

ADHD POLICY & REFERRAL PROCEDURE

ADHD Assessment Referrals

If you're seeking an ADHD assessment for yourself or your child, please read this carefully. Choosing the right pathway helps avoid delays, misunderstandings, or gaps in treatment.

ADHD is a diagnosis which is made by secondary care (a psychiatrist) who may then initiate specialist medications. It may be possible that we can prescribe these medications after a patient has been initiated and stabilized on them but only where there are certain “shared care” agreements in place.

“Shared care” means that we as your GP take over prescribing after a specialist stabilises your medication, while you remain under the care of that specialist for ongoing input. We only enter shared care when we're confident:

- Baseline assessments are complete (e.g., BP, ECG, heart rate, mental health review)
- Treatment is optimised by an NHS specialist
- Ongoing monitoring duties are defined and meet regional guidelines

This ensures your medication is managed safely under a recognised framework. Our participation in this is voluntary and is based on these criteria being met, as we believe this is the best way to keep everyone safe.

Below we outline the different pathways shared care can occur and some of the issues that might be encountered.

1. Local NHS Services

Local ADHD services in Buckinghamshire, Oxfordshire & Berkshire West (BOB) are designed to:

- Meet consistent standards of comprehensive care, including diagnosis, titration, review, prescribing, and long-term follow-up.
 - Allow safe transfer of prescribing to your GP under a formal shared care agreement.
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2. Right to Choose (RTC)

You can choose any NHS-commissioned ADHD provider in England via RTC—this option is becoming more popular because of reduced waiting times, however, unfortunately not all RTC providers meet the required shared care standards. Unfortunately, we are unable to give a list of providers, as providers and their policies often change. However, this may be a helpful website <http://adhduk.co.uk/right-to-choose>

- **If the provider meets the same standards as the local NHS providers**, shared care may be possible, and we can prescribe.
- **If they don't**, we'll still refer you but cannot enter shared care, and will not be able to take over prescribing medications

What you must do:

1. Contact the RTC provider before referral.
2. Make sure that they will agree to shared care for ADHD medication as set out by our local ICB in the relevant documents lists on this website:

[Shared Care Protocols | BOB ICB](#)

This is an example of one for a commonly prescribed medication for ADHD, but there are others for different medications:

[bob-icb-right-to-choose-providers-methylphenidate-adhd-shared-care-protocol.pdf](#)

All of these shared care protocols involve the provider doing certain initial investigations, initiating the medication and following up annually. Please make sure that the provider will fulfil the relevant duties as outlined in the relevant document depending on the medication.

3. Provide their written confirmation to us **before** naming them in your referral.
4. Be aware that if the provider does not continue their agreed part of the shared care provider then we will not be able to continue prescribing.

3. Private Providers

A private assessment may be quicker but has ongoing costs and **no option** for NHS shared care:

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- You pay for the diagnosis, prescriptions, and follow-ups.
- We and other GP practices in BOB **will not prescribe** based on private diagnoses due to safety and quality reasons. This is in line with local policies for this area.
- NHS referral after private assessment is possible but will be added to the end of the queue, and diagnosis may not be recognised, and we have no control over this.