Mathers Clinic Weekly ADHD Monitoring Form

eacher:	Date:/			
eacher: Please answer the items below on your observa	ations of this			
or items 1-12, high scores indicate problems while for it		_	-	
Weekly ADHD Monitoring Form	Not At All	Just A Little	Often	Very Often
1. Fidgets with hands or feet and squirms in seat				
2. Difficulty remaining seated				
3. Difficulty awaiting turn				
4. Always "up and on the go" or acts as if "driven by a motor"				
5. Talks excessively				
6. Interrupts or intrudes on others				
7. Easily distracted				
8. Fails to finish assigned tasks				
9. Difficulty sustaining attention				
10. Careless or messy work				
11. Does not seem to listen when spoken to				
12. Difficulty following directions				
13. Follows class rules				
14. Gets along with peers				
15. Seems happy and in a good mood				
16. Indicate how the behaviors rated on the other side compared week by checking one of the choices below. (Note: If you only here.)				
morning better than afternoon no cle	ar difference	afte	ernoon better	than morning
17. Indicate the approximate percentage of assigned class work	that this child c	completed during	g the past we	ek:
0% 20% 40%	60%	8	0%	100%
18. The general quality of work completed by this child this wee	k was:			
very poor poor satis	sfactory	good	good very g	
19. If the quality of this child's work varied significantly between	subjects, pleas	se indicate this b	elow.	
20. Did this child turn in all assigned homework? If not, please ir	ndicate the assi	gnments that we	ere missing.	
21. Please include any other comments or observations that you				



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ADHD MONITORING SYSTEM

A Systematic Guide to Monitoring School Progress for Children with ADHD David L. Rabiner, Ph.D.

Welcome To The ADHD Monitoring System

One of the most important things you can do to help promote your child's healthy development is to carefully monitor how he or she is doing at school. The ADHD Monitoring System will help make it easy for you to do this. By using this program, you will be able to carefully track how your child is doing in school, and will be alerted to when any adjustments or modifications to your child's treatment need to be discussed with your child's doctor.

This packet contains a sample monitoring form and the instructions you need to interpret the information this form provides. You may make as many copies of this form as you need for your own use. Thus, you will be able to use this program to monitor and track your child's progress over the entire course of his or her schooling. It is recommended that you make a number of copies and give them to your child's teacher so they are readily available for him or her to complete. If your child has multiple teachers, copies should be provided to each of them.

In my own experience, I have found that this program works best with elementary school children who have only a single teacher. This program can also be quite helpful for children who are in middle school or high school, although teachers in these grades may not spend enough time with a student to provide ratings that are as reliable. You will have to see how this works in your own situation.

I want to stress that by using this program to keep careful track of how your child is performing at school, you will be in excellent position to help promote your child's success. Many times in my own practice, I have spoken with parents who are frustrated by the lack of communication from their child's teacher, and with not learning about problems until weeks after they begin. Using this system will prevent this from happening to you, and will provide you and your child's physician with information that can be essential in planning and modifying your child's treatment.

Instructions For Using The ADHD Monitoring System

The ADHD Monitoring System provides an easy and systematic way to monitor how a child with ADHD is doing each week at school in several important areas. By using this system you will be alerted to difficulties that may develop so that adjustments

to your child's treatment can be made in a timely manner. The program will also help you to evaluate the effectiveness of any such adjustments that are made. Guidelines for using this program effectively are presented below.

For this system to be of the greatest benefit to your child, the cooperation and support of your child's teacher is **ESSENTIAL**.

You will be asking your child's teacher to complete the weekly rating form contained in this packet at the end of each week, and should provide the teacher with a sufficient number of copies. Completing this form should not require more than 10-15 minutes of the teacher's time, and you should discuss this with him or her to make sure the teacher understands the importance of the information they will be providing. Rather than just having your child gives the forms to the teacher along with a note, it is suggested that you discuss this with the teacher on the phone or in person.

The teacher needs to understand that the information he or she provides will help to determine when any changes/additions to treatment need to be made, and that without this input, it will be extremely difficult to know how well your child's ADHD symptoms are being managed.

NOTE: If your child has multiple teachers, you can provide copies to each teacher who spends a significant amount of time with your child each week.

In discussing this program with the teacher, be sure that arrangements are clearly made to insure that you will be getting the completed form each week. The information won't do you or your child any good if it sits in the classroom for weeks before you receive it.

What Information is Provided?

The ADHD Monitoring System is designed to provide you with information on:

how well your child's ADHD symptoms are being managed;

your child's behavioral, social, and emotional functioning at school;

your child's weekly academic performance.

Please refer to the Weekly Monitoring Form when reviewing the information below.

How well are ADHD symptoms being managed?



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Questions 1-12 deal specifically with symptoms of ADHD. Items 1-6 ask for teacher ratings of hyperactive/impulsive symptoms and items 7-12 provide information on inattentive symptoms.

