



ADHD Focus Group Meeting – Structured Summary

Date: April 29, 2025

Attendees:

- Dr. Anjan Chakraborty (GP Principal, Stroud Green Medical Centre)
- Ramune Cerkesiene (Operations Manager, Stroud Green Medical Centre)
- Farah Hashim (Receptionist)
- Bethan (Patient)
- Jonathan (Patient)

1. Welcome and Introductions

- Meeting was opened by Ramune.
- Attendees introduced themselves and their roles.
- Noted that the meeting was being transcribed (not recorded) for the purpose of producing structured minutes.

2. Patient Experiences of ADHD Referral

Bethan

- Had prior knowledge of ADHD pathways due to earlier diagnoses (dyslexia, dyscalculia).
- Accessed government support via "Access to Work" and neurodiversity coaching.
- Came to the GP prepared with completed ADHD screening forms.
- GP appointment was smooth, with clear communication and guidance on next steps and wait times.

Jonathan

- Longstanding suspicion of ADHD and/or autism.
- Initially referred via GP but experienced a two-year wait; ultimately opted for private diagnosis.
- Diagnosed with ADHD and mild autism; medication significantly improved quality of life.
- GP now manages prescriptions; describes experience as a "game changer."

3. Reflections on the Referral Process

Barriers Identified:

- Long wait times for NHS diagnosis.
- Overwhelming paperwork and forms, especially challenging for those with ADHD or other neurodivergencies.
- Lack of clarity or updates while waiting.
- Disconnected referral pathways for coexisting conditions (e.g. dyslexia, PTSD, ADHD).
- Limited time in GP appointments to fully explore comorbidities and patient history.

Suggestions for Improvement:

- Longer consultation slots or follow-up appointments for neurodivergent patients.
- Greater flexibility in how screening information is submitted (e.g. narrative format vs structured forms).
- Centralised resources or support packs for patients on waiting lists.
- Consideration of shared experiences like late diagnosis, grief for lost opportunities, and adult presentations (particularly in women).
- Avoiding clinical language that may be stigmatizing (e.g. reconsidering the term “disorder” in ADHD).

4. Role of Mental Health Worker & Local Resources

- Stroud Green has access to a Mental Health Worker through the Primary Care Network.
- This person can provide 30-minute appointments by phone and may support ADHD-related concerns.
- Suggestion to expand this into regular check-ins or even small group sessions to foster community and reduce isolation during long wait times.

5. Supporting Patients While Waiting

- Proposed ideas include:
 - Creation of information packs with nutrition, lifestyle tips (e.g. magnesium, Omega 3, B vitamins).
 - A quarterly newsletter or automated email check-ins.
 - Links to local and online support groups (e.g. Mind in Hornsey, Attitude magazine).
 - Neurodiversity coaching resources.

6. Post-Diagnosis Care & Shared Care Agreements

- Patients often receive medication post-diagnosis but may not have structured follow-up.

- Stroud Green Medical follows a Shared Care Agreement (15–20 pages) outlining responsibilities and side effects monitoring.
- Yearly reviews are recommended but not always systematized; suggestion to develop a recall or reminder system.
- Emphasis on framing reviews as “check-ins” rather than evaluations to avoid anxiety.

7. Broader Reflections and Final Thoughts

- Importance of recognising ADHD within the broader neurodiversity spectrum, particularly in women.
- Need for inclusive, non-clinical resources and greater peer support.
- Potential for more holistic, empathetic communication from practices to reduce feelings of isolation and overwhelm.

8. Action Points & Next Steps

- Consideration of:
 - Developing patient resources for ADHD.
 - Exploring peer-led or clinician-facilitated support groups.
 - Improving patient communication during waiting periods.
 - Systemising annual check-ins post-diagnosis.
 - follow up with Bethan and Jonathan via email for additional input on their suggestions especially re services while pts are on waiting list