**Attention Deficit Hyperactivity Disorder (ADHD in Adults (over 16 yrs) Policy**

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**Attention Deficit Hyperactivity Disorder (ADHD) in Adult (Over 16 year old)**

1. **What is ADHD?**

Over the last couple of decades, we have seen a steady increase in ADHD diagnoses. The rise seems to be due to an increased awareness of the symptoms of ADHD among clinicians, educators, parents and patients. Historically, ADHD was mostly diagnosed in children who were hyperactive; however, now we often see patients who are over 16 years when they first get diagnosed with ADHD. Often, their problems date back to childhood.

The diagnosis for ADHD, according to the International Classification of Disease 11th Revision ICD-11,

*“Attention deficit hyperactivity disorder is characterised by a persistent pattern (at least 6 months) of inattention and/or hyperactivity-impulsivity that has a direct negative impact on academic, occupational, or social functioning. There is evidence of significant inattention and/or hyperactivity-impulsivity symptoms prior to age 12, typically by early to mid-childhood, though some individuals may first come to clinical attention later. The degree of inattention and hyperactivity-impulsivity is outside the limits of normal variation expected for age and level of intellectual functioning. Inattention refers to significant difficulty in sustaining attention to tasks that do not provide a high level of stimulation or frequent rewards, distractibility and problems with organisation. Hyperactivity refers to excessive motor activity and difficulties with remaining still, most evident in structured situations that require behavioural self-control. Impulsivity is a tendency to act in response to immediate stimuli, without deliberation or consideration of the risks and consequences. The relative balance and the specific manifestations of inattentive and hyperactive-impulsive characteristics varies across individuals and may change over the course of development. In order for a diagnosis to be made, manifestations of inattention and/or hyperactivity-impulsivity must be evident across multiple situations or settings (e.g., home, school, work, with friends or relatives), but are likely to vary according to the structure and demands of the setting. Symptoms are not better accounted for by another mental, behavioural, or neurodevelopmental disorder and are not due to the effect of a substance or medication.”*

1. **Can my GP diagnose ADHD for me?**

ADHD is a diagnosis made by the ADHD Specialists, not by GPs. Specialists may choose to offer non-medical intervention such as Cognitive behavioural therapy (CBT). Occasionally medications are needed to help manage the symptoms. These medications are stimulants such as methylphenidate or drugs related to amphetamines. They are controlled drugs which are potentially dangerous, and therefore require careful monitoring. The specialist is responsible for prescribing the medications, making any dose adjustments, and arranging a yearly review which includes a physical assessment. We are only able to prescribe ADHD medications under a shared care agreement with certain NHS providers.

1. **How can I get ADHD diagnosed**
2. Local ADHD clinic (NHS CPFT)

In Cambridge we have access to the NHS psychiatry team (part of Cambridge and Peterborough NHS Foundation Trust) who runs an adult ADHD clinic. The doctors in the ADHD clinic have worked together with local GPs for many years, and therefore have established very safe patient-centred care.

However, it is a highly subscribed service and there can be long waits to be assessed and a longer wait for initiation of medication if needed. Once a dose of the appropriate medication has been established, we may take on responsibility for on-going prescribing and monitoring under a shared care agreement with the NHS service specialist. However you would continue to have annual reviews with your specialist.

2) The Right to Choose (NHS or private)

Patients can exercise their right to choose and ask to be referred to another provider who has an existing contract to provide NHS services. These providers may be able to provide assessment virtually but some require face to face appointments. Since there are increasing demands on these service, the waiting time for some of the Right to Choose service providers can be almost as long as local service.

Once a dose of the appropriate medication has been established, we may take on responsibility for on-going prescribing and monitoring under a shared care agreement with the Right To Choose service specialist. However you would continue to have annual reviews with your specialist.

For more details on the Right to Choose providers, please visit this link

<https://adhduk.co.uk/right-to-choose/>

3) Private ADHD clinics

Various private ADHD specialists advertise their services that they can carry out ADHD assessments. You can choose to be seen by a private provider, but should you choose to follow this route and a diagnosis is made, the GP will not be in a position to prescribe ADHD medication or arrange monitoring. This is due to the lack of Shared care agreements between us and the private providers. The prescribing and the monitoring of the ADHD medication must be done through the private provider and you will need to discuss the costs of ongoing treatment including prescribing and yearly reviews with that private provider.

If you are diagnosed by a private service and wish to receive your ADHD treatment on the NHS, please make contact with us, and we can refer you to an NHS mental health specialist for an assessment. This referral will still need to go through the NHS waiting list and you will need to continue to obtain you medications from the private provider until your prescribing is taken over by the NHS ADHD service.

For details of Shared care agreement and private prescribing, please refer to the link

1. **I want to be assessed for ADHD**

**In order to be considered for referral:**

**1. click on this link** [**https://adhduk.co.uk/right-to-choose/**](https://adhduk.co.uk/right-to-choose/) **- find the provider you would like to be referred to and complete their referral/questionnaires.**

**2. Return the completed questionnaire to us either via email, paper copy or attached to an online medical query.**

**One of our doctors will review your completed questionnaire and symptoms. We will then decide based on that service’s referral criteria if we are able to refer. We will let you know the outcome of this.**