

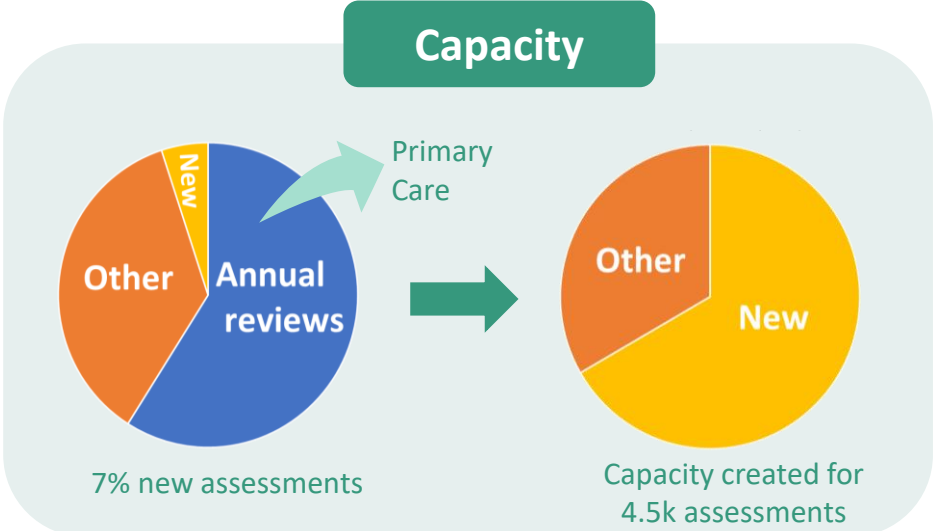
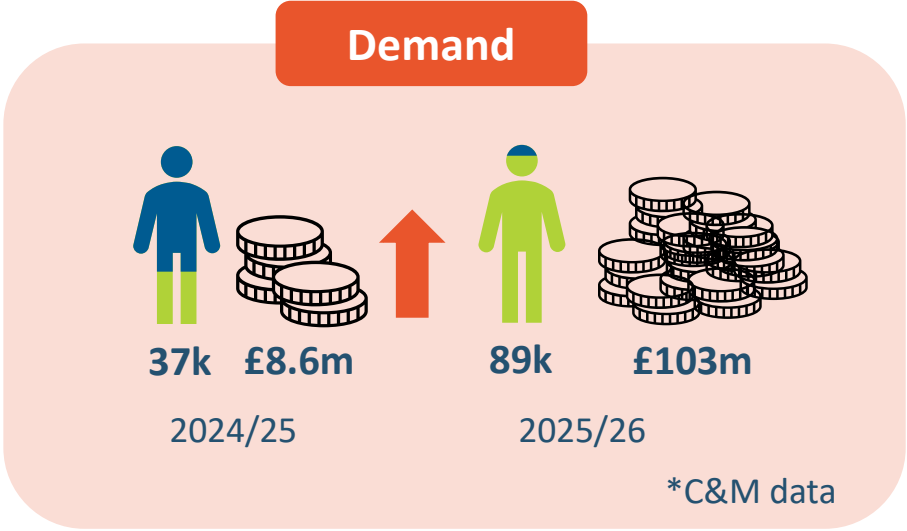
# **A model for adult ADHD services**

National Cluster Programme



# An innovative needs led adult ADHD service model

that will **save money**, create **time back to care**, meet **policy objectives** and **improve lives of people in our society**



### Policy

- Care closer to home
- Analogue to digital
- Sickness to prevention

### Social

Leaving people without support may result in:

- Urgent care demand
- Economic inactivity
- Offending behaviour

# Our model

Analogue to digital

Hospital to community

Sickness to prevention

- ✓ Has been **co-produced** using complex change theory
- ✓ Considers **whole system flow**, end to end
- ✓ Looks at **redeployment of existing resources** to reduce non-contract activity
- ✓ Introduces digital innovation and integrated care concepts to **release capacity** and create workforce efficiencies
- ✓ Is a primary care-based service enhancement to improve **access to care closer to home**
- ✓ Introduces a needs-led approach where **every individual** is provided relevant interventions at the right time
- ✓ **Unlocks the bottle neck** in secondary care created by annual review requirements

# Our vision of adult ADHD services

A primary care based service enhancement that will result in **improved access, patient flow** and **workforce efficiencies**

## THE MAJOR CHANGES TO THE PATHWAY ARE:

### CHANGE 1

#### CONSISTENT ONLINE EDUCATION REPOSITORY

Provides validated educational self-care resources and digitally enhances the service by enabling electronic self-assessments.

### CHANGE 2

#### NEW NEURODEVELOPMENTAL PRACTITIONER ROLE

Introduction of a new role into primary care environment to provide more timely care closer to home without increasing GPs' workload.

### CHANGE 3

#### NEEDS LED APPROACH

Introduction of a needs led categorisation tool and associated support including a patient self-management platform to coordinate a variety of prescribed interventions.

### CHANGE 4

#### DATA TRANSFER

Integrated digital infrastructure between primary and secondary care to enable data-sharing.

### CHANGE 5

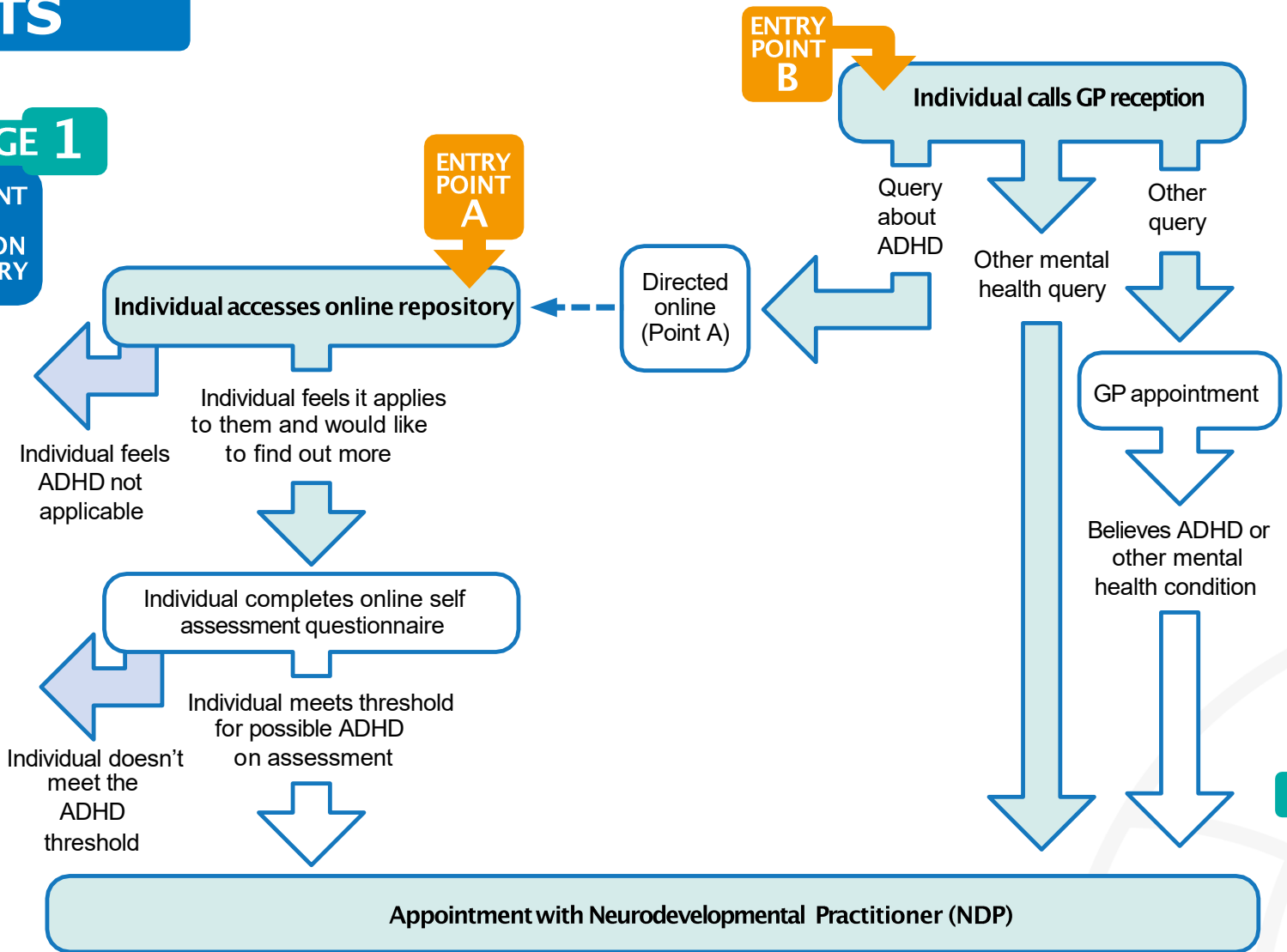
#### ANNUAL REVIEWS IN PRIMARY CARE

Enables annual reviews to take place in primary care, protecting capacity for new referrals in secondary care.

