activity, ***** receives her smiley face on the behaviour sheet. Before ***** starts a new activity, all three badges should be returned to her jumper.



Ultimately it is hoped that, with constant reinforcement, ***** will learn to recognise what behaviours are acceptable/unacceptable in the nursery classroom situation.

Remember!

The emphasis should always be on positive reinforcement of good behaviour (i.e. paying attention to ***** when she is being good).

Try to catch ***** being good as often as possible so that success can be achieved early on. Praise her verbally and explicitly state the precise reason for the praise (e.g. “Good girl ***** , I like it when you help me tidy up”).

***** will benefit from reminders at the start of each activity such as “if you sit nicely on the carpet it will help you get a smiley face”.

Ignore minor misbehaviours. Praise other children who are appropriately engaged. Praise ***** as soon as she displays an appropriate behaviour.

If misbehaviour can be anticipated, try to distract ***** by engaging her in another activity / asking her to help with something etc.

When misbehaviour occurs, remind ***** of what you expect from her (e.g. “At story time the rule is we all sit on the carpet”).

If there is no improvement then:

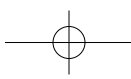
Remind ***** of the consequences of her actions (e.g. that she will lose a badge if the behaviour continues).

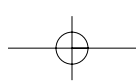
If there is no improvement then:

Implement the sanction swiftly and consistently (e.g. remove one badge from her jumper).

For behaviours that are too serious to ignore, Time Out (see below) may be used if considered appropriate. ***** must be aware of what behaviours will result in time out and a warning system like the one outlined in the point above should operate.

If ***** has not achieved a smiley face at the end of an activity, tell her so in a matter-of-fact, non-emotional way that she cannot have a smiley face because...





If ***** has not achieved a smiley face at the end of an activity, leave the square blank rather than including anything negative.

Rewards

***** should be rewarded every time she achieves a smiley face on her behaviour sheet.

If possible, reward should gain ***** appropriate attention and make her feel special (e.g. leading the line, setting the dinner table etc).

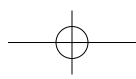
At the end of each successful day, ***** should also be rewarded at home. ***** should not receive any special treats on days when she has failed to meet her target of smiley faces.

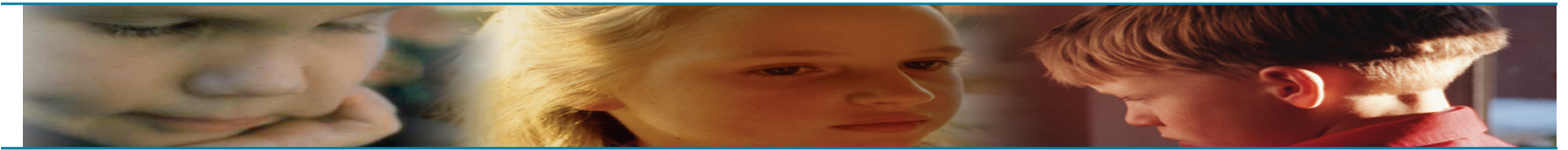
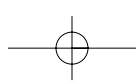
To sustain interest in the programme it may be necessary to change the rewards from time to time.

Time out

Time out is based on principle of removing the child from all sources of reinforcement for a brief period.

- When a particularly unacceptable behaviour occurs and ***** has not responded to warnings given, calmly and unemotionally say, "You cannot stay with the class if you hit, etc, you need to go to the quiet room".
- ***** should remain supervised in the quiet room for a short period of time (e.g. 3 minutes). This time only begins when she is sitting quietly. A timer rather than a clock or watch should be used. The adult should not talk to ***** during this time or make eye contact.
- If ***** is doing something inappropriate at the end of this time, wait for her to stop, allow a few seconds to pass and tell her, "You can join the class now *****".
- If she refuses to join the class again, ignore her until she does.
- Do not hold a grudge when ***** comes out of the Quiet Room, but wait for her to display any appropriate behaviour and praise her for it.





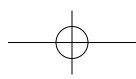
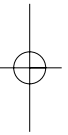
If time out has been used for non-compliance, once the 3 minutes are up, you should repeat the original command.

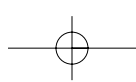
Teacher: ***** , tidy up you puzzle.

*****: Okay.

Teacher: Good girl, I'm pleased you are tidying up; you have made a good choice.

If ***** refuses to carry out the command then the entire sequence should be repeated.





Guidance notes for the target diary

General points

The target diary is used to assist the child in maintaining appropriate behaviour in school.

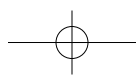
Although the target diary will not effect radical change, it will hopefully act as a tangible reminder to the child to focus on appropriate behaviour.

