

## Three Chequers Medical Practice

### Paediatric to Adult Transition for ADHD Medication Prescribing Policy

This policy outlines the Three Chequers Medical Practice position on the ongoing prescribing of ADHD medications in paediatric patients who are being, or have been, discharged from community paediatric service.

The prescribing of ADHD medications (Methylphenidate, Atomoxetine, Lisdexamfetamine, Dexamfetamine and Guanfacine) can only be considered in patients who remain under specialist care, and where a local, valid and mutually agreeable shared care agreement exists. This means that we will only consider prescribing these medications to patients who have been transitioned to adult services and are under a specialist ADHD service.

Regrettably we are seeing an increased amount of patients being discharged from paediatric ADHD services without a safe plan for their transition to adult service, and there is an expectation of the GP surgery to pick up prescribing of these medications for such a time that the adult service may be able to review the situation. At this point in time, the waiting list for adult ADHD appointments is measured in years (at the time of writing over 3 years). It is therefore likely that patients being prescribed such medications from GP surgeries would be without a specialist overseeing their care (and being available for dose changes, queries and monitoring) for years. Unfortunately, this puts general practice in a very difficult position as any prescribing of these high-risk medications would fall outside of the recommendations of our local prescribing service, outside of our medical indemnity provision, and outside of GMC guidance for good medical practice (e.g. working outside of the limits of your competence). Our local prescribing formulary is very clear that these medications should only be prescribed by a specialist with specific training and experience in their use. GPs can take over prescribing under a shared care agreement with a valid specialist, if they so feel able to do so. Outside of this agreement, these medications are deemed 'red listed' drugs and should not be prescribed by a non-specialist.

#### **What is a shared care agreement?**

*In order for these medications to be prescribed by an NHS GP, it requires a 'shared care agreement' between the consultant and general practitioner. This is a mandatory stipulation placed on GPs for safety reasons by our local BSW area prescribing committee. This is a specific, formal, locally-agreed, document which outlines the responsibilities for patient, specialist (typically a consultant specifically trained in this area of medicine in the NHS) and GP. This is an entirely voluntary agreement that a GP may enter into if he/she wishes, but by doing so takes on full clinical and medico-legal responsibility for safe prescribing (and usually monitoring) of this medication. ADHD medications are not medications which are allowed to be initiated in primary care due to their specialist nature and side effects, but could be prescribed by GPs under a locally agreed NHS shared care agreement once the patient had been stabilised on these medications. This typically refers to a period of time without dose adjustments or clinical concern, usually 3 months. There is no contractual obligation for a GP to take on any shared care agreement. We would only take on a shared*

*care agreement with NHS providers (see prescribing policy Dec 23 regarding shared care prescribing with private providers).*

NHS guidance documents from 2015 highlight that a transition to adult services is a predictable planned transfer and the receiving service should provide follow up contact at a 6 months interval after discharge. The referral to adult services should be made in advance by the paediatric service. Where it becomes clear that the commissioned adult service is not equipped to provide appropriate and timely care, this should be raised with the commissioners of services (*Model Specification for Transitions from Child and Adolescent Mental Health Services*, <https://www.england.nhs.uk/wp-content/uploads/2015/01/mod-transt-camhs-spec.pdf>).

If the Three Chequers Medical Practice becomes aware of an inappropriate request for general practice prescribing outside of the above stipulations, we will ask the relevant paediatric service to liaise with the relevant transitional/adult team on an urgent basis to arrange safe transfer of care and ongoing prescribing. We would also ask this service to raise any concerns of service inadequacy with the local commissioning body. We may consider taking over prescribing in due course once a patient has been reviewed by the adult service and an appropriate shared care agreement has been agreed.

*Addendum: The partners at The Three Chequers Medical Practice recognise the unenviable position that patients may find themselves in as a consequence of inadequate NHS provision for ADHD medications and services. We have had to take on this position to ensure the safety of prescribing for our patients, within the confines of the resources available to us. We hope this goes some way to explaining our decision and concerns.*

Kind regards,

The Partners at Three Chequers Medical Practice