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Module: Supporting Children with Additional Learning Needs

ECEY6006

Part 1: Academic Poster

Part 2: Webinar and script

AI Cover Sheet

I acknowledge my use of Grammarly to help with grammar and spelling.

I acknowledge that I used Canva to create the academic poster.

I acknowledge my use of Co-pilot to check for repetition and rephrase work to help reduce the word count.

I acknowledge my use of Co-Pilot to help with research to support my work, using prompts such as find me Welsh policies, journals and information that support ADHD.

Find me information that I can use to explain what ADHD is, how it is recognised?

Find me websites, policies and any information on the referral process for ALN in Wales and the UK.

Find me research and theories on the barriers and impacts ADHD has.

Summarise the ALN code in Wales and England.

I can confirm that I have copies of my drafts, notes, and other resources I used before and after using AI tools, which I may be asked to provide as evidence.



Attention Deficit Hyperactivity Disorder (ADHD) Identification and Support in Wales: Diagnostic Challenges, Systemic Barriers and Evidence-Based Strategies.



Introduction

Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition affecting attention, impulsivity and activity levels (NICE, 2019). In Wales, the statutory framework established by the Additional Learning Needs and Education Tribunal (Wales) Act 2018 and the ALN Code 2021 underpins how neurodevelopmental conditions such as ADHD are identified, assessed and supported, emphasising early, person-centred intervention across education and health (UK Government 2018; Welsh Government 2021). Accurate identification and diagnosis of ADHD require a multi-method assessment that integrates developmental history, behavioural evidence across settings, and validated diagnostic tools (Knyazhansky and Shrot, 2025). Despite increased awareness, individuals with ADHD often face barriers such as delayed recognition, stigma, co-occurring conditions and inconsistent access to assessment, all of which can negatively impact learning, wellbeing and long-term outcomes (Young *et al.*, 2021). This poster critically examines the diagnostic process for ADHD, analyses the impact of key barriers, and explores an evidence-based support strategy designed to promote inclusion and improve outcomes.

Identification/ Diagnosis

ADHD is identified in Wales through a needs-led, rights-based framework shaped by the ALN Act (2018) and ALN Code (2021), which require early, holistic recognition across the 0–25 system (UK Government, 2018; Welsh Government, 2021). This aligns with international inclusion principles: the Salamanca Statement emphasised that mainstream systems must adapt to diverse learners (UNESCO, 1994), while UNESCO's recent review stresses the need to remove structural barriers so that every learner "matters equally" (UNESCO, 2020). Wales reflects these commitments in policy, though implementation is constrained by service capacity.

Initial identification occurs within universal provision, where practitioners observe persistent patterns of inattention, impulsivity and hyperactivity. SNAP Cymru (n.d.) highlights that identification must be collaborative, involving families, schools and multi-agency professionals, echoing Macintyre's (2015) emphasis on systematic, reflective observation to distinguish developmental variation from behaviours that consistently disrupt learning.

Formal diagnosis follows NICE NG87, which requires symptoms to be developmentally inappropriate, persistent and present across settings (NICE, 2019). Dalrymple *et al.* (2019) note that NG87 places strong emphasis on multi-agency evidence and careful clinical judgement, particularly as ADHD-like behaviours are common in younger children. However, Welsh neurodevelopmental services face significant demand, with Senedd (2024a) reporting long waits and variation across health boards, creating tension between the ALN Code's expectation of early identification and the reality of diagnostic delays.

Symptoms typically considered include difficulties sustaining attention, distractibility, impulsive decision-making, emotional dysregulation, excessive movement and challenges with turn-taking features consistent with ADHD profiles described by Melo Cymru (2024). Compared with England, where the SEND Code also promotes early identification (Department for Education and Department of Health, 2024), Wales' universal IDP system is more legally prescriptive. Yet England's larger diagnostic infrastructure can offer faster access in some regions, with NHS England's ADHD Taskforce reporting waits exceeding two years in some areas (NHS England, 2025). Overall, Wales' approach is conceptually strong child-centred, bilingual and rights-based however its effectiveness is limited by diagnostic delays and inconsistent multi-agency capacity.

Barriers/ impact

Learners with ADHD experience intersecting structural, organisational and pedagogical barriers that significantly affect their access to learning within the Welsh ALN system. ADHD-related challenges with attention regulation, working memory, impulsivity and emotional control can conflict with classroom expectations, reducing sustained engagement and task completion (Wearmouth, 2023). Hodgkinson (2019) argues that such barriers are often socially constructed, arising from inflexible curricula, behaviourist discipline systems and environments that fail to accommodate diverse attentional needs.