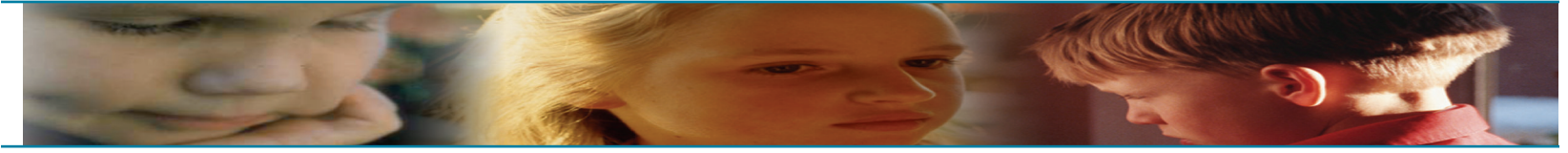
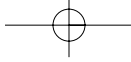
The target diary is not a report card in which all behaviour needs to be recorded.

3 targets have been identified for the child to focus on. Your comments should relate to these targets only. Any other information about the child's behaviour should be recorded separately and passed to the child's Year Head.

Filling in the diary

- If the child achieves any of their targets during your class you should tick the appropriate box.
- Try to catch the pupil being good (even when it's difficult!) so that success can be achieved early on.
- Reward effort, not just achievement.
- The child will benefit from reminders to behave. It works better if these are worded positively and the child is reminded of their specific targets.
- Feel free to add a positive comment if appropriate.
- If nothing positive can be said or it is not appropriate to award a tick, please leave the square / space blank rather than including anything negative.
- If it is not appropriate to say anything positive and you do not want to leave the space blank, try to say something that suggests that things can improve such as "Tomorrow will be better" or "We'll try again tomorrow".
- Build rewards into the programme at the end of a successful day or week. Parents may also like to give a reward at home.





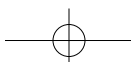
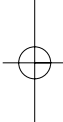
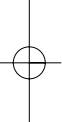
Target Diary

Name:

Class:

Week Beginning:

*Reproduced with the agreement of the
B.E.L.B. Behaviour Support Team*



Attention Deficit Hyperactivity Disorder

A Practical Guide for Schools

Teacher

- Following a weekly meeting with their Year Head, the pupil's targets will be set and recorded on page two.
- The pupil will give the target diary to you at the start of each lesson.
- At the end of the lesson we would ask you to complete the daily target sheet.
- Please tick each target met.
- There is space for positive comments if desired.

Year Head

- At the end of each day the pupil should bring target diary to you.
- Please review progress and make a comment in space provided.

Pupil

- You must look after this diary as it is your responsibility
- You will be given a point for each target achieved in each lesson.
- In addition three extra points will be awarded each day if all sections have been completed by your respective teachers.

Pupil

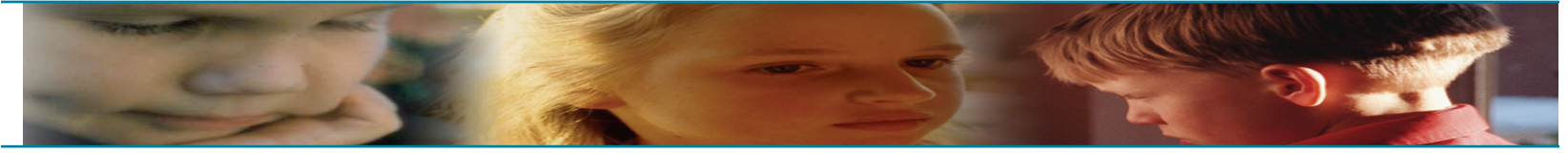
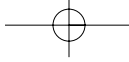
This week's targets:

1	
2	
3	

I will try my best to meet these targets this week and from now on.

Signed:

Date:

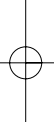
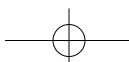


Day Day

Day	T1	T2	T3	COMMENT	Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
Other					
Year Head Comment					
Signed					

Day Day

Day	T1	T2	T3	COMMENT	Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
Other					
Year Head Comment					
Signed					



Attention Deficit Hyperactivity Disorder

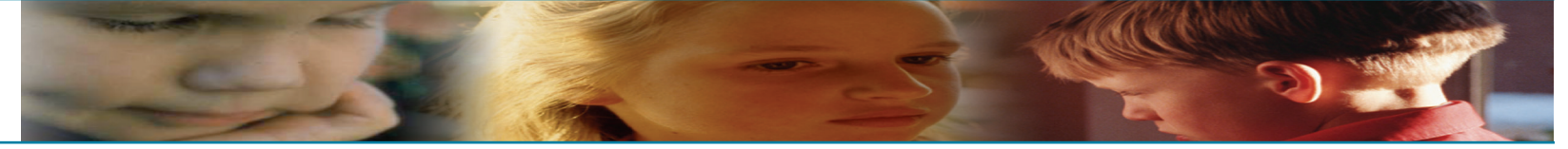
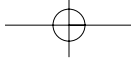
A Practical Guide for Schools

