**Interview with Sam Fearnehough**

How would you describe ADHD?

ADHD – aggressive behaviour, not compliant with instructions, dangerous to staff. We had one boy who was very aggressive. He pushed over the deputy head and broke her shoulder. He then went to a specialist school for 3 days a week. Then he went on medication – and people have different views about whether that is negative or positive – but he was a different boy on medication and was able to come back to school full time and is able to participate fully now. For him, the medication was positive. But I have seen negative effects of medication. One boy went on medication and was losing weight. So, the medication needed to be changed and his mum didn’t want him to take it. So it wasn’t good for him.

Keeping staff safe is the priority for me as a head teacher. I was asked how I had kept this staff member safe (who had broken her shoulder) and what training she had had. She had done Team Teach which was good but that is my priority - to keep staff safe, and I am asked how I have kept staff safe by the local authority.

You have staff going off sick. There was a claim by a staff member before I got here who had been put with a child who hurt her and she was off sick and the local authority ended up paying out £20,000. It happened before I got here so I only found out about it because the case was closed and I was sent the information.

So, you are thinking about keeping staff safe and what you are asking them to do. We have to do risk assessments for a child based on their behaviour.

The children I have seen with ADHD are disruptive and can be aggressive and the aim is to get them to sit down and do the task. And other children see them not complying and that makes it very difficult.

What do you think causes ADHD?

I don’t know.

Where have you picked up information?

I have just picked up information from different people over the years – other teachers, primary inclusion staff from the PRU. We had a really good woman from the Primary Inclusion Unit that came and observed a child and then talked to the staff and gave some really good ideas on what to do.

I have had no specific training in ADHD.

Type of behaviours? Impact

The impact on the school is basically disruptive. I have seen aggressive behaviours, unsafe, disrupting the whole class, and hurting staff members. Staff safety is my big concern as a head teacher. The kind of strategies we have used are not backing a child into the corner, keeping yourself safe, giving choices, you can do this or that, or you can do this then that, observing from a distance so that you keep yourself safe and out of harm’s way.

Diagnosis

We have been asked to give information about a child, not for diagnosis but for assessments for their Education Healthcare Plan, although usually the learning support staff do assessments of learning and we can provide information about their behaviour.

Sometimes you don’t know what is ADHD and what is bad parenting. One mum has 5 kids and is always on her phone. If you talk to her she is constantly looking at her phone and not listening. Another parent contacted us recently to say she had seen this mum walking up the road pushing the pushchair on her phone and the little boy (who has ADHD) was running up the road unaware he was in danger and she hadn’t seen him doing this. We had to speak to her about this. He’s not getting attention so he does things to get attention. So I don’t know if it is his ADHD that brings his behaviour or whether he is trying to get attention.

Treatment/ Behaviour management plans

When a child gets a EHC, there are behaviour management plans that are written down and we are expected to follow them. To be honest, we are usually doing them all anyway, that’s what we find, but we are expected to continue to do what’s written down. And it can be helpful for other children, not just with ADHD, but with ASD or others.

Training

I have not had any specific training on ADHD.

Content of training

I would want to know what strategies to use with children; how to get them to comply. And realistic strategies – not, if you had 5 staff you could do this, because you don’t have 5 staff. So, what can be done in the classroom while the teacher is teaching the rest of the class. Also, strategies for the playground which can be difficult because of the number of children and the ratio of staff.

Knowledge about ADHD itself would be useful; what causes it and why the child is behaving this way so that you can understand the child and how to help them.

Format of training

Not INSET days as they are one-offs and are often forgotten because schools life is so busy and so demanding. Twilight sessions through the year are better and then staff can try out strategies and come back to say, ‘that didn’t work, have you got any other ideas?’

Budgets for training

Training needs are set by Ofsted – at the moment, the emphasis is on curriculum so all training needs to be in the area of curriculum. So we don’t have to plan training for curriculum demands. And the local authority don’t pay for any training. So, there isn’t extra money for training.

For SLT

Training for senior staff would need to be about knowing how to risk-assess a child and then how to keep staff safe. The support for senior staff does come from the Primary Inclusion Team or other head teachers.