

# ADHD: RIGHT TO CHOOSE INFORMATION

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## **ADHD/Autism/Gender Dysphoria Shared Care Agreements with private providers (including Right to Choose Referral and Medications)**

Sometimes the care of a patient is shared between two doctors, usually a GP and a specialist, and there is a formalised written ‘shared care agreement’ setting out the position of each, to which both parties have willingly agreed. Where these arrangements are in place, GP providers can arrange the prescriptions and appropriate investigations, and the results are fully dealt with by clinicians with the necessary competence under the shared care arrangement. There is NHS guidance available about this.

Shared Care with private providers is not recommended due to the general NHS constitution principle of keeping as clear a separation as possible between private and NHS care. Shared Care is currently set up as an NHS service, and entering into a shared care arrangement may have implications around governance and quality assurance as well as promoting health inequalities. A private patient seeking access to shared care should, therefore, have their care completely transferred to the NHS. Shared care may be appropriate where private providers are providing commissioned NHS services and where appropriate shared care arrangements are in place.

All shared care arrangements are voluntary, so even where agreements are in place, practices can decline shared care requests on clinical and capacity grounds. The responsibility for the patient’s care and ongoing prescribing then remains the responsibility of the private provider.

If you are under the care of a private specialist, we will not be able to enter into a shared care agreement. You can ask us to refer you to an in-person NHS mental health team, but while waiting to see them, you will need to obtain your treatment from your private specialist directly.

## **Private Providers and some NHS “Right to Choose” providers**

Sometimes patients request their GP to make a referral for an ADHD or ASD assessment or treatment service provider under Right to Choose (RTC). We will write the referral and provide it to you or send it directly to your nominated provider at your request. Right to Choose Providers

are usually private companies. When choosing a Right to Choose Provider it is important to consider the following points:

## **Referral**

The number of RTC providers is large and each provider may have its own referral process. It is not practical for your GP to complete a different referral process for every patient who chooses a different provider. Most providers need a core set of information so your GP may ask you to complete a questionnaire, and an ADHD self-assessment score as part of a standardised referral. If the provider needs additional information, they can request it from the practice or by asking you directly

## **Diagnosis and follow-up**

Most RTC providers exclusively perform remote and/or online assessments and local NHS ADHD services may not have sufficient confidence in these diagnostic processes to accept their diagnoses. They may not take over your care unless they have completed their own assessment and diagnostic process. Therefore, your diagnosis may not be universally accepted, and you may find you cannot seek treatment and follow-up directly with local services following an RTC diagnosis.

We will not carry out tests that private providers want you to have, any tests that private providers need to be done must be completed by them. The Right to Choose providers are also commissioned to do things like physical checks and blood tests and therefore this is also something that they should provide. If they are an online/remote provider, you will need to discuss this fully with them on how to proceed.

## **Prescriptions**

If you are diagnosed with ADHD, the RTC provider may suggest medications for you. Some of the medications used for ADHD are restricted so that GPs cannot routinely prescribe them. The specialist service is responsible for prescribing them. They can request that your GP prescribes them under an agreement called a 'shared care agreement' but it is unlikely that your GP will be able to enter into this agreement for reasons of patient safety and resources.

Due to the nature of RTC providers, if the business stops trading for any reason or if they have their NHS contract removed then their care, and any prescriptions would more than likely cease which is another reason your GP may not feel it is safe, or good practice to enter into an agreement to prescribe for them.

When you are choosing your RTC provider you may find it useful to use this information to support your decision making and also to share with your chosen provider so that they are aware that their duty in prescribing, in particular, is unlikely to be taken over by your GP.

If you have started treatment with a private provider, you will either need to:

- approach the Practice to request a referral to an NHS specialist
- or continue to receive your treatment directly from your private provider indefinitely

Please note that there may be a significant delay in having your diagnosis reviewed by the NHS team and them agreeing to participate in a shared care agreement. During this time, you will need to continue to receive your treatment directly from your private provider. The Practice is not able or obliged in any way to provide a "bridging" prescription.