Day

Day	T1	T2	T3	COMMENT	Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
Other					
Year Head Comment					
Signed					

Day

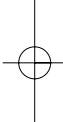
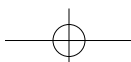
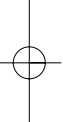
Day	T1	T2	T3	COMMENT	Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
Other					
Year Head Comment					
Signed					



My Progress - Updated Weekly

	Week 1	Week 2	Week 3	Week 4	Week 5						
Monday											
Tuesday											
Wednesday											
Thursday											
Friday											
	110	100	90	80	70	60	50	40	30	20	10

Pupil's Assessment of Progress

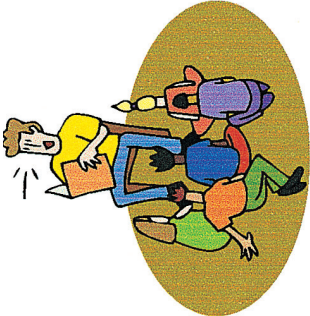

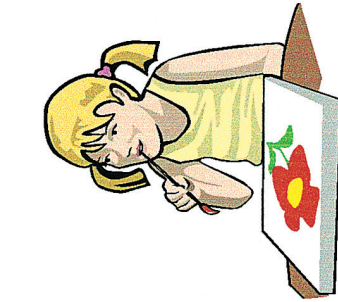
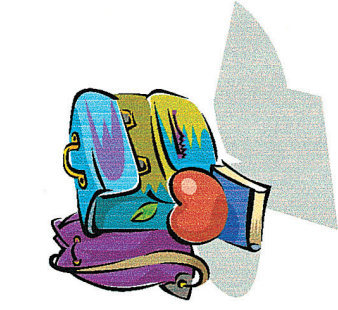
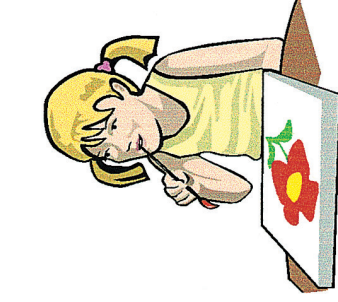


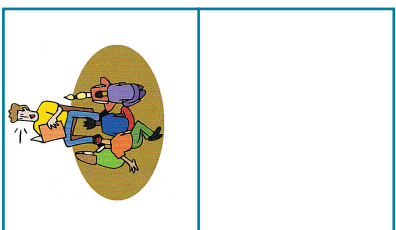
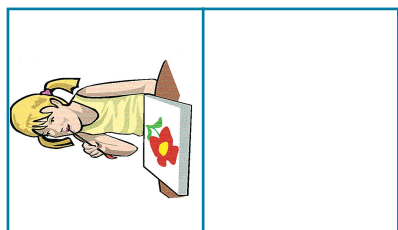
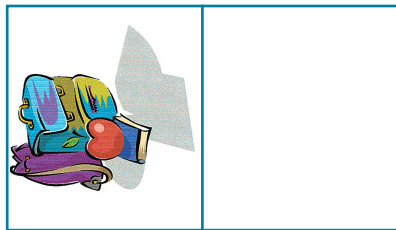
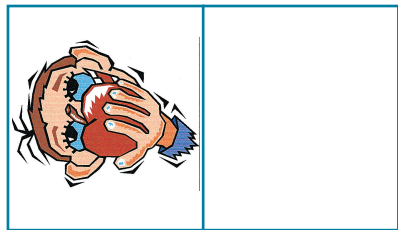
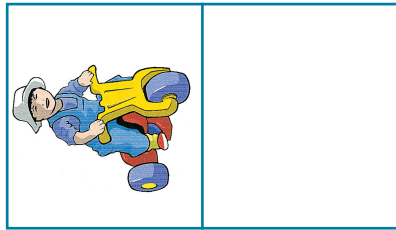
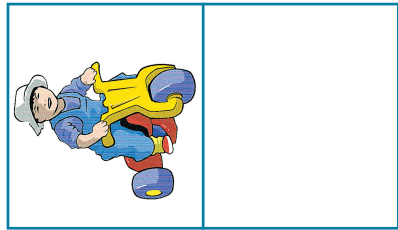
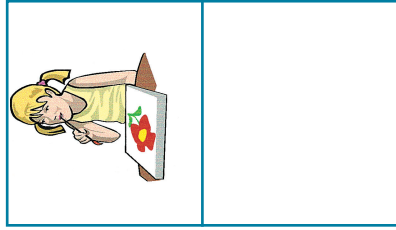
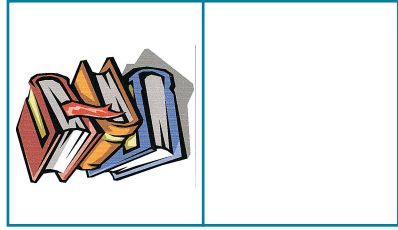
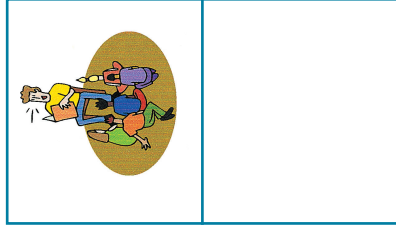
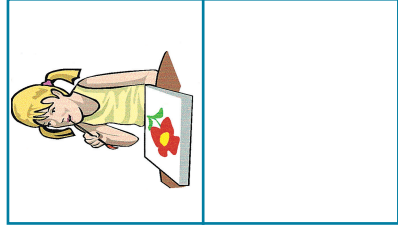
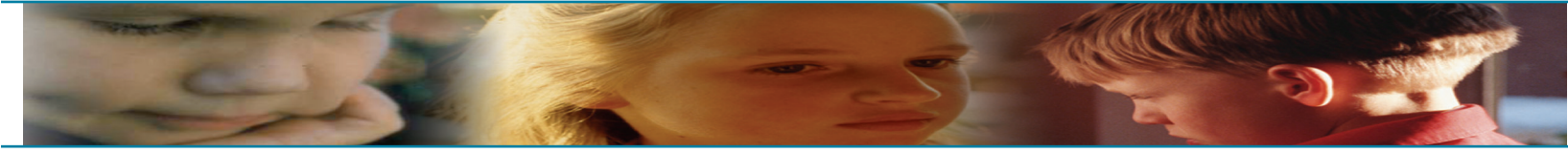
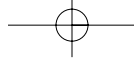
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Today is