# ENTRY POINTS

## CHANGE 1

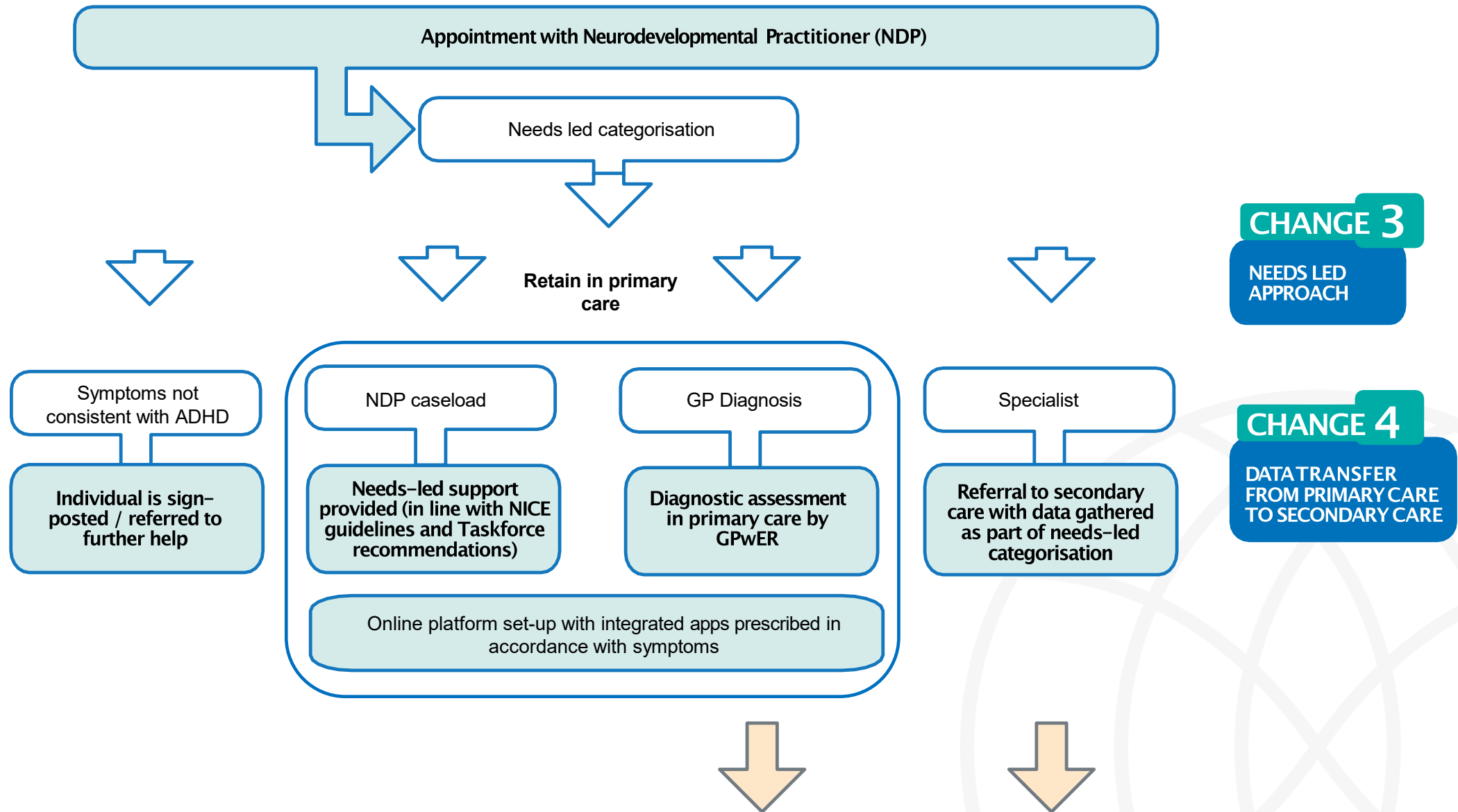
CONSISTENT ONLINE EDUCATION REPOSITORY



