

ADHD Prescribing and Shared Care Policy

1. Purpose

This policy sets out the position of Longtown Medical Practice regarding the prescribing and monitoring of medication for Attention Deficit Hyperactivity Disorder (ADHD).

The practice's primary responsibility is to deliver safe, effective, and sustainable care within core general practice services. This policy clarifies that the practice does not participate in new shared care arrangements for ADHD medications.

2. Scope

This policy applies to all patients registered with the practice and to all healthcare professionals involved in their care, including NHS and private providers.

3. Diagnosis and Initiation of Treatment

Specialist Responsibilities

- ADHD diagnosis must be made by a suitably qualified GMC-registered consultant psychiatrist or appropriately qualified specialist following a comprehensive assessment.
 - The specialist is responsible for:
 - Undertaking full baseline assessment (including physical health checks)
 - Initiating and titrating medication
 - Providing patient education regarding risks, benefits, and monitoring requirements
 - Ongoing prescribing and monitoring of medication
 - Regular review of treatment, including physical health monitoring
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4. Prescribing Responsibility

Practice Position

- The practice **does not prescribe ADHD medications under shared care arrangements.**
- This applies to:
 - NHS providers
 - Private providers
 - "Right to Choose" providers

Rationale

ADHD medications:

- Require specialist initiation and titration
- Require ongoing specialist monitoring and review
- Carry potential risks requiring specialist oversight

As such, prescribing and monitoring remain the responsibility of the initiating specialist service.

5. Shared Care

- The practice **does not enter into shared care agreements for ADHD medications.**
 - Shared care is a voluntary arrangement and is not a core contractual requirement for general practice.
 - Responsibility for prescribing and monitoring ADHD medication remains with the specialist provider at all times.
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6. Private and Non-NHS Providers

- The practice will **not prescribe ADHD medication on behalf of private providers.**
 - Patients accessing private ADHD services will need to:
 - Obtain prescriptions directly from that provider
 - Ensure ongoing monitoring is arranged through that provider
 - If a patient wishes to transfer care to the NHS:
 - A referral to an NHS specialist service is required
 - This will follow standard NHS waiting pathways
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7. Ongoing Care and GP Role

The practice will continue to:

- Provide general medical care
- Manage non-ADHD-related health conditions
- Support patients holistically

However:

- The practice will not take on prescribing or monitoring of ADHD medications
 - Clinical responsibility for ADHD medication remains with the specialist
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8. Communication and Safety

- The specialist provider must:
 - Maintain responsibility for prescribing and monitoring
 - Provide clear communication regarding treatment plans
 - Be available for advice and urgent review where required
 - Any concerns regarding medication should be directed to the specialist provider.
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9. Compliance

- This policy reflects safe clinical practice and current contractual boundaries.
 - Requests for prescribing outside this policy will be declined.
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Information for Patients and Carers

ADHD Referrals and Medication

As a practice, we are committed to supporting patients with neurodevelopmental conditions, including ADHD.

ADHD diagnosis and treatment are specialist-led. Medications used in ADHD can carry significant risks and require careful initiation, monitoring, and ongoing review by specialist services.

Prescribing

- The practice **does not prescribe ADHD medications**.
 - All ADHD medication prescribing and monitoring is the responsibility of the specialist service that initiated treatment.
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Private Providers

If you choose private assessment or treatment:

- You will need to obtain prescriptions from the private provider
 - The practice cannot take over prescribing
 - You should check the full cost of ongoing care before proceeding
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NHS Care

If you wish to receive ADHD care through the NHS:

- A referral to an NHS specialist service is required
- This will be subject to NHS waiting times

If the NHS specialist confirms diagnosis and initiates treatment:

- They will remain responsible for prescribing and monitoring
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General Practice Support

Your GP will continue to:

- Provide general healthcare
- Support your wider health needs

However, prescribing and monitoring of ADHD medication will remain with your specialist provider.

Referrals

Prior to any possible referral being made, any patient will require assessment with a GP. They will also need to complete an ADHD rating scale (attached) for either children or adults. This can also be completed on-line and brought into the surgery. It is really helpful to provide us with some written information describing the difficulties a child or adult are having and how these impact upon their life. The criteria that need to be met for a referral to be accepted usually include:

- Evidence of 6 or more specific symptoms of ADHD (more information available on the NHS website)
- Evidence that the symptoms are causing moderate to severe impact on relationships, employment/education and daily life
- Evidence that the symptoms are present in home, educational/work, and social settings
- Symptoms have not improved when adaptations and environmental modifications have been implemented

This policy is in place to ensure safe, consistent, and sustainable care for all patients.

Adult ADHD Self-Report Scale (ASRS-v1.1) Symptom Checklist

Patient Name	Today's Date				
Please answer the questions below, rating yourself on each of the criteria shown using the scale on the right side of the page. As you answer each question, place an X in the box that best describes how you have felt and conducted yourself over the past 6 months. Please give this completed checklist to your healthcare professional to discuss during today's appointment.					
	Never	Rarely	Sometimes	Often	Very Often
1. How often do you have trouble wrapping up the final details of a project, once the challenging parts have been done?					
2. How often do you have difficulty getting things in order when you have to do a task that requires organization?					
3. How often do you have problems remembering appointments or obligations?					
4. When you have a task that requires a lot of thought, how often do you avoid or delay getting started?					
5. How often do you fidget or squirm with your hands or feet when you have to sit down for a long time?					
6. How often do you feel overly active and compelled to do things, like you were driven by a motor?					

Part A

7. How often do you make careless mistakes when you have to work on a boring or difficult project?					
8. How often do you have difficulty keeping your attention when you are doing boring or repetitive work?					
9. How often do you have difficulty concentrating on what people say to you, even when they are speaking to you directly?					
10. How often do you misplace or have difficulty finding things at home or at work?					
11. How often are you distracted by activity or noise around you?					
12. How often do you leave your seat in meetings or other situations in which you are expected to remain seated?					
13. How often do you feel restless or fidgety?					
14. How often do you have difficulty unwinding and relaxing when you have time to yourself?					
15. How often do you find yourself talking too much when you are in social situations?					
16. When you're in a conversation, how often do you find yourself finishing the sentences of the people you are talking to, before they can finish them themselves?					
17. How often do you have difficulty waiting your turn in situations when turn taking is required?					
18. How often do you interrupt others when they are busy?					

Part B