

Dear General Practitioner colleagues

I am writing to clarify and update you on NHS Borders' position regarding the assessment and treatment of ADHD and Autism Spectrum Disorder (ASD).

In 2023, we made the difficult decision to discontinue ADHD and ASD assessments for adults within secondary care Community Mental Health Teams unless they met the criteria for secondary care Mental Health Services. This decision was made in alignment with recommendations from the National Autism Implementation Team.

As you may be aware, we conducted a review of the waiting list and provided all individuals concerned about ASD with either an assessment for possible diagnosis or a series of educational sessions about ASD, delivered by the third-sector agency Autism Initiatives.

Over the past two years, we have strengthened our partnerships with third-sector colleagues and established a routine process of providing information, self-help materials, and signposting resources to patients who are referred for but declined an ASD and/or ADHD assessment.

In addition to Autism Initiatives, services such as The Procrastination Station and Avatar have been instrumental in supporting individuals within the Scottish Borders community who experience traits associated with ASD and/or ADHD

As you may have similarly observed, our service continues to experience a significant influx of requests for ASD and ADHD assessments. The complexity of these referrals has also increased over time, with growing demand for medication management following private diagnoses, medication recommencement, CAMHS transitions, and transfers of care.

These accumulating pressures and evolving challenges have necessitated careful organisational consideration to ensure the effective allocation of resources and the continued delivery of high-quality care.

In August 2024, Mental Health senior managers and clinical leads were supported by the PACS AMD and GP Executive to present a paper to the GP Subgroup and NHS Borders Executive Team. The agreed recommendations are summarised below. I also attach an easy-to-read flow chart.

- i. Referrals for ASD and/or ADHD assessment will only be accepted by Borders Adult Community Mental Health Service (BACMHS) where the individual meets the general criteria for secondary Mental Health Care and Treatment.

- ii. Those individuals transitioning from CAMHS on medication for ADHD, beyond the age of 18 years, will be monitored annually.
- iii. Transfers of care for those prescribed ADHD medication by another health board will be accepted. For individuals who do not meet secondary care mental health criteria, annual review should be honoured in recognition of the risks associated with ceasing medication.
- iv. Individuals requesting recommencement of ADHD medication will be accepted, providing that cessation has occurred within a two-year period. For all of those out with this timeframe, consideration should be paid to the need for assessment determined by whether secondary care mental health criteria are met.
- v. Requests for review of diagnostic assessment and/or continuation of prescribed medicines following the advice of a private clinician should be declined.

In addition, the service is undergoing a strategic redesign to ensure care and treatment remain efficient and aligned with current needs. One specific area requiring reform is the ADHD annual review process, which is being restructured to enhance its relevance and person-centred approach. Historically, these review appointments—led by a Consultant Psychiatrist—have experienced low attendance.

To prioritise clinical resources effectively, all ADHD reviews have been temporarily paused, with an agreed escalation plan in place to direct support toward those most in need. When taken, this decision was discussed with the GP leadership, and a patient letter was developed to provide essential information regarding potential adverse effects and risks associated with ADHD medications. Very recently, we have had further discussions with GP leaders and recognise the clinical risk currently sitting with the prescriber in general practice given secondary care monitoring is on pause; we will work at pace to develop options to reinstate annual monitoring. We aim to discuss our progress at the next GP Subgroup meeting.

At present, individuals engaging with BACMHS who have an ADHD diagnosis can access a duty nurse Monday to Friday from 09:00 to 17:00 to discuss any immediate concerns. They can do this by telephoning their local CMHT and their call will be directed to the duty nurse. Clinical judgment will then determine whether follow-up or risk escalation is required.

As a service, we are acutely aware of the challenges facing both primary and secondary care, recognising the interconnected impact of changes in one area upon the other. We remain committed to collaboration during this difficult time and welcome opportunities for face-to-face discussions regarding the assessment, care, and treatment of individuals with ASD and/or ADHD. Furthermore, ongoing efforts are underway to enhance the online information available to the public and improve the GP RefHelp resource. Enclosed is an NHS Borders Position Statement, outlining the situation, which you may wish to provide to patients for their information. If there are additional ways in which we can support you, we would greatly appreciate your suggestions.

The following information outlines the Consultant Psychiatrists and their respective locality teams. While all referrals are now directed through the service's central Single Point of Access, we continue to encourage open communication with the clinical leads to ensure seamless collaboration and effective patient care.

Community Mental Health Team	Consultant Psychiatrist and Clinical Lead
South	Dr Amanda Cotton (Associate Medical Director)
West	Dr Jennie Higgs
East	Dr Anton Barrington

Once again, I encourage you to reach out to me or either of our other clinical leads should you wish to discuss any aspect of this letter in further detail.

Yours sincerely

Dr Amanda Cotton
Consultant Psychiatrist
Associate Medical Director, Mental Health and Learning Disability Services

ADHD Treatment Pathway

