Requests for Adult ADHD Assessment – Information needed to be able to be considered for an assessment with the Sussex (West) Mental Health Adult Assessment and Treatment Service (ATS). Updated January 2023.

This information has been derived from analysing adult ADHD assessment referral rejections we have received over the past many months. If the information below is provided as part of a GP referral, then this significantly increases the chances of your patient being invited to attend for a further assessment to consider a diagnosis of ADHD.

- 1) The Self-Assessment Questionnaire: https://add.org/wp-content/uploads/2015/03/adhd-questionnaire-ASRS111.pdf
- 2) If appropriate, ask a parent or guardian to complete the Vanderbilt ADHD Diagnostic Rating Scale, this would provide a valuable developmental perspective <u>http://dss.mo.gov/mhd/cs/psych/pdf/adhd_scoring_parent.pdf</u>
- 3) Finally a **detailed narrative**, describing the duration, nature and degree of impairment and its impact upon the patient's social and operational functioning both in the developmental years and in the present day is also required.

This referral and submissions can be sent to the ADHD service where it will then be reviewed and triaged to see if the referral criteria for assessment in secondary care have been met - based on the evidence presented. This is in keeping with National Institute of Clinical Excellence (NICE) guidance*:

N.B. It may be worthwhile including reference to these symptoms when making the referral...

Symptoms of ADHD for adult referral

Adults presenting with symptoms of ADHD in primary care or adult general psychiatric services who do not have a childhood diagnosis of ADHD should be referred for assessment by a mental health specialist trained in the diagnosis and treatment of ADHD, if there is evidence of typical manifestations of ADHD (hyperactivity/impulsivity and/or inattention) that:

- began during childhood and have persisted throughout life
- are not explained by other psychiatric diagnoses (although there may be other coexisting psychiatric conditions)
- have resulted in or are associated with moderate or severe psychological, social or educational or occupational impairment.

*NICE guidance – recommendation 1.2.10 <u>https://www.nice.org.uk/guidance/ng87/resources/attention-deficit-hyperactivity-disorder-</u> <u>diagnosis-and-management-pdf-1837699732933</u>