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| ADHD Parent Questionnaire |

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| Name of person completing this form: Date: |
| Child’s NHS No: | Surname: | Forename: |
| Also known as: | Date of Birth:  | Age |
| Address:  | Postcode:  |
| Residence: Tameside [ ]  Glossop [ ]  | Tel No(s):  |
| Gender of child: Female: [ ]  Male: [ ]  Trans-gender: [ ]  |
| Living with parent/ carer: | Relationship to the child: |
| Parental responsibility: |
| ***(Failure to provide GP details may result in the referral being delayed or returned to the referrer)***GP NameAddress: |
| Ethnic Background: |
| White | Mixed | Black | Asian | Chinese |
| British [ ]  | Wht & Blk Caribbean [ ]  | African [ ]   | Bangladeshi [ ]  | Chinese [ ]   |
| Irish [ ]  | Wht & Blk African [ ]  | Caribbean [ ]   | Indian [ ]  |  |
|  | Wht & Asian [ ]  |  | Pakistani [ ]  |  |
| Other [ ]  | Other [ ]  | Other [ ]   | Other [ ]  | Other  |
| Specify ethnic origin if not listed above or classified as “other” : -  |
| Nationality : -  |
| First Language : - | British Sign Language :  | Interpreter needed? Yes: [ ]  No: [ ] Language:  |
| Religious/Spirituality background/beliefs described as: - | No beliefs:  |
| Other Agencies involved: (for example Social Care, INSPIRE, Early Help, Young Carers) |
|  | Tel No:  |
|  | Tel No:  |
|  | Tel No: |
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| Household / Family / Significant Others Name Relationship U18? DOB Address / Tel No |
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|  Is a Carer for someone else? YES / NO  | Details |

Early Risk Factors Present (tick those that apply and make notes below):

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|  | Premature birth\* |  | Head injury involving loss of consciousness\* |
|  | Low birth weight\* |  | Parental health issues\* |
|  | Early trauma (e.g. physical, sexual emotional abuse)\* |  | Maternal smoking and/or substance use during pregnancy (including alcohol)\* |
| \*Please detail: |
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| Has the child had their cognitive ability assessed? | Yes | No |
| \*Please Detail: |

Medical History

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| Does the child have any medical diagnosis? | Yes | No |
| \*Please Detail: |
| Is the child currently taking any medication? | Yes | No |
| \*Please Detail: |

Peer Relationships

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| Describe the quality of the child’s friendships |

Family Background

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| Do any family members have diagnosed or suspected ADHD? |
|  Yes - diagnosed | Relationship to child:  |
|  Yes - suspected | Relationship to child:  |
|  No |  |
| Do any family members have other conditions (e.g. autistic spectrum disorder, learning disability)? |
|  Yes  | Relationship to child and learning difficulty:   |
|  No |
| Do any family members have a specific learning difficulty? |
|  Yes | Relationship to child:   |
|  No |
| Do any family members have a history of mental health difficulties? |
|  Yes  | Relationship to child:   |
|  No |

Is there any history of drug or alcohol use during pregnancy?

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Home

Your child may complete tasks inefficiently, e.g. by missing out steps in chores or other activities which then need repeating, not paying attention to instructions, or breaking items due to rushing (not paying attention to what they are doing). Your child may make lots of mistakes in their homework even when they understand what to do, and homework may be presented as messy with lots of corrections. The child may not notice important information in the environment, such as road crossings or signs of danger. It may seem that your child is not paying attention or is daydreaming. Family and visitors to the home may comment on this. Alternatively, they may appear to listen, but subsequently forget or be unable to repeat instructions. In sports, for example, they may appear to listen to the coach but fail to follow through on instructions.

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| *Is this symptom present? If yes, give examples and probe about how it causes impairment at* ***home******Please do not use ‘not applicable’ (N/A). If the symptom is not present please state ‘not present’*** |

Home

At home or clubs this symptom can be observed by your child frequently changing the toy they are playing with or the activity they are doing. They may only stay on task for a few minutes. This may be because they have become bored or because something more engaging has caught their eye. They may struggle to complete activities and tasks, even with adult support. They may avoid reading books or sitting through a movie, for example. They may also lose their train of thought when engaged in conversation.

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Home

When given jobs to do at home, they may miss out some tasks and/or not finish everything they set out to do. Common examples are not completing their self-care routine, including dressing; forgetting items when going to shops and/or returning with random items; leaving taps running; and needing many reminders to complete an activity. Even when following written instructions, they may miss out steps, for example when putting together a toy, resulting in errors and toys being incorrectly assembled.

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Home

They may seem to always be in a rush, or running late to clubs or activities. They may undertake tasks in an order that seems illogical to others due to poor planning and organising skills. Thy may appear untidy and have difficulty finding their toys or clothes. Older children may find it hard to balance homework and leisure activities, not due to a disregard for their homework but due to poor time management and organisational skills. They may have impaired relationships due to missing events or letting down friends. They may lose or misplace items such as their bus pass, keys, clothing, schoolwork and toys, and have no inclination of where or when they last had the item. This means that they may turn up for activities unprepared and/or without the equipment or materials that they need, for example without their coat, scarf, football, tennis racket, USB stick and/or paperwork.

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Home

They may avoid or delay tasks requiring mental effort. They may not persevere on tasks they find hard and/or repetitive. The child may procrastinate and put off homework tasks. When asked to do a chore, they may complete smaller tasks first and put off more intensive tasks, and/or protest a lot about having to complete the task. They may join clubs but disengage from activities that lack physical stimulation or activity. They also may avoid games they perceive to be long, repetitive and/or educational, becoming oppositional at these times as they find the task aversive.

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Home

They may appear to frequently be daydreaming and/or observed to quickly shift focus to another (more stimulating) task. They may be easily distracted by their surroundings, including activities and/or background noise (such as the television) that others seem to be able to block out or ignore. Multitasking may be particularly challenging. They may apply coping strategies that mask this symptom, such as preferring to do homework in a quiet room.

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Home

They may frequently forget where they left something, and spend a lot of time searching for objects, toys, clothes, etc. They may forget to attend appointments, meetings or clubs. They may forget to communicate important information and/or letters from school to parents/carers (which remain at the bottom of their school bag). When visiting friends or relatives, they may not collect all of their property, even items or toys that are important to them. They may need reminders to do routine tasks, such as brushing their teeth.

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Home

They may be observed to be fidgety and restless, even when watching television, at the dinner table and/or in the car. The child may fidget even when engaged on a task or activity they find interesting, or when feeling tired. They are frequently being told to stop rocking back on their chair, kicking their legs and/or fiddling with objects. These behaviours may cause problems in the cinema, in church and/or in restaurants. They may have difficulty settling down. In particular, they may struggle to stay seated even when this is compulsory or important, getting up multiple times. They may need constant engagement to help them remain seated on public transport and they may struggle to cope with long journeys. They may run around and climb on objects despite attempts from you to manage this behaviour.

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Home

They may be rarely observed to engage in quiet activities, instead being described as loud, on the go and overly active. When asked to play quietly, they may go off-task because they get up, run around and/or make a lot of noise. They may struggles to adhere to social norms and control behaviour in settings such as museums, galleries or church. They may also disturb others by talking throughout television programmes or at the cinema.

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Home

They may be described as being constantly on the go from morning to night and struggling to settle at bedtime. Young children may seem like a whirlwind, moving from task to task, running around, and not engaging with activities. On public transport the child may require additional supervision to ensure that they stay seated and safe. Do you feel worn out by the child? Older children may present as less chaotic but still struggle to settle and fully engage. They may report a desire to relax but feel unable to ‘switch off’, even when they go to bed.

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Home

They may have difficulty waiting for their turn to speak and instead blurt things out or interrupt others. They may struggle to follow the ‘turn-taking’ rules of conversation but instead seem motivated to say immediately what is on their mind (even if this is unrelated to the topic of conversation). They may jump from topic to topic, having an endless narrative, and dominate conversations as they struggle to stop talking. They may also seem to be impatient for others to finish speaking. Older children may finish other people’s sentences for them. They may intrude on the conversations, private space, or activities, of others. They may understand the social boundaries, but lack the patience to manage them. They might interrupt private conversations and their behaviour may be perceived as attention seeking. They may also not seem to respect the privacy of parents/carers or siblings, using the possessions of others without asking. They may act without thinking through the consequences of their behaviour. Reprimands may have had limited effect. They may be persistently chattering, even when they know the situation calls for quiet.

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Home

They may be observed to find waiting aversive and become quickly impatient. They may also become overly emotional when something that they want is not available. They may avoid standing in line in a queue or push to the front, speak out of turn, and snatch items. They may attempt to wait but becomes unmanageable, disruptive, or embarrassing. Do you have to leave situations, for example when shopping in the supermarket? This may even be the case when queuing for something they desires, such as a ride at a theme park.

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**Authorisation**:

Signed: ……………………………………….. Print Name:………………………………………

Date

Relationship to child/young person: