Attention Deficit Hyperactivity Disorder (ADHD)

NHS
Hampshire Child and Adolescent Mental Health Service

This pathway has been developed for professionals to highlight how to access support for children and young people with symptoms suggestive of ADHD, or have received an ADHD diagnosis, and specifically the support available from the Hampshire Child and Adolescent Mental Health Service. Separate information is available for families, children and young people.

The NHS states that ADHD affects approximately 5% of the population (children and adults) and is now recognised as a lifespan condition. Evidence suggests that boys with ADHD may be more likely to show 'externalised' symptoms, such as physical hyperactivity and impassivity (not expressing emotions), whereas girls with ADHD may tend to show 'internalised symptoms', such as inattentiveness (appearing not to listen, day dreaming, trouble focusing), low self-esteem and having more difficulties in regulating their emotions.

Early Help

Most children and young people will show signs of behaviours associated with ADHD at one time or another; as a result the guidelines for determining whether a person has ADHD are very specific. It is important to note that the behaviours must create significant difficulty in at least two areas of life, such as home, social settings, or school. Symptoms must be present for at least six months and are usually noticeable before the age of 6.

Barnardo's deliver a specialist parenting support service in Hampshire which can be accessed by families where children or young people aged 5-17 have a diagnosis, or symptoms which are suggestive of ADHD, as well as for other conditions such as Autism or conduct disorder.

Across Hampshire, there are Early Help Hubs which facilitate a multi-agency response to children and families who may need additional support. As a result of the multi-agency engagement the Early Help Hubs are able to support a wide range of issues that may be impacting upon a child and their family including school attendance, behaviours that challenge, substance misuse, children with disabilities, housing and benefits, parenting, relationship breakdowns, bereavement, emotional wellbeing and more.

The Child and Adolescent Mental Health Service also provide training to professionals on a number of mental health conditions. These training programmes are available across Hampshire.

Further advice and support is available via the Hampshire CAMHS Website.

Pre-referral

Before referring to specialist CAMHS for intervention, please consider the following:

- Is the school's specialist education needs coordinator (SENCO) currently involved and the young person is receiving help and support for their behaviour in a classroom setting?
- Has a period of watchful waiting of up to 10 weeks been completed?
- Has the parent/carer been informed of local parent training/education programmes?
- Have the parents/carers been referred and attended a group-based ADHD-focused support programme?

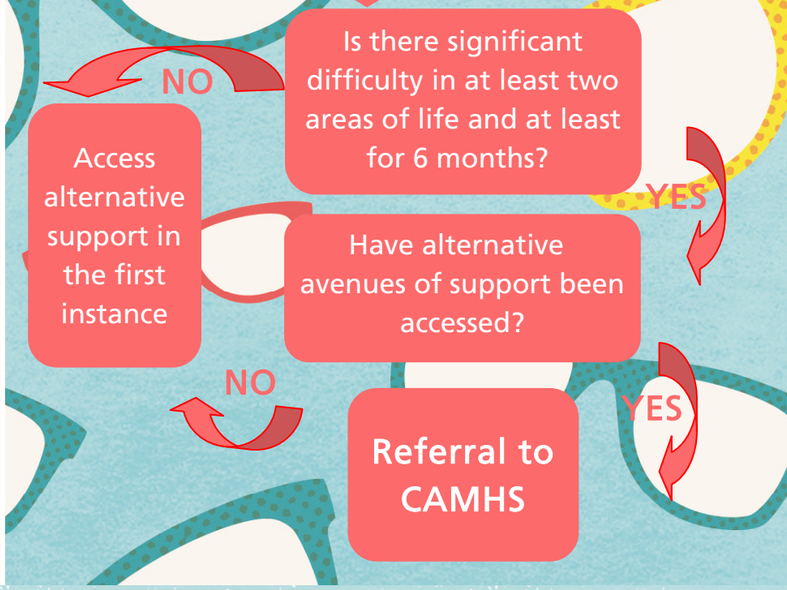
Prior to referral, and as part of the stepped care model, the child and family will need to complete the above steps. Further information about ADHD can be found on the Hampshire CAMHS website: www.hampshirecamhs.nhs.uk. This approach adheres to NICE guidance. Some people may not need a referral to specialist CAMHS after following the above steps. If they do, the steps will have been a helpful initial approach and support further treatment. Referrals will need to outline why and how the steps were used and the reasons for why further help is needed.

Hampshire Youth Access (HYA) (web: www.hampshireyouthaccess.org.uk/ tel: 02382 147 755)

Early Help Hubs (web: www.hants.gov.uk/socialcareandhealth/childrenandfamilies/familysupportservice tel: 0300 555 1384)

CAMHS Single Point of Access (web: www.hampshirecamhs.nhs.uk tel: 0300 304 0050)

Barnardo's (web: www.barnardos.org.uk/ tel: 01489 799178)



Referral

All referrals to Specialist CAMHS should be made via the Single Point of Access. Anyone can refer, including the young person, parent/carer, school or GP. Often the family or school know most about any difficulties the young person is experiencing and are best placed to make the referral. All referrals received are considered in the same way, regardless of who sends them.

