

ADHD DIAGNOSTIC ASSESSMENTS FOR PRIMARY SCHOOL-AGED CHILDREN: INFORMATION ON THE ASSESSMENT PROCESS

Our assessment and diagnosis process follows best practice guidelines of the UK National Institute for Health and Care Excellence (NICE, 2018). To assess and diagnose ADHD in young people or adults information about the symptoms are gathered from various sources. It is important to have the perspective of the client as well as others significant in their life ('informants' or 'observers'). As ADHD is considered a 'neurodevelopmental' condition, the symptoms must have started before the age of 12 years old and continue to the present. It is for this reason that we ask for school reports if they are available, and to speak to a parent. It may also be helpful to speak to a partner, friend or sibling who knows the client well and can comment on their symptoms now. If it is not possible to involve an informant live in the interview, then contact can be made by email and questionnaires completed instead. Sometimes adults are not able to include informants or find school reports. It is still possible to arrive at a diagnosis but having access to information from an informant increases the confidence with which the diagnosis can be given. If a report is needed for school/college, or to request NHS services, please let us know. The amount and detail of documentary evidence required by different bodies varies. This will be reflected in the length and complexity of our report, and hence our fee.

The psychological assessment process usually takes place with a combination of in person and video call meetings. In person meetings may take place in West Sussex, Surrey or Kent. Depending on availability, and especially when the family have a tight timeframe, we cannot always guarantee that a preferred date will match the family's preferred location, and generally, a little flexibility is likely to be needed. As locations vary over time, we will confirm location at the point of booking. If the time and location does not meet a family's needs, we are always happy to recommend another service which may be able to help. We usually conduct assessments as a team; this means that it won't be a single person doing the entire assessment. Team assessments provide a more robust and objective assessment and allow for multidisciplinary input, crucial when meeting quality standards such as NICE. Sometimes the meeting is recorded. If this is to be the case, it will have been discussed with you first and consent gained. An ADHD Full Diagnostic Assessment is broken down into two stages, each with smaller steps:

Part 1: Initial Consultation ('ADHD Suitability Assessment' or 'Screening Assessment')

1. Questionnaires are sent out to the parents and child and returned to us a minimum of two weeks prior to the first appointment. They will include questionnaires on ADHD, but also other neurodevelopmental conditions and mental health problems that are known to commonly co-occur with ADHD.

2. Initial consultation - psychological assessment interview: This lasts 60 minutes and amongst other topics will explore current problems, including any symptoms connected to potential neurodiversity and/or mental health issues experienced in the past or currently. It is conducted online and most of it is with the parents, with the child encouraged to attend briefly. One of the aims of this interview is to check the 'suitability' of further diagnostic assessment, i.e. whether ADHD is sufficiently likely to warrant further assessment. Optional: Sometimes health insurers require this initial assessment before they will authorise payment for the full diagnostic assessment. If this is the case, your fee will include a brief report indicating our recommendations.

Part 2: ADHD Full Diagnostic Assessment

3. Structured diagnostic interview 60 mins (Young DIVA). This is conducted online with the parents.
4. Observational session (60 mins): Usually conducted in person, two assessments are completed with the child: The first 30 minutes of the session feature QB Check, a computer based objective test of attention and concentration. Further information about this test are available in a separate handout. The last 30 minutes feature play-based activities to encourage engagement whilst questions from the Young DIVA are integrated informally.
5. School reports or documentary evidence of childhood functioning before the age of 12 are sent to us if available. We also have a 30 minute meeting with the school SENCO or class teacher. If this is not possible, as a minimum we ask for the child's teacher to complete some questionnaires.
6. Completion of further questionnaires may be requested if there are any areas of functioning requiring further clarification.
7. Feedback meeting 30 minutes. We share our opinion on whether the criteria for a diagnosis of ADHD has been met or not. We will then explain why we gave the diagnosis, or in cases where the diagnostic criteria have not been met, why we have not made the diagnosis. We will make recommendations for further treatment.

Optional: If the option of having a report has been chosen, a draft report is shared by email and any requested amendments made. The report is then finalised and can be shared with others. One of our recommendations may include therapy. If we do recommend this, we cannot guarantee this will be with the same psychologist who conducted the assessment originally, or follow on immediately after the assessment.

Please note: If there are multiple complex difficulties then further assessment sessions and/or liaison with other professionals or informants may be recommended. This will always be discussed first. For example, there may be symptoms of an additional neurodevelopmental condition such as Autistic Spectrum Disorder or Tourette's, or cognitive or executive function difficulties which require observational or performance-based assessments. In the case of children or young people seeking supporting evidence for an application for access arrangements/reasonable adjustments at school/college/university exams a cognitive assessment is very likely to be needed. These additional investigations will incur a further cost to be negotiated. If medication is desired, then an additional meeting with a Child Psychiatrist can be arranged. We will refer you and share our diagnostic report and this is likely to mean your assessment with them will be somewhat cheaper and less lengthy than if you had gone straight to them for the diagnostic assessment. However, this



is not something we can guarantee. Some people do opt for an ADHD assessment by a Clinical Psychologist because they are not interested in medication. Generally, we would say that an assessment by a Psychologist is likely to provide a more holistic psychological formulation and make more detailed behavioural recommendations.

