



Image created by Rosmarie Voegtli.

Tools for Schools: Development and early testing of a school-based toolkit for children with traits of ADHD

Information Sheet for SENDCo's

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Dr Abby Russell

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Thank you for showing an interest in this research, focused on early testing of a toolkit of behavioural strategies and adjustments that will improve the school experience of students with Attention Deficit Hyperactivity Disorder (ADHD) and those with traits of hyperactivity, impulsivity or inattention that are causing impairment at school.

You have received this information sheet as your headteacher or Senior Leadership Team have agreed to potentially take part in this study. Please read this information leaflet carefully before deciding whether you would like to participate. If you decide to participate, we thank you. If you choose not to, there is no disadvantage to you, and we thank you for considering our project.



Background

Every classroom has (on average) at least one child who will struggle to sit still, pay attention and resist impulses to do things like jumping out of their seat. When these problems are significant enough, this can be diagnosed as ADHD. Often, these children face major difficulties at home and in school - being less likely to learn well and make good friendships than other children. They are also more likely to have accidents and other mental health problems.

As you probably know, teaching a child with ADHD can be difficult in any school setting and can impact the learning of other children and increase teacher burden and stress. Strategies are needed to help teachers support their students, but current advice is often complicated and suggest teachers try multiple things at once. Moreover, no child is the same. This can lead to teachers struggling to develop the right intervention for the child. This toolkit aims to overcome these difficulties by being an easy-to-use flexible resource that can be tailored to each child.

Aim of this research study

We have been working alongside experts, teachers, and parents to develop a prototype toolkit which can be used by educators. The toolkit includes a range of strategies (organised within “modules”) that educators, parents and pupils can use to ensure that students with traits of ADHD have a better primary school experience.

Aims of the current step of the study:

- To refine and assess the feasibility and practicality of this toolkit for use in primary schools (not to ‘treat’ ADHD as the toolkit is currently a prototype)

If the toolkit is found to be acceptable and feasible, it will be further evaluated in a much larger trial to provide evidence that it works.



Summary of the Tools for Schools project

We have designed a prototype toolkit at this stage. This has been informed by theories about how children learn new skills, and how symptoms of ADHD come about as well as the best current evidence about what works for these children. It needs to be acceptable and practical for those who will use it, both educators and pupils with ADHD – this will be assessed using what is known as a “feasibility study”.

This is what we are asking your school to be involved in. To test whether the toolkit is acceptable and practical for teachers to use, 8 primary schools and a total of 16-32 children with ADHD traits will take part. Children eligible to participate in the study will range from 4-10 year olds (school years R-5). Each class teacher will have a maximum of one child participant in their class but 2-4 children from your school could be included in the study.

Your school will be using the toolkit for one school term with the children who participate, but we will be collecting information from parents, children and teachers before this and for one school term after the toolkit is tried. Your Headteacher has consented for your school to be one of the eight schools involved hence we will ask you to help us identify which children (and teachers) might benefit from the toolkit before we approach their parents for consent.



Overview of the Tools for School toolkit

The Tools for Schools toolkit will be primarily a digital resource with printable components, with the key steps outlined in Figure 1. Alongside this, schools will also be given the option to plan and deliver activities to promote inclusivity. This might involve participating in national events such as Neurodiversity Celebration Week, having a school assembly or applying for the ADHD Foundation “ADHD friendly schools award” for example.

To plan and deliver the toolkit, we would ask that you, as Special educational needs (and disabilities) co-ordinator (SEN(D)Co), support teachers and teaching assistants (TAs) to follow the toolkit steps, and review progress. There are separate information sheets for teachers and TAs that talk more about their role and responsibilities in the research. Parents or guardians would be informed and involved in the research as well.

Primarily, the toolkit will support children to remain in the classroom and allowing the child to access the same education and opportunities as their classmates. It will target ADHD symptoms, classroom functioning, conflict with teachers/peers, quality of life, self-esteem, and skills such as working memory, organisation, flexible thinking and self-control.

