***Frequently Asked Questions: ADHD For Primary Care***

Hertfordshire and West Essex ICS (HWE ICS) are aware that there are currently long waiting times for assessments of Children and Young People with suspected ADHD in South and West Hertfordshire. This is understandably creating a lot of anxiety amongst the children, young people, their families, and the GPs involved in their care. The current ADHD service is being provided by Hertfordshire Partnership University NHS Trust (HPFT) and the screening of referrals by Hertfordshire Community Trust. The Mental Health, Learning Disabilities & Autism Collaborative have been working alongside system partners to find a solution to the long waiting times for Children and Young People. A plan to tackle this long waiting list has recently been approved. This document aims to answer some of the commonly asked questions with regards to ADHD waiting times and prescribing of ADHD medication whilst these solutions are being mobilised.

1. **Assessments for ADHD and waiting times**
* **What are the current waiting times for a child to be seen who has been referred for an assessment for ADHD?**

This will depend on the clinical picture for the child with ADHD. All ADHD referrals undergo a screening and triage process.

If the child you have referred has ADHD with a Tier 3 mental health problem they will be seen within 28 days for an initial assessment.

If the child referred does not have a Tier 3 mental health problem identified, then the wait may be considerably longer. Currently there are children who have been on the waiting list for up to two years. The list is continuously being reviewed and worked through as capacity allows.

* **Is anything being done to reduce the waiting time for children awaiting ADHD assessment?**

In South and West Herts we have been actively working with our partners across the health and care system look at ways in which we can reduce the assessment waiting time for children with ADHD. A plan to reduce the current waiting times, where the waiting lists are the longest, has recently been approved and we hope to have implemented in the near future.

In addition, we are also working on developing a new longer-term model for ADHD services in the local area with the aim of providing a seamless pathway for children with ADHD.

* **I have a child who has been waiting a long time for an ADHD assessment. The parents/guardian/child are becoming increasingly anxious about the wait. What can we do to help while they await an assessment?**

A resource pack has been created for parents or guardians with details of services available for them to access, this can be found here – [The Hertfordshire Local Offer](https://www.hertfordshire.gov.uk/microsites/Local-Offer/The-Hertfordshire-Local-Offer.aspx). Please share this animation with your parents/carers: [(33) Your guide to ADHD and autism support in Hertfordshire on the Local Offer website - YouTube](https://www.youtube.com/watch?v=sBEWXUWi7Y0)

Further support can also be found on the Healthier Together website : <https://hwehealthiertogether.nhs.uk/download_file/view/1264/4154>

* **What can we do if we are concerned about the behaviour or the mental health of a child awaiting an ADHD diagnosis?**

If you believe the child’s behaviour is deteriorating significantly and there is a risk to themselves or their family, we suggest that you contact the CAMHS SPA on 0800 6444 101 (24/7). To discuss the case with someone who will be able to help.

Please ensure the family or other carers are aware of where to get help in case of a crisis situation. The following contact points may be helpful for families or carers seeking urgent help for medical help for their child:

Families and carers of a child experiencing a mental health crisis can call 0800 6444 101 in the first instance or can call 111 and select Option 2. If they develop a co morbid mental health condition that would require tier 3 intervention, then please send another updated referral.

For information on NHS and voluntary sector crisis CAMHS support on the HPFT website go to [Get Help Now (hpftcamhs.nhs.uk)](https://www.hpftcamhs.nhs.uk/get-help-now/)

1. **Prescribing of ADHD medications**
* **What should we do if a family or guardian has sought an ADHD assessment privately and is now requesting that we continue to prescribe medications initiated by the private physician?**

We would advise that if a child is prescribed a medication under a private specialist, that would usually require monitoring under a shared care protocol on the NHS, then the child should remain under the care of the private prescriber. Herts and West Essex ICB have no local policy in place that allows shared care between private and NHS prescribers, and we recommend that shared care agreements may only be formed between NHS doctors providing an NHS service.

Locally we have developed a letter template that can be used by GPs to communicate the policy statement on prescribing ADHD medication under private care [link to letter](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/search-results/shared-care-adhd/)

If the parents or guardians wish for the child to be transferred to NHS care, we recommend that this is done at the point they are stable on their medication and monitoring and prescribing continues in private care until they are seen in the NHS. GPs are advised only to take over prescribing of ADHD medications that require shared care once patients are fully assessed and taken on by an NHS service with a locally approved NHS shared care agreement in place.  Medicines that do not require shared care between the secondary care provider and clinician may be considered for prescribing by an NHS GP if they are happy that the patient has been stabilised on treatment, it falls in line with locally agreed decisions or national guidelines, and they feel clinically competent to prescribe.

Locally, we have a policy statement on the transfer of private care into NHS, which can be found at the following [link](https://www.hweclinicalguidance.nhs.uk/all-clinical-areas-documents/search-results/prescription/)

It is important however that parents or guardian understand that when a child is referred to the NHS provider, they will be added to the waiting list.

* **What should we do if a patient has moved to the area from another area in the country on medications for ADHD?**

If the patient was diagnosed in the NHS either by a previous local paediatric team or a previous CAMHS team, and the team is within a commutable distance for the family then the child should continue to be monitored under a shared care protocol with their existing team until they are seen by the new local service.

If this is not the case, then the GP will need to decide as to whether they feel able to take on the prescribing and monitoring of the child until they are seen by the local service. We advise that this is only considered if the child is stabilised on the medication. The GP should only prescribe the medication if they feel it is clinically safe to do so. Further advice can be sought from the CAMHS team via SPA on 0800 6444 101 or the Primary Care Medicines Optimisation Team (PMOT) if needed.

Further guidance of monitoring ADHD medication can be found here : [Recommendations | Attention deficit hyperactivity disorder: diagnosis and management | Guidance | NICE](https://www.nice.org.uk/guidance/ng87/chapter/Recommendations#medication).

* **What should we do if a patient has moved to the local area from another country and are on a medication regimen not commonly used in this country, but the family would like us to continue to prescribe these medications?**

GPs should seek urgent advice from local CAMHs consultant via the SPA on 0800 6444 101 . A decision on whether to continue the medication or not should be on a case-by-case basis. The HPFT ADHD team will aim to prioritise such cases.

If the GP is considering prescribing for this patient, they need to be satisfied that the medication prescribed for ADHD is in accordance with NICE and local prescribing guidance and continues to be clinically effective for the child. The monitoring of the medication may need to take place in primary care in such cases until they are transferred to the local service. Further guidance of monitoring ADHD medication can be found here : [Recommendations | Attention deficit hyperactivity disorder: diagnosis and management | Guidance | NICE](https://www.nice.org.uk/guidance/ng87/chapter/Recommendations#medication).

Prescribing advice is available from the PMOT by contacting: hweicbhv.medicinesoptimisationteam@nhs.net

|  |  |
| --- | --- |
| Version | V1.1 |
| Developed by | Avani Devkaran, GP Lead CAMHS S&W Herts, Alison Cowan, GP Lead CAMHS HWE ICB, Daniel Carlton-Conway GP Prescribing Lead HWE ICB, Janet Weir, Lead Pharmaceutical Advisor HWE ICB |
| Approved by | Medicines Optimisation Delivery and Implementation Group (MODIG) HWE ICB |
| Date approved/updated | November 2022 |
| Review date | The recommendation is based upon the evidence available at the time of publication. This recommendation will be reviewed upon request in the light of new evidence becoming available. |
| Superseded version | V1.0New links to HWEclinicalguidance.nhs.uk and update email eaddress |