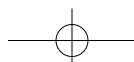
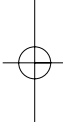
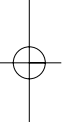
My name is



Today is

My name is



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Today is
 My name is

Target for today =

	I will be nice to my friends	I will finish my work	I will sit in my seat	My teacher said...	I said...
Morning →					
Break →					
Lunch →					
Lunch →					
Hometime					

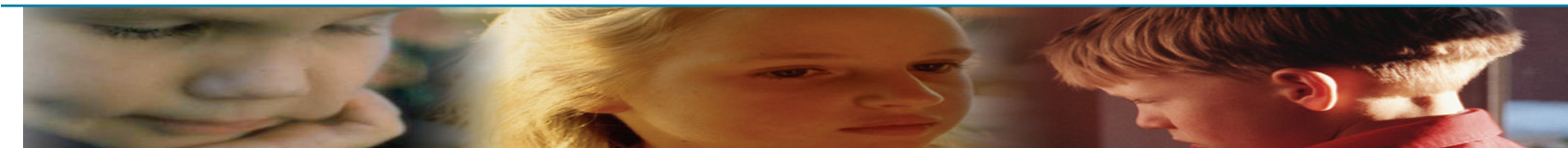
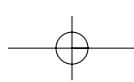
Today's Total

Lunch

Break

Checked by parent

Comment



Appendix 6 - Useful Contacts

Belfast Education & Library Board

40 Academy Street
BELFAST
BT1 2NQ

Tel. No. (028) **9056 4033**

Fax No. (028) **9056 4386**

Website www.belb.org.uk

North Eastern Education & Library Board

County Hall
182 Galgorm Road
BALLYMENA
BT42 1HN

Tel. No. (028) **2566 2558**

Fax No. (028) **2566 2441**

Website www.neelb.org.uk

Southern Education & Library Board

3 Charlemont Road
The Mall
ARMAGH
BT61 9AX

Tel. No. (028) **3751 2524**

Fax No. (028) **3751 2598**

Website www.selb.org.uk

South Eastern Education & Library Board

Grahamsbridge Road
Dundonald
BELFAST
BT16 2HS

Tel. No. (028) **9056 6924**

Fax No. (028) **9056 6916**

Website www.seelb.org.uk

Western Education & Library Board

1 Hospital Road
OMAGH
BT79 0AW

Tel. No. (028) **8241 1411**

Fax No. (028) **8241 1400**

Website www.welbni.org

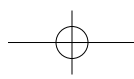
NI-ADD Support Centre

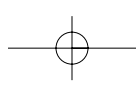
71 Eglantine Avenue
BELFAST
BT9 6EW

Tel. No. (028) **9020 0110**

Fax No. (028) **9020 0112**

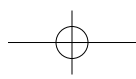
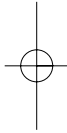
Website www.ni-add.org.uk





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