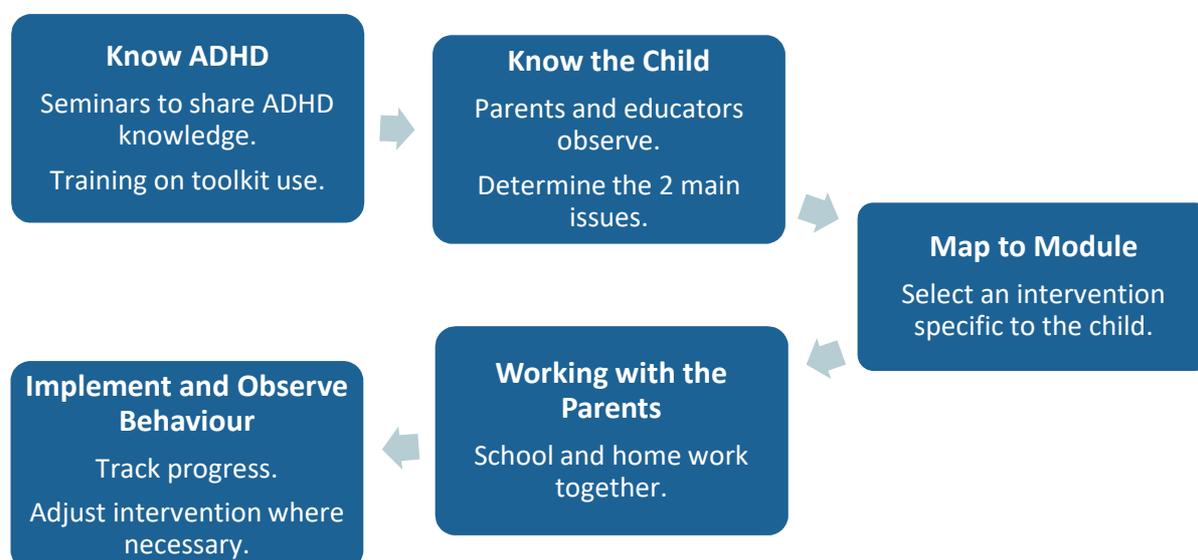


Figure 1: this schematic summarises the process of the Tools for Schools intervention once eligible students have been identified

To find out more about stages of the toolkit, see the Tools for Schools website: <http://blogs.exeter.ac.uk/toolsforschools/>



Your role in the research

After being nominated by the headteacher of your school, as SENCo, your roles in the study will include the following:

Helping to set up and follow up on the toolkit interventions including:

- Working with class teachers to identify students eligible for the study. We anticipate that you already have an idea of who will be suitable, and we ask that you include eligible girls as well as boys if possible. We will provide you with short questionnaires that are a brief screening for ADHD traits which you can ask teachers to complete.
- Completing questionnaires throughout the study (taking approximately 15 minutes every 3-4 weeks for one school year).
- Support teachers and TAs to set achievable behavioural goals for the child and select modules and appropriate strategies.
- Completing questionnaires about your wellbeing and confidence several times across the study period. Your answers to these questions will only be seen by the research team and not shared with others at your school.
- Having oversight of all the study children and their teachers' use of the toolkit (you will have a log-in for the digital toolkit that will allow you to see all children at your school using it).
- Coordinating and supporting teachers and TAs to plan and deliver the toolkit strategies in conjunction with support from parents at home.
- Supporting teachers and TAs to review progress, maintain or switch strategies.

Communicating with others including:

- Contacting the parents to clarify the child's eligibility, provide some basic study information and confirm they are potentially interested. If they are, you will obtain their verbal permission for you to pass on their contact details to the research team, who will provide further information and obtain informed consent from parents and assent from children.
- Offering to meet parents of eligible children to go over the study overview and answer questions that parents may have before they give their consent or meet the research team.
- Talking to the research team about the toolkit once you have started using it (a few weeks into the toolkit term).



