

Informant Questionnaire

Please ask someone that has known you since you were a child to complete this form.

If it is not possible to have a parent or a carer complete this form, ask someone else, such as a sibling or a partner.

It is helpful for the assessment process if the person completing this form provides as much information as possible and gives specific examples where relevant. We appreciate this may take quite a bit of the informant's time and could bring up some difficult emotions, but it is very helpful to our diagnostic assessment process.

Please return this form within **THREE weeks** of receiving it. If there are any difficulties filling this form in, or if you would like it in an e-format or a more accessible version (e.g. larger print), you or your informant can email hcl.adhd@nhs.net.

If you need more space for your answers, please use the last page titled, **Additional information**.

Please ensure you have provided the full name of the person you are referring to below as the 'individual'.

Details of the person completing this form

Today's date	Day/Month/Year		
Your name			
Name of individual			
Relationship to individual	☐ Parent	☐ Sibling	☐ Other
If other, how long have you known them?	How many years?		
Your home address			
Postcode			
Your phone number			
Your email address			

Reason for referral

What do you feel are this person's main difficulties in relation to inattention (concentration), hyperactivity (restlessness, fidgeting and a constant need to be active), impulsivity (acting quickly without thinking of consequences)?

When were you aware of these starting?

Education and employment

Please outline any exam results or qualifications they achieved.

**Did they need any additional support in school/ college/ university?
If yes, what types of difficulties did they have and what support was offered?**

Did school present any challenges? If so, what where they?

**Have they had any problems in getting or keeping a job?
If yes, what have been the problems?**

Daily living skills

How does the person plan and prioritise tasks and activities at home (manage household tasks, completing chores, managing schedules)?

Can you describe how forgetfulness affects their daily life?

What aspects of daily life do they manage successfully?

Physical and mental health

Has the person received any of the following diagnoses? Please add year of diagnosis, where applicable.

ADHD	Day/Month/Year	Dyslexia	Day/Month/Year
Autism	Day/Month/Year	Epilepsy	Day/Month/Year
Dyspraxia	Day/Month/Year	Tourettes	Day/Month/Year
Learning disability	Day/Month/Year	Dyscalculia	Day/Month/Year

Does the person have any physical health problems or allergies?

Have they ever had a head injury? If yes, please provide details.

**Have they ever had any mental health problems?
Please outline what these are and if they needed treatment.**

**Did they see any mental health professionals during childhood (other than a GP)?
If so, please give details.**

**Has anyone in their family ever had any mental health problems
or a diagnosis of ADHD? Include grandparents/ aunts/ uncles etc.**

Infancy and early childhood history

Were there any problems related to the pregnancy? If yes, please describe.

Were there any problems related to birth? If yes, please describe.

What were they like as a baby (sleep, feeding, behaviour etc)?

Compared with children their age, were they late in reaching any of their developmental milestones?

If you are able to recall, what age did they start?

Walking

Age?

Talking

Age?

Toilet training

Age?

School age

**Were any issues identified in pre-school or nursery -
your perception and/or any teacher observations?**

**Were any issues identified in school (infant, junior and secondary) -
your perception and/ or any teacher observations?**

What was the person's experience of secondary school like?

As a child, compared to other children, were they quiet or did they talk too much?

Was their behaviour the same at home as it was at school?

How were they at following instructions?

Did they follow instructions in the same way at home and school?

How did they engage in school? How did others describe them?

**How did they manage homework and meeting deadlines?
If unable to, please describe why.**

How do they manage starting and completing activities?

How did they engage socially, both in and out of school?

**What type of comments would their teachers give during parent-teacher evenings
and in report cards (nursery, primary, secondary school)?**

Between school and now

As an adult, how do they manage their friendships and relationships?

**How easy is it to have a conversation and engage with this person?
Does it feel balanced, or one sided and on their terms?**

How would others who know them well (friends, family, colleagues) describe them?

Have they ever been in trouble with the police?

Do they consume illicit substances? If so, from what age?

Do they seek thrill and engage in dangerous activities? If so, please describe.

Additional information

**Is there any other information you feel would be relevant to share?
If so, please summarise here.**

Thank you for completing this questionnaire