For children without ADHD, the vast majority of the ratings on these items will be either 0 or 1. For a child with ADHD whose symptoms are being managed effectively—via medication or some other means—you would also expect to see a majority of 0's and 1's being circled.

NOTE: Not all children with ADHD display both inattentive symptoms and hyperactive/impulsive symptoms. For example, children diagnosed with ADHD Predominantly Inattentive Type display primarily problems with attention (i.e. items 7-12) and do not show many of the hyperactive/impulsive characteristics (i.e. items 1-6). Conversely, children with ADHD, Predominantly Hyperactive/Impulsive Type show the reverse pattern. Thus, should your child have one of these subtypes of ADHD, rather than the Combined subtype in which both sets of symptoms are present, you would look specifically at the appropriate symptom group to determine how well the difficulties are being managed.

Behavioral, Social, And Emotional Functioning

Items 13-15 provide a simple screening for behavioral, social, or emotional difficulties. In addition to seeing mostly low scores for items 1-12, you want to see high scores (i.e. 3's or 4's) for these items. If your child receives low scores (i.e. 0's or 1's) on any or all of these items, you will want to contact the teacher to obtain more detailed information about the difficulties that were observed.

NOTE: It is important to emphasize that these items provide only a simple screen for behavioral, social, and emotional difficulties and are not intended to provide a comprehensive assessment. Although teachers are generally in an excellent position to comment on how a child is following classroom rules (i.e. item 13), they can be less aware of how a child is doing socially (i.e. item 14) or how a child is feeling (i.e. item 15). Thus your child's teacher may report that your child is doing well in these areas when this is not necessarily the case. Learning about these areas in a comprehensive way requires feedback from your child as well.

Academic Performance

The reverse side of the rating form provides important information on your child's academic performance during the

prior school week. Information is provided on the amount of assigned work completed, the general quality of the work completed (and whether this varies by subject), and also alerts you to homework assignments that may not have been turned in. Obviously, the ideal is for your child to be completing all assigned work, for it to be of good to very good quality, and for no homework assignments to have been missing.

Suggested Guidelines For Using The Information

The information contained in the weekly monitoring form is designed to provide you and your child's physician with the data you need to make informed decisions about the effectiveness of your child's treatment and when any treatment modifications appear necessary.

In reviewing this data, it is important to stress that any child can have an occasional bad week. If your child has been doing well, and then has a week where the teacher's ratings indicate difficulties in one or more areas, this should not necessarily cause alarm nor indicate the need for treatment changes. In general, treatment modifications for a child who has been doing well would not be suggested unless the problems persist for several weeks in succession. (When this occurs, changes in the child's environment that may be related to a sudden increase in difficulties also need to be considered.) You should also consider modifying treatment if troublesome weeks start to occur with increased frequency (i.e. instead of one bad week every couple of months you start to see several bad weeks each month).

With this important caution in mind, a simple and reasonable framework for evaluating the information contained in the Weekly Monitoring Form is to consider the ADHD symptom ratings (i.e. items 1-12) and the other information separately. When done in this way, several different combinations are possible. These are discussed below.

Everything Going Well

This is what you hope to see each week. In this scenario, ratings of ADHD symptoms (items 1-12) are primarily or exclusively 0's and 1's, ratings for items 12-15 indicate that your child is following rules, getting along with peers, and appearing happy. In addition, academic ratings would show that your child is completing all or almost all assigned work and the work is of good quality.

When this is the case, it indicates that your child is doing



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a great job at school, and that whatever treatments and/ or support are in place are working well. No changes or adjustments are indicated.

Everything Going Poorly

At the other extreme is a situation where nothing is going well. Ratings of ADHD symptoms are high, problems with behavior, peer relations, and/or mood are also evident, and both the quantity and quality of assigned work being completed is problematic.

In almost all cases, this indicates a situation where changes and adjustments (i.e. to medication, behavioral plan, etc.) need to be implemented. The only exception would be if, as noted above, your child has been doing consistently well and then has a bad week. If this is the case, it is still important to speak with your child and his or her teacher to try and learn what may have accounted for the difficult week. Should things get back to normal the following week, there is probably no need to change anything. If the difficulties persist, however, it will be important to consider modifications that may be necessary. Consulting with your child's physician and/or a child mental health professional about the most appropriate steps to pursue is strongly recommended.

ADHD symptoms under control, but problems with behavior, peer relations, mood, or academics. This would be indicated when ratings of ADHD symptoms on items 1-12 are fine (i.e. mostly 0's and 1's) but problems are indicated in one or more of these other areas. When ADHD symptom ratings are low, these other problems are unlikely to be direct results of ADHD, but may reflect additional difficulties. Such difficulties can occur for a variety of reasons and it is very important to learn what factors are contributing to the difficulties your child is having. Once again, consulting with your child's physician and/or a child mental health professional is recommended.