- Co-ordinating and leading two meetings with teachers, other involved school staff and parents (either online or in person) at the start of the toolkit term to identify two problem areas where the child is currently struggling and complete a functional behaviour analysis to understand the pre-cursors and consequences around these behaviours for that child.
- Attending a focus group (~ 90 minutes) for each child after the toolkit has been used with other teachers and TAs relevant to that child, to discuss what went well and what needs improving. We ask that what is said in the focus group remains confidential between those present in the room.
- Feeding back to the research team should issues arise with the toolkit that need immediate change or further instruction.

To show our gratitude for your participation in this study and the focus group, you will receive £10.

Confidentiality and data protection

The University of Exeter processes personal data for the purposes of carrying out research in the public interest. The University will endeavour to be transparent about its processing of your personal data and this information sheet should provide a clear explanation of this. If you do have any queries about the University's processing of your personal data that cannot be resolved by the research team, further information may be obtained from the University's Data Protection Officer by emailing informationgovernance@exeter.ac.uk or at <http://www.exeter.ac.uk/ig/>

We will collect data including questionnaires that you complete, recording of the group discussion or your interview, and any notes taken by the interviewer at the time and any questionnaires that we ask you to complete. Recordings will be transcribed word for word and anonymised before being analysed along with other interviews we are conducting. The data collected will be securely stored in such a way that only the researchers working on the project will be able to gain access to it. In the interview if you feel uncomfortable, you are reminded of your right to decline to answer any particular question(s).

The results of this project may be published, but any data included will not be individually identifiable. A summary of the study findings will be sent to your school. You will be provided with a copy of your transcript and the findings of the study if you wish. Additionally, the anonymised data you provide may be used other related research – however this is optional.



Potential unintended consequences

It is possible that the toolkit may lead to children feeling singled-out from their peers due to being treated differently, although we aim to avoid this and any other negative impacts where at all possible. Through use of the toolkit, children in the study will hopefully develop social skills and greater self-esteem which may help them build stronger relationships. However, the students are free to withdraw at any time if school staff, the parent or the child feel that the intervention is causing problems or negative impacts.

Possible negative impacts of the toolkit will be monitored throughout the study and participating school staff will follow a defined procedure for reporting of negative impacts as soon as possible after they come to light. The research team will abide by any existing safeguarding protocols your school has as well.

Should a child or other participant of the study report severe worsening of ADHD symptoms or distress, the lead researcher (Dr Abby Russell) will consult with psychiatrists and clinical psychologists on the study advisory board to decide on the most appropriate course of action. This may include: a clinician speaking directly to staff and families to ascertain whether the adverse effects are caused by the toolkit or research study, or are external to this; the child and family withdrawing from the study; or individual plans being put in place to monitor and manage the situation.

Should a child or family withdraw from the study due to this, their existing data will not be used unless express consent is given at the time of withdrawal, and they will be able to continue to access the prototype intervention (as long as the study team are confident that this is not the cause of adverse effects) if they wish.

Withdrawing your consent

You (and anyone else involved in this study) may withdraw from the study without needing to provide a reason at any point, this includes choosing to withdraw your participation and/or any data you provide – up until the point where the data have been anonymised and analysed. Should you be considering withdrawing, we would ask that you discuss this with the research team and your senior leadership (although this is not compulsory), as we will need to appoint a new lead within your school to co-ordinate and support the toolkit use.



Funding

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Ethical approval

This study has received ethical approval from the University of Exeter College of Medicine and Health Research Ethics Committee (reference Jan22/B/300).

Contact details

If you have any questions about the Tools for Schools project, either now or in the future, please feel free visit [our website](#) for further information, or to contact Abby directly: she leads the research team:

Dr Abby (Abigail) Russell
Senior Lecturer in Child Health, and NIHR Advanced Fellow

Children and Young people's Mental health research collaboration (ChYMe)
University of Exeter College of Medicine and Health

07814 819 191 or 01392 722985
ToolsForSchools@exeter.ac.uk or
a.e.russell@exeter.ac.uk

@DrAbbyRussell

Our website:
<http://blogs.exeter.ac.uk/toolsforschools/>



Complaints

If you have any complaints about the way in which this study has been carried out, please contact the Chair of the University of Exeter Medical School Research Ethics Committee:

cmhethics@exeter.ac.uk

