ADHD – School strategies good practice guide

This guide has been co-produced by both mainstream primary and secondary school SENCo's, in addition to specialist teachers from the Primary Inclusion Team (PIT), Secondary Inclusion Team (SIS), Speech and Language Therapist and Educational Psychologist.

While this guide is set into primary and secondary strategies, there will be cross over between strategies which can be used in both settings, taking into consideration the developmental age of the child or young person you are supporting. While this is a guidance document, it is not an exhaustive list and there may be many other strategies which you currently use in your school.

Early Years/Primary

Unstructured Times

- Zoned areas for unstructured times e.g. break and lunchtimes
- Staff providing structured activities during break and lunch
- Invite only lunchtime club
- Invite only after school clubs e.g. Boogie Bounce, Gross & Fine motor skills

Whole School

- Self-regulation charts
- Social and emotional interventions, e.g. Lego Therapy, Social Skills, Turn-Taking
- 'Home school link book' to support school and home working together
- Differentiation of Behaviour Policy
- CPD for staff/sharing of strategies at staff meetings
- Nurture style provision
- Sensory room
- Transitions and teacher meetings to share information
- Strategies implemented consistently for a sustained period of time
- Consistency from all staff
- Observe practice in other schools for staff to adopt different strategies
- Understanding children's needs and those other needs could be presented
- SENCO input to challenge/support staff with their teaching
- Look at the child and clearly use their name before you asking them to do something/issue an instruction

Classroom Practice/Management

- Quality first teaching
- Use of timers e.g. sitting in assemblies
- Language of choice
- Fiddle/fidget toys- blu tac, spinners, cubes, tangle toys, cushions theraputty
- Talking tokens
- Box of interests
- Now and Next
- Individual workstations to reduce distractions
- Ensuring that the right member (key adult) of staff is with the allocated child/class of children
- Management of noise level
- Giving children a responsibility e.g. giving books out
- Visual timetables
- Learning friends/puppets EY
- Consideration of seating plan
- Tasks broken down into smaller chunks supported by task list
- Look at the child and clearly use their name before you asking them to do something/issue an instruction

Individual strategies for specific pupils

- Additional TAs to work with/support specific pupils
- Support for parents (understanding of children's needs) and consistency at home, e.g. support with difficulties around sleep
- Pupil profiles/passports
- Following the child's interest
- Use of personalised rewards e.g. jigsaw puzzle pieces, figures, football cards (children's interests)
- Position of child in the classroom
- Small group/ 1:1 outside of the classroom to develop impulse control skills and emotional regulation
- Fidget/sensory breaks timetabled into each lesson for the child to allow for movement
- Consideration of sleep pattern – may need individualised timetable which takes this into account e.g. later school start time or reduced task demands when parents report difficulties around sleep the night before
- Continued observation and assessment of interventions through Individual Education Plan or similar – specifically monitor difficulties co-morbid to ADHD such as anxiety, depression and self-esteem

Secondary

Unstructured Times
- Extra-curricular / boxing class before or during school time
- Access to iPad in unstructured and lesson time
- Place to go at break lunch which meets the young person's interests and is structured – groups could be made up around child's individual interests
- Adult outside on the yard to provide structured activities such as football

Whole School
- Whole school training through CAMHS and adapting teaching to suit learners
- Inclusion rooms
- Nurture room
- Key support staff to report to e.g. pastoral
  Pen portraits to incorporate child and parent voices to inform intervention
- SENCO input to challenge/support staff with their teaching
- Peer to peer support – if pupil responds well to one teacher, what are they doing and for them to support another teacher?
- Keep on agenda item – ½ termly or termly to remind all staff of good practice and children's individual needs
- Systems to be 'whole child approach'
- Use of CPOMS to help sharing of information/strategies which support individual children
- Look at the young person and clearly use their name before you asking them to do something/issue an instruction

Classroom Practice/Management
- Quality first teaching
- Time out card
- Children given responsibility in the classrooms
- TA support to help children to refocus
- Box of fidget toys – list of resources for staff
- Timers to support attention
- Individual work station for tasks that require extended concentration
- Provide short, sharp tasks
- Timetable in sensory breaks within the lesson time
- Use task plans to break tasks down and help to focus their attention
- Use of self-monitoring skills e.g. get them to reflect, evaluate and plan for a set time period each day to improve their awareness of themselves
- Reminders of expectations
- Chunking of task
- Visual task plan
- Responsibility/movement in class

- Visual instructions
- Now and Next instructions
- Look at the young person and clearly use their name before you asking them to do something/issue an instruction

Individual strategies for specific pupils

- Pen Portraits including:-
    - Seating of child ,
    - Their Likes/dislikes
    - "What helps me to learn"
- Finding shared interests
- Specific targets in lesson with rewards
- Diary for monitoring child in class
- Communication with CAMHS to establish medication needs and any changes
- Named link person
- Celebrate successes e.g. postcards, phone calls, emails certificates, green writing in planners
- Circle of friends
- Small group work/1:1 work to develop impulse control and increase emotional regulation
- Consideration of sleep pattern – may need individualised timetable which takes this into account e.g. later school start time or reduced task demands when parents report difficulties around sleep the night before
- Continued observation and assessment of interventions through Individual Education Plan or similar – specifically monitor difficulties co-morbid to ADHD such as anxiety, depression and self-esteem