Using the referral form is the only way to make a referral. The referral form asks for all the information we need to make a decision as to whether or not Specialist CAMHS is the most appropriate Service. We are unable to accept incomplete referrals or referrals not made using the referral form. If we do receive referrals in any other way these will be returned to the referrer with a copy to the parent/carer/young person, if appropriate. In addition to the referral form, a completed Parent and Carer/ Social Worker and School information pack must be completed and accompany the referral. Referrals for ADHD will not be accepted without this information. The information pack can be downloaded from our website at: www.hampshirecamhs.nhs.uk

If a referral is made for medication follow up after a private diagnosis, a copy of the private assessment and diagnosis report must accompany the referral form. The report should include evidence from all 3 domains of ADHD (Concentration; Impulsivity and Hyperactivity) and across all environments. If this is not available further assessment of the young person's difficulties may be required prior to considering ongoing medication.

Once a referral has been received it will be considered by the single point of access staff, which includes Specialist CAMHS and staff and has close links with other agencies and organisations. The urgency of the referral will be reviewed on the day of referral, or the next working day. Based on the information provided on the referral form a decision will be made as to the most appropriate service. We may seek further information from people that know the young person. If a partner organisation is best placed to meet the identified needs, we will recommend this to the family and referrer.

Assessment

If the returned Patient and Carer / Social Worker and school information packs indicate ADHD the young person will be placed on the waiting list for an ADHD assessment. If the information returned is unclear whether an ADHD assessment is required or if the presentation seems complex but it is considered the young person's needs might be best met by Specialist CAMHS then an initial assessment will be offered. The initial assessment helps determine the nature and severity of the difficulties and the treatment options that are available. We use questionnaires and measures to look at the nature and severity of the symptoms. We also hope to set some goals for recovery and advise on any self-help resources that may be useful.

If the clinician considers that further investigation in relation to ADHD is needed, we will need some further information. In summary, the assessment process will include (i) developmental assessment of the young person; (ii) mental health and risk assessments; (iii) consideration of potential comorbidities of learning difficulties (specific or global), sensory difficulties, ASC, Epilepsy, tic disorder, mood/anxiety disorder, bullying, ODD/CD, attachment difficulties, family and social difficulties; (iv) cognitive check (school report) or consider referral for further cognitive evaluation if appropriate; (v) educational information, attainment & functioning in various settings; and (vi) clinic and/or school observation

Once all of the assessment has been completed consideration will be given to whether or not the young person meets the criteria for an ADHD diagnosis, whether or not there are any comorbidities and what might be the most appropriate support options, if applicable.

The Hampshire Child and Adolescent Mental Health Service generally assesses young children aged 5 years and above. If the young person is aged 0-5, Paediatric Services will carry out the assessment. The exception to this is for the Aldershot CAMHS Team. In this team Paediatric Services assess young people of primary school age and the Aldershot CAMHS Team assess young people of secondary school age.

Within this pathway, the assessment process will also consider any disabilities the young person may have in order to make necessary adjustments. Hampshire CAMHS also has a separate Disability and Significant Mental Health need pathway which helps inform any decisions made regarding meeting the young person's needs.

Single Point of Access

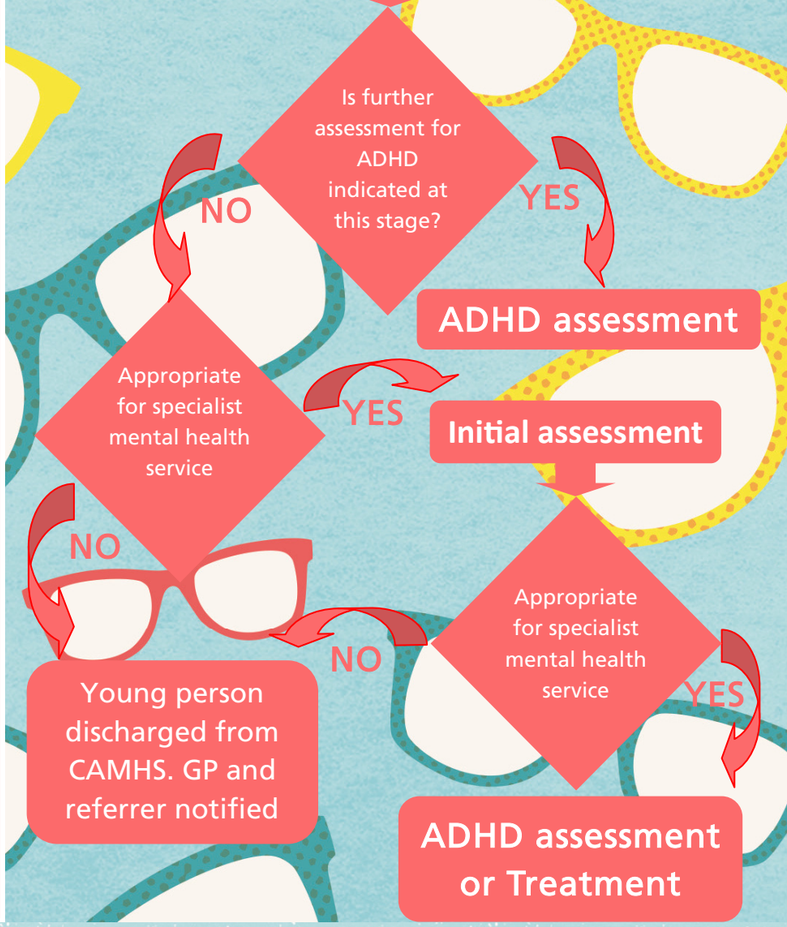
Referral form and Parent and Carer/ Social Worker and School information pack

