

Reference: FOI.ICB-2223/074

Subject: Primary Care Services for People with ADHD

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
Please refer to requesters template enclosed.	

The information provided in this response is accurate as of 2 November 2022 and has been approved for release by Lisa Manson, Director of Performance and Delivery for NHS Bristol, North Somerset and South Gloucestershire ICB.

Q1 <u>Demographics</u>

We would like to know about commissioning arrangements for young people and adults with ADHD provided by integrated care boards (ICBs) across England, with a focus on primary care.

Q1.1 Which NHS region is your ICB located within? (One of: East of England, London, Midlands, North East and Yorkshire, North West, South East, South West)

South West

Q1.2 Which ICB do you represent?

Bristol, North Somerset an South Gloucestershire ICB

- Q1.3 Please provide your details
 - a) Job Role:
 - b) Name:
 - c) Email address:
 - d) Phone number:

N/A

Q1.4 Please provide details of the person (if not you) within your ICB that is responsible for commissioning services to support the delivery of primary healthcare for young people and adults with ADHD.

For example, we are interested in: Mental health and social prescribing, Shared care arrangements and other locally enhanced services that may affect care provided for young people and adults with ADHD

- a) Job Role:
- b) Name:
- c) Email address:
- d) Phone number:
- e) Comments:

Mental Health Contracting Team commissions services for ADHD. There are then shared protocols put in place with Primary Care GP practices for the prescribing of ADHD medication.

Q2 Adult mental health services for ADHD

We would like to know about the healthcare available from adult mental health services (AMHS) for young people and adults with ADHD that are located in your ICS.

AMHS - Any adult mental health service including specialist ADHD teams Young people and adults with ADHD - Any young person with suspected or confirmed ADHD, aged from 16 years old and upwards Q2.1 Is there an NHS funded AMHS that is available to provide healthcare (diagnosis and/or management) of adult ADHD for patients within your ICS?

- a) Yes
- b) No
- c) Do not know
- d) Not applicable

Q2.2 If yes, roughly how long is the waiting list for patients referred to this service?

- a) 0 months, up to 6 months
- b) 6 months, up to 12 months
- c) 12 months, up to 24 months
- d) 2 years or more
- e) Do not know

We do not hold this information – to obtain this information please go to Avon and Wiltshire Partnership trust

Q2.3 In your ICB, can primary care providers refer patients using the 'right to choose' legislation to other adult healthcare services for ADHD (outside of your ICS footprint)? For example, commissioned private adult ADHD services that are available online. – MH?

- a) Yes
- b) No
- c) Do not know
- d) Not applicable

Q2.4 If you would like to add anything on the 'right to choose' legislation, please comment below:

Our current referral guidance:

Other providers - Right to Choose

Currently we are aware of 3 other providers that can be used for NHS referrals under the 'Right to Choose' rules:

- Psychiatry-UK https://psychiatry-uk.com/
- ADHD 360 https://www.adhd-360.com/
- Clinical Partners https://www.clinical-partners.co.uk/

The legal rights to choice of mental health provider and team apply when:

- the patient has an elective referral for a first outpatient appointment
- the patient is referred by a GP
- the referral is clinically appropriate

- the service and team are led by a consultant or a mental healthcare professional
- the provider has a commissioning contract with any Clinical Commissioning Group (CCG) or NHS England for the required service

Q2.5 Do primary care providers in your ICS have shared care protocols/agreements in place with an AMHS to enable prescribing of adult ADHD medications through primary care? ADHD medications - NICE guideline [NG87] recommended medications for adult ADHD.

- a) Yes
- b) No
- c) Do not know
- d) Not applicable

Q2.6 If you would like to add anything on shared care provision for young people with ADHD, please comment below:

The shared care protocol applies to adults only

Q3 Primary Care services for ADHD

We would like to know about the support provided by primary care in your ICS for young people and adults with ADHD.

This includes support from primary care providers or networks (PCNs), but not support from other services, such as secondary care, or voluntary sector organisations

Q3.1 Are any of the following additional roles being funded within your ICS (either via PCNs or directly)? If yes, please also indicate whether these roles are <u>filled</u>, <u>in development</u>, or if this <u>varies</u> by provider/PCN?

There is space to provide any comments if necessary.

a) Care co-ordinator:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

b) Health and wellbeing coach:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

c) Pharmacy technician:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

d) Occupational therapist:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / **No**

e) Physician associate:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

f) Nursing associate:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

g) Social prescribing link worker:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

h) Mental health practitioner or counsellor:

Yes, currently filled / Yes, in development / Yes either filled or in development (varies by PCN) / No

i) Other (please specify):

Q3.2 Does your ICB have any enhanced services agreed with primary care providers for prescribing and monitoring of ADHD medication?

This question is asking about agreements to provide additional care (in place or in development), but not about shared care.

- a) Yes in conjunction with shared care protocol
- b) No
- c) Do not know
- d) Not applicable

Q3.3 Does your ICB have any other enhanced services agreed with primary care providers for extended support or services for people with long term mental health conditions (such as ADHD)?

This question is asking about agreements to provide additional care (in place or in development), but not about shared care.

- a) Yes
- b) No
- c) Do not know
- d) Not applicable

Q3.4 If yes to Q3.2 or Q3.3, please list the enhanced services agreed with primary care providers in your ICS (that are relevant for people with ADHD).

ADHD Local Enhanced Service.

Q3.5 If you would like to add anything about enhanced services, please comment below.

We have Shared Care Protocols for ADHD as per link below. These are clinical agreements with no financial payment that highlight the responsibility of each part of the system and enable specialists to initiate the medication which is then transferred to Primary care and continued by a GP. This ensures patient safety.

https://remedy.bnssgccg.nhs.uk/formulary-adult/scps/scps/

In addition to this the ADHA LES supports the onward monitoring and support for patients with ADHD

Q3.6 Has your ICB identified any localities within your ICS where there are inequalities in access to healthcare services for young people and adults with ADHD?

- a) Yes working progress
- b) No
- c) Do not know
- d) Not applicable
- Q3.7 If you would like to add anything about inequalities, please comment below.
- Q3.8 Please list any barriers your ICB faces when commissioning effective services for young people (aged 16-25) with ADHD MH

The ICB is currently reviewing our locally commissioned ADHD service. We are aware that young people sometimes find the transition from children's to adult ADHD services difficult and we are exploring how we can try and improve this experience for young people.

Q3.9 If you would like to add anything to your answers, please comment below.

Q4.1 Thank you for taking the time to complete this survey. Would you like to be? *Indicate Y for yes, N for No*

- a) Contacted about taking part in further research:
- b) Kept informed about results of this research:

Q4.2 If you indicated yes at all in 4.1, please provide your contact details: These will be stored securely and only used for the purposes you have indicated above.

- a) First name:
- b) Surname:
- c) Email address:
- d) Confirm email address: