

Freedom of Information Request

Reference Number: EPUT.FOI.22.2777

Date Received: 29th of December 2022

Information Requested:

I am writing to you under the Freedom of Information Act (2000) to request information relating to the provision of ADHD (Attention deficit hyperactivity disorder) services by Essex Partnership University NHS Foundation Trust.

The Trust are still in the process of receiving migrated patient data from the previous supplier of the services involved. Once all data has been transferred and validated we will be in a position to report against these questions. The Trust is therefore applying exemption Section 22 of the Freedom of Information act, this exemptions is for information that is intended to be published in the future.

Please provide the following information to the email address specified below.

1. Please name the organisation(s) that deliver(s) CYP (children and young people) ADHD assessment / diagnoses in your Trust area
The Lighthouse Child Development Centre
- a. When did the contract(s) begin and when is the contract(s) due to end
1st March 2022
- b. What is the annual spend for this service for 2022, and for the last 5 years?
The Trust only began delivering the services from 1st March 2022, and can therefore only provide the 2022-23 figure which is £1,975,000
- c. How is the service contracted – is it Block, Activity-based, or AQP contracting?
Block
- d. If the service is commissioned with other CCGs, ICSs or Trusts, which are these?
ICS
- e. At what prevalence (% of the child population) have the contracts been commissioned against?
The all age population of South East Essex is estimated to be 357,831. The children and young people population is estimated to be 81,000. The Population growth rate expected by 2024 is 4.3%. South East Essex consists of a mixture of rural and highly density urban areas. The total number of households is projected to increase across South East Essex by 4.1% from 2019 to 2024, and 16.96% by 2034.

The community paediatric service is a Consultant led service providing a specialist service for developmental, behavioural or educations needs outside a traditional secondary care setting. The service assesses, and wherever possible manages the

child or young person's condition within a community setting; enabled through joint working with the relevant specialist community and acute services, education, social care and voluntary sector.

2. Does the same organisation as for Question 1 also deliver CYP ADHD prescriptions and post-diagnosis ADHD support in your Trust area? If not, please provide the same information for this organisation.

The Lighthouse Child Development Centre deliver CYP ADHD prescriptions and post diagnosis ADHD support in South East Essex.

3. Please outline the CYP ADHD pathway in your area, including key referral sources
CYP ADHD is diagnosed through the assessment and review of the problem either at school, home or at different settings. The main sources of information will be school and home and will be gathered in the form of specific questionnaires. Parents may have any additional information for example school reports as these can also give us useful supporting evidence at referral.

Referrals are accepted from GP via electronic SystemOne, education and other professionals.

On receiving a referral, the team triage all referrals before a case discussions at weekly MDT meetings. If the evidence in the referral form meets the standard criteria for acceptance, we gather information from parents, carers, schools and settings, as well as from any other key professionals, by using standardised questionnaires to be completed.

Once returned, the information will be assessed, the questionnaires scored to determine if they reach the clinical threshold for ADHD. These questionnaires can identify specific symptoms of ADHD that may not emerge in a clinical interview. Answers to the questions can reveal how well a person functions at school, home, or work. While waiting for an appointment, the team will offer support based on children, young person individual needs or sign post to the local offer.

Parents may receive an appointment to bring their child / young person for a Qb-test. This is a test that helps to provide us with an objective result. Not all children and young people going through assessment will be asked to have a Qb test as part of children, young person's journey. The Qb test provides a valuable baseline measurement that can help to evaluate any future changes in the child, young person's activity, attention and impulsivity before an assessments to consider if they may have a Neurodevelopmental condition.

An appointment will be followed after the Qb test screening and the consultation takes one hour fifteen minutes with the Community Consultant Paediatricians or ADHD Advanced Clinical Practitioner & Non-Medical Prescriber. The assessment collates the tests that have been previously completed and time is spent careful going through history from the child and his or her parents. Evaluation of assessments and an appropriate management plan is discussed. Once conclusion is made regarding the diagnosis that child or young person has ADHD based on DSM-5

with a thorough clinical interview using a standardised ADHD rating scale, different treatment options will be discussed. The screening test administered does rule out common coexisting conditions like learning disorders, autism, and mood disorders that may or may not be present.

Parents are given a chance to ask any questions they might have to a team member and sign posted to Parent Information Sessions organised by the ADHD team.

The service provide a range of treatment interventions which can be initiated with parents or young person's consent and monitored for 3 months before 6 months shared / continue care with GP's. If medication is indicated, with the family's agreement, parents are contribute to, help implement, monitor and review. While the medications are not a cure for ADHD, they have been proven to help people with the condition, improving their ability to concentrate, control their impulses and feel overall calmer.

This service also includes guidance to school, via our Schools SENCO on educational strategies for helping the child with ADHD and related conditions in the classroom. We offer Non –medication options for everyone and some people prefer to try other options in the first instance. This is something very personalised to the young person and would be discussed at length with the ADHD Clinical Nurse or Consultant Community Paediatricians to establish what would be most suited to meet young person's needs.

4. How many children and young people are currently waiting for a CYP ADHD assessment in your area? What is the longest and median wait time from a referral? The Trust are still in the process of receiving migrated patient data from the previous supplier of the services involved. Once all data has been transferred and validated we will be in a position to report against these questions.

- a. Within the last year, how many children and young people were assessed within 12 weeks of referral?

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- b. Within the last year, how many children and young people were discharged without assessment?

Due to the transfer of the Lighthouse Child Development Centre (new service), some of the CYP have been discharged if they do not meet the ADHD criteria for the following reasons:

- Assessed, not enough information given, advised, signposted or redirected
- Assessed, advised and returned to referrer
- No response to communication
- Screened, age criteria not met, returned to referrer
- CYP has not attended 2+ contacts

- Discharged due to WNB (Was Not Brought)
- c. Please answer Questions 4, 4a, 4b for as many historic years as possible, up to 5 years
EPUT is not able to report on 5 years historical data. The service was managed by Southend University Foundation Hospital Trust.
5. For the last 5 years, please give the number of CYP patients per year in the Trust who were:
 - a. Referred for ADHD assessment
 - b. Given an ADHD assessment
 - c. Given an ADHD assessment from a 'Right to Choose' provider, outside the service contracted
 - d. Diagnosed with ADHD
 EPUT is not able to report on 5 years historical data. The service was managed by Southend University Foundation Hospital Trust.
 6. For the last 5 years, what was the average number of ADHD-qualified staff delivering services in the area? How does this split by role:
 - a. Qualified psychiatrists
 - b. Paediatricians
 - c. Speech and Language therapists
 - d. Clinical Psychologists
 - e. For a-d, please also give numbers of trainees
 EPUT is not able to report on 5 years historical qualified staff. The service was managed by Southend University Foundation Hospital Trust.
 7. Please provide equivalent answers for Questions 1-6, but for Adult ADHD services in the Trust. If the Trust does not distinguish between CYP and Adult ADHD services, please answer Questions 1-6 for all patients collectively

Section 22: Information intended for future publication.

- (1) Information is exempt information if—
 - (a) the information is held by the public authority with a view to its publication, by the authority or any other person, at some future date (whether determined or not),
 - (b) the information was already held with a view to such publication at the time when the request for information was made, and
 - (c) it is reasonable in all the circumstances that the information should be withheld from disclosure until the date referred to in paragraph (a).

- (2) The duty to confirm or deny does not arise if, or to the extent that, compliance with section 1(1)(a) would involve the disclosure of any information (whether or not already recorded) which falls within subsection (1).
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Publication Scheme:

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT's Publication Scheme is located on its Website at the following link <https://eput.nhs.uk>