available at: www.hampshirecamhs.nhs.uk

Email: SPNT.HantsCamhsSpa@nhs.net

Telephone: 0300 304 0050

Postal Address available at:
www.hampshirecamhs.nhs.uk



Treatment

Once a diagnosis and formulation has been agreed, we will set mutually agreed goals for the further management and treatment of the condition. We will provide diet and behavioural advice which will include sleep hygiene. There are a number of different treatment options available which will be discussed with the family and young person which include psycho-social treatment such as:

- psycho-education
- evidence based parent training programmes
- psychological group treatment programs that includes CBT or social skills training (covering problem solving, developing impulse control, improving attention and concentration skills, emotional expression and coping skills and improving peer relationships).

The clinician may also feel that some on-going individual support might be indicated. If this is the case, the young person and family will see a clinician on a regular basis to review their progress and help develop approaches for managing their condition. This will involve supporting the young person and their family, liaison and consultation with school and partner agencies.

Not all of the support available will necessarily be provided directly by the Service. Other support services are able to provide the appropriate support, such as Barnardo's who deliver evidence based parenting programmes and are proven to be highly effective in supporting families in supporting a young person diagnosed with ADHD.

In some cases, where the symptoms are moderate to severe, medication might be indicated. In these cases the clinician will discuss this with the family. Where medication is agreed, the young person will need to be reviewed regularly to check things like weight, height, blood pressure and pulse. This would involve a review within 3 months of starting medication and then every 6 months, with an annual review by the prescriber.

- Advice and Support
- Group Treatment Programmes
- Partnership
- Psycho-education
- Medication
- Family Therapy
- Parenting Pro-grammes

Discharge

Recovery and achieving treatment goals are the main focus of the intervention, At any point during their treatment, a young person and their clinician may feel their goals have been achieved, and it would be appropriate for the support to come to a natural conclusion. We would discuss this with the young person and if appropriate, their family. We would develop a plan for their discharge, which would include what to do if things were to get worse again.

The discharge plan may include continuing to practice particular techniques which the young person has learnt and some continued step-down support from other agencies or organisations.

The Clinician would write a discharge summary and provide this to the young person, family where appropriate, and their GP.

If the young person is receiving medication then they will be monitored in the clinic until such time that either the young person has decided to come off the medication or that they are reaching their 18th birthday when they will be discharged to the GP or an adult ADHD clinic as appropriate. Further details around transition for young people with ADHD can be found in the Hampshire mental health transition care protocol.

Young Person discharged from the service. Discharge letter sent to family and GP.

Young person provided with support plan and information about what to do if things were to get worse again.

Useful Resources

There are a number of useful resources available which can help increase someone's understanding of mental health difficulties and how best to support young people who may be experiencing difficulties. A number of these resources are free to access and available on the web. The resources also provide helpful techniques and activities that can be used to help reduce anxiety. The below list provides the most commonly used material by the Hampshire Child and Adolescent Mental Health Service:

Websites

www.addiss.co.uk
www.adders.org
www.parentvoice.info
www.lovethewayiam.co.uk
http://www.youthinmind.info/py/yiminfo/BookFinder.py

Books (may be available in local libraries)

For Young People

- Zak has ADHD, *by Jenny Leigh*
- *Learning to Slow Down and Pay Attention, by Kathleen Nadeau*
- *All Dogs Have ADHD, by Kathy Hoopman*
- *I would if I could: A teenagers guide to ADHD, by Michael Gordon*
- *The Survival Guide for kids with ADD or ADHD, by John F Taylor*

For Parents/Carers

- Understanding ADHD: A Parent's Guide to ADHD in Children, *by Dr Christopher Green*
- The ADHD Parenting Handbook: Practical Advice for Parents from Parents, *by Colleen Alexander-Roberts*
- ADHD: What every parent needs to know, *by Michael Reiff*
- Parenting a child with Attention Deficit Hyperactivity Disorder, *by Brian Jacobs (advice and guidance for adoptive parents/carers)*

For Siblings

- My brother's a world-class pain, *by Michael Gordon*

Apps

Apps:

BoosterBuddy - your sidekick guides you through a series of daily quest to help establish positive habits and improve mental health

CBT-i Coach - helps to improve sleep habits

Colourfly Coloring Book - a colouring app which you may find relaxing