NOTE: When children are in middle school or high school and have multiple teachers, teachers often do not spend enough time with the child to observe problems with regards to ADHD symptoms. In these grades, it is more common for ADHD symptom ratings to look okay, but for the difficulties to show up in academic performance and/or behavior. It is important to be aware of this because the teachers' ratings may suggest that primary ADHD symptoms are being managed well when this is not the case. If this is true, efforts to manage the inattentive and/or hyperactive/impulsive symptoms more

effectively will often be an important first step to take.

Other Areas Look Good But Ratings Of ADHD Symptoms Are High.

This would be indicated when ratings on items 1-12 include multiple 2's and 3's but significant problems with behavior, peer relations, mood, or academics are reported. This is probably the most unusual combination because when a child's ADHD symptoms are not being managed well, significant problems in behavioral, emotional, social, and/or academic functioning are usually also evident.

Should this pattern persist for more than one week, some adjustment in the treatment being used to manage primary ADHD symptoms is likely to be necessary (i.e. medication adjustment, revising behavior plan). Of course, if a child continues to do well academically, socially, and behaviorally at school, despite high levels of ADHD symptoms, it may not be necessary to change anything. Generally, however, one would expect problems in these areas to emerge if ADHD symptoms are not being managed well for a sustained period. Again consulting with your child's physician is strongly recommended.

NOTE: The first question on side 2 of the Weekly Monitoring Form asks for the teacher's impression of how morning and afternoon periods compared. If your child is taking medication, and is receiving a longer acting stimulant or is taking a second dose during the day at school, morning and afternoon behavior would not be expected to differ.

If your child is receiving only a single dose in the morning, however, and the teacher's ratings indicate that mornings are consistently better than the afternoons, it may indicate that the medication is wearing off during the day and that a single dose is not sufficient. If this pattern emerges in the teacher's ratings, you should discuss this issue with your child's physician.

There can be other reasons, of course, for why a child's behavior and schoolwork can vary between mornings and afternoon. For example, it may be that the type of classes and/or activities are consistently different during these periods, and your child has a much easier time with one set of activities/classes than the other. Once again, the important task will be to try and learn why your child is having a harder time with one part of the day than the other, and then determine what type(s) of assistance may be necessary to help with the more difficult time.



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How To Reevaluate A Child's Need For Medication

If your child is taking medication as part of his or her treatment, it is important to be aware that a child's need for medication can change over time. Because of this, it is generally recommended that this be reevaluated on an annual basis. This should be done at a time when a child's symptoms appear to be under good control, and things have been stable and going reasonably well for a sustained period. It should not be done at the very beginning of a new school year because children generally require a month or so to settle in to a new classroom. In addition, the teacher needs some time to get to know your child.

To use the monitoring program to reevaluate your child's need for medication, you simply need to pick a week where your child does not receive any medication for the week, and then compare the teacher's ratings for this week with the ratings your child had been receiving when on medication. (Note: Prior to doing this it is important that you discuss this with your child's physician.)

For children who continue to require medication, you would expect to see a clear increase in ADHD symptom ratings (i.e. instead of mostly 0's and 1's you would see more 2's and 3's for the week without medication). Problems with following class rules may be reported and the amount and quality of assigned work completed would also be expected to show a decline.

NOTE: When you do this reevaluation, it is generally better if your child's teacher does not know that your child is not receiving medication during the week. This is because if the teacher is aware of this, he or she may "expect" to see problems, and have a hard time providing objective ratings as a result.

If your child is not receiving a second dose during the school day, keeping the teacher "blind" to the medication holiday is not a problem. (Just ask your child not to tell the teacher that he or she is not getting medication that week. Alternatively, you can speak with your child's doctor about using a "placebo"—i.e. something that looks like medication but is really not—for this week.) If your child receives a second dose during the day, however, it can be a good idea for this dose to continue during the reevaluation week. In this case, the teacher should be instructed to base the ratings for this week during the morning periods only—the time when your child would not be on the medication.

IMPORTANT: If your child appears to do quite well during the week without medication (i.e. no clear change in the ratings provided by the teacher), he or she may not need to continue taking it. This decision should be made in consultation with your child's physician and it is recommended that you do not discontinue medication or change the dose that your child receives without the doctor's approval.

Even if you and your child's physician elect to discontinue medication because your child did well without it, it is very important to continue to use the Weekly Monitoring Form to keep careful track of how your child is doing each week. It is not uncommon, for example, for a child to do fairly well during a one-week break from medication, but to have a difficult time sustaining this good performance. Thus, do not be surprised if you see symptoms reemerge after a short period of time. Should this occur, it may be necessary to resume medication that your child had been taking and this should be discussed with your child's physician. The important point is that a single good week without medication in no way means that medication may not be necessary again at some point later on and that carefully monitoring how your child does on a weekly basis is essential.

Conclusion

I hope that the instructions above have provided you with a good understanding about how to use the ADHD Monitoring System to carefully follow how your child is performing at school. If you enlist the cooperation of your child's teacher(s), and use this program as outlined above, you will be in a much better position to make well informed decisions about the effectiveness of your child's treatment, and to know when changes and adjustments are indicated.

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