A major systemic barrier in Wales is delayed neurodevelopmental assessment. Senedd Research (2024) reports long waiting times and inconsistent service capacity across health boards, meaning learners may wait extended periods for diagnostic clarity. This undermines the ALN Act (2018) and ALN Code (2021), which require early, holistic identification and coordinated multi-agency support. Knight *et al.* (2024) further demonstrate that delays in ALN identification can negatively affect attainment trajectories, reinforcing inequalities for neurodivergent learners.

School-level barriers also persist. Estyn's thematic review (2024) highlights workforce pressures, inconsistent ALNCo capacity and variable quality of classroom adaptations, all of which limit effective support for learners with ADHD. Inclusive pedagogy through the lens of primary teachers and teaching assistants in England, similarly identifies tensions between inclusive pedagogy and the practical demands of curriculum and behaviour expectations, noting that practitioners often prioritise behaviour management or ability-based practices despite valuing learner-centred approaches. These findings align with Welsh Government guidance (2012), which indicates that sanction-based behaviour approaches and insufficient environmental adjustments such as movement opportunities, reduced sensory load and predictable routines can intensify difficulties experienced by learners with ADHD. Overall, while Wales' rights-based ALN framework is conceptually strong, diagnostic delays, inconsistent multi-agency capacity and variable school-level practice continue to create significant barriers for learners with ADHD, limiting their equitable access to learning and participation.



Strategies

A highly effective support strategy for learners with ADHD is the use of visual timetables embedded within a predictable daily routine. ADHD is strongly associated with difficulties in executive functioning, working memory, and transition management, meaning that learners often struggle to retain verbal instructions or anticipate upcoming activities (DuPaul *et al.*, 2018). Visual timetables provide a stable, external reference point that reduces cognitive load and supports task initiation by making expectations concrete and continuously accessible.

Recent evidence reinforces the effectiveness of visual scheduling for learners with attentional and organisational difficulties. A 2024 ScienceDirect study found that structured visual supports significantly improved task engagement, transition success, and behavioural regulation for children with ADHD by externalising expectations and reducing ambiguity during classroom routines (Milam & Sutton, 2024). This aligns with findings from a 2024 action-research study showing that visual cues, clearly displayed rules, and structured task breakdowns enhance focus, reduce behavioural difficulties, and support self-regulation for learners with ADHD (Bukhari *et al.*, 2024). Predictable routines further enhance this impact by creating consistent patterns that minimise uncertainty and reduce opportunities for distraction, meaning learners require fewer verbal prompts and can sustain focus more effectively (The ADHD Centre, 2023).

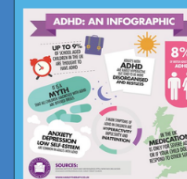
This strategy aligns closely with the Welsh ALN Code, which emphasises proactive, needs-led, low-arousal environments and the reduction of barriers to participation (Welsh Government, 2021). Visual timetables are also highly adaptable, allowing personalisation through symbols, colour coding, or photographs to support individual processing needs. Overall, this approach offers a low-cost, high-impact method for supporting attention, emotional regulation, and independence in learners with ADHD.

Conclusion

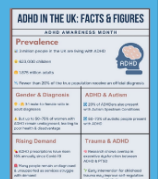
Attention Deficit Hyperactivity Disorder (ADHD) is a neurodevelopmental condition affecting attention, impulsivity and activity levels. In Wales, identification and support are guided by the Additional Learning Needs (ALN) Act (2018) and ALN Code (2021), which promote early, person-centred, multi-agency approaches. Diagnosis follows NICE guidelines, requiring persistent symptoms across settings and evidence from multiple sources. However, despite strong policy frameworks aligned with inclusive international principles, implementation is limited by long waiting times and inconsistent service capacity.

Learners with ADHD face significant barriers, including delayed diagnosis, inflexible classroom practices and limited school resources, which can negatively impact attainment and wellbeing. These challenges are often socially constructed through environments that fail to meet diverse needs.

An effective strategy to support learners is the use of visual timetables within structured routines. This approach reduces cognitive load, improves engagement and supports self-regulation, aligning with the ALN Code's emphasis on inclusive, low-arousal learning environments.



Ross, E. (n.d.)



Shore Psychology (n.d.)