

## **FOI\_1003\_2022-23 – FOI Request Concerning – ADHD Services**

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**Please provide equivalent answers for Questions 1-6, but for Adult ADHD services in the Trust. If the Trust does not distinguish between CYP and Adult ADHD services, please answer Questions 1-6 for all patients collectively**

**1. Please name the organisation(s) that deliver(s) CYP (children and young people) ADHD assessment / diagnoses in your Trust area**

CYP - Solent NHS Trust delivers ADHD assessment and diagnosis for CYP.  
Adults – Solent NHS Trust do not commission a service for Adult ADHD.

**a) When did the contract(s) begin and when is the contract(s) due to end**

CYP – NHS Standard Contract since Solent NHS Trust was created on April 1, 2011.  
Existing contract end date March 31 2023.  
Adults – no commissioned service

**b) What is the annual spend for this service for 2022, and for the last 5 years?**

CYP – forms part of block payment in NHS Standard Contract Solent NHS Trust receives a block contract payment for Adolescent Mental Health Services. Within the block payment there is no defined budget set for ADHD assessments or for ADHD diagnosis.  
Adults – no commissioned service

**c) How is the service contracted – is it Block, Activity-based, or AQP contracting?**

CYP – Block. The service is commissioned through the NHS Standard Contract. The service is contracted by Block payment.  
Adults – no commissioned service

**d) If the service is commissioned with other CCGs, ICSs or Trusts, which are these?**

CYP – services commissioned by ICB based on GP patient location  
Adults – Surrey and Frimley Borders NHS Trust (Portsmouth CAMHS cases only and there is no current service provision for Southampton transition cases from CAMHS to Adult providers)

**e) At what prevalence (% of the child population) have the contracts been commissioned against?**

CYP – unknown. This would need to be requested from the Commissioner.  
Adults – no commissioned service

**2. Does the same organisation as for Question 1 also deliver CYP ADHD prescriptions and post-diagnosis ADHD support in your Trust area? If not, please provide the same information for this organisation.**

CYP – CAMHS will offer psychoeducation around ADHD (open to all families and not only for ADHD medication cases) and ADHD medication, initiate, titrate, and offer regular clinical reviews for ADHD medication care plans and this is supported by shared care arrangement with local GPs for repeat prescriptions in between clinical review appointments.

Adults – no commissioned service

**3. Please outline the CYP ADHD pathway in your area, including key referral sources**

CYP

Southampton:

Key referral sources are GPs, schools, Health Visitors, self-referrals, social care  
Expectation that parents have accessed behaviour training programs prior to referral being sought and school have placed behavioural strategies in to place prior to diagnostic assessment

CAMHS triage the ND referral, assess for risk and appropriateness for service.

ND screening forms are sent out to the family for completion

ND forms reviewed and if they reach CAMHS criteria, then an initial CAMHS assessment is offered

At initial assessment point, if no significant risk presentation or co-morbid mental health disorder then a full ADHD assessment is completed

If risk presentation and mental health concerns present , then a CAMHS mental health assessment takes place and assessment will indicate next steps

ND assessment comprises of – full history of presentation, mental health/education/family/physical health history taken, Connors used, Qb test completed and ICD-11 criteria aligned against all information taken/gathered for purposes of a diagnostic formulation

Full assessment report is then taken to the ND panel for case discussion and diagnosis (if appropriate)

Portsmouth:

Key referral sources are schools and health visitors in relation to the completion of the ND Profiling Tool and then school provide input on ND profile of need before further diagnostic assessment

Expectation that parents have accessed behaviour training programs prior to referral being sought

ND assessment comprises of – full history of presentation, mental health/education/family/physical health history taken, Connors used, Qb test completed and DSM-V criteria aligned against all information taken/gathered for purposes of a diagnostic formulation

Full assessment report is then taken to the ND panel for case discussion and diagnosis (if appropriate)

If mental health concern present then case referred to Specialist CAMHS for further assessment

Adults – no commissioned service

**4. How many children and young people are currently waiting for a CYP ADHD assessment in your area?**

CAMHS East narrative for this section:

Due to data recording/collection methods the service did not collect separate diagnostic related data. The wait list did not separate out ADHD/ASC so not possible to supply diagnostic specific data.

CAMHS West - 366 CYP currently awaiting assessment

All data listed below relates to CAMHS West only due to the above narrative

**What is the longest and median wait time from a referral?**

52.5 weeks is the longest wait for assessment in CAMHS West with an average wait time of 22.7 weeks (census date 12/01/2023)

**a) Within the last year, how many children and young people were assessed within 12 weeks of referral?**

2018/19 – 1  
2019/20 – 1  
2020/21 – 5  
2021/22 – 2  
2022/23 – 1 (April to December)

**b) Within the last year, how many children and young people were discharged without assessment?**

2018/19 – 4  
2019/20 – 13  
2020/21 – 9  
2021/22 – 0  
2022/23 – 1 (April to December)

**c) Please answer Questions 4, 4a, 4b for as many historic years as possible, up to 5 years**

**5. For the last 5 years, please give the number of CYP patients per year in the Trust who were:**

**a) Referred for ADHD assessment**

2018/19 – 147  
2019/20 – 251  
2020/21 – 40 (at this time the pathway in CAMHS West was closed to new ND referral aside to high risk/urgent referrals)  
2021/22 – 172  
2022/23 – 339

**b) Given an ADHD assessment**

2018/19 – 22

2019/20 – 38

2020/21 – 312 (wait list focus on ND assessment within CAMHS West whilst their pathway closed to referrals)

2021/22 – 149

2023/23 – 71 (April to December)

**c) Given an ADHD assessment from a 'Right to Choose' provider, outside the service contracted**

Service does not routinely collect data in relation to this specific question

**d) Diagnosed with ADHD**

Narrative:

Clinical note system allows for recording of 'working diagnoses' to understand referral disorder presentation rates. The ability to record formal diagnosis has also been added to the clinical note system and historic open cases have been updated accordingly.

2018/19 – 0

2019/20 – 43

2020/21 – 400

2021/22 – 493

2022/23 - 903

**6. For the last 5 years, what was the average number of ADHD-qualified staff delivering services in the area? How does this split by role:**

**a) Qualified psychiatrists**

CAMHS East- 0.2 wte dedicated to ADHD but other medics have ADHD cases on their caseload

CAMHS West – 0.2wte dedicated to ADHD but other medics have ADHD cases on their caseload

**b) Paediatricians**

0 wte for both teams

**c) Speech and Language therapists**

0 wte for both teams

**d) Clinical Psychologists**

0 wte for both teams

**e) For a-d, please also give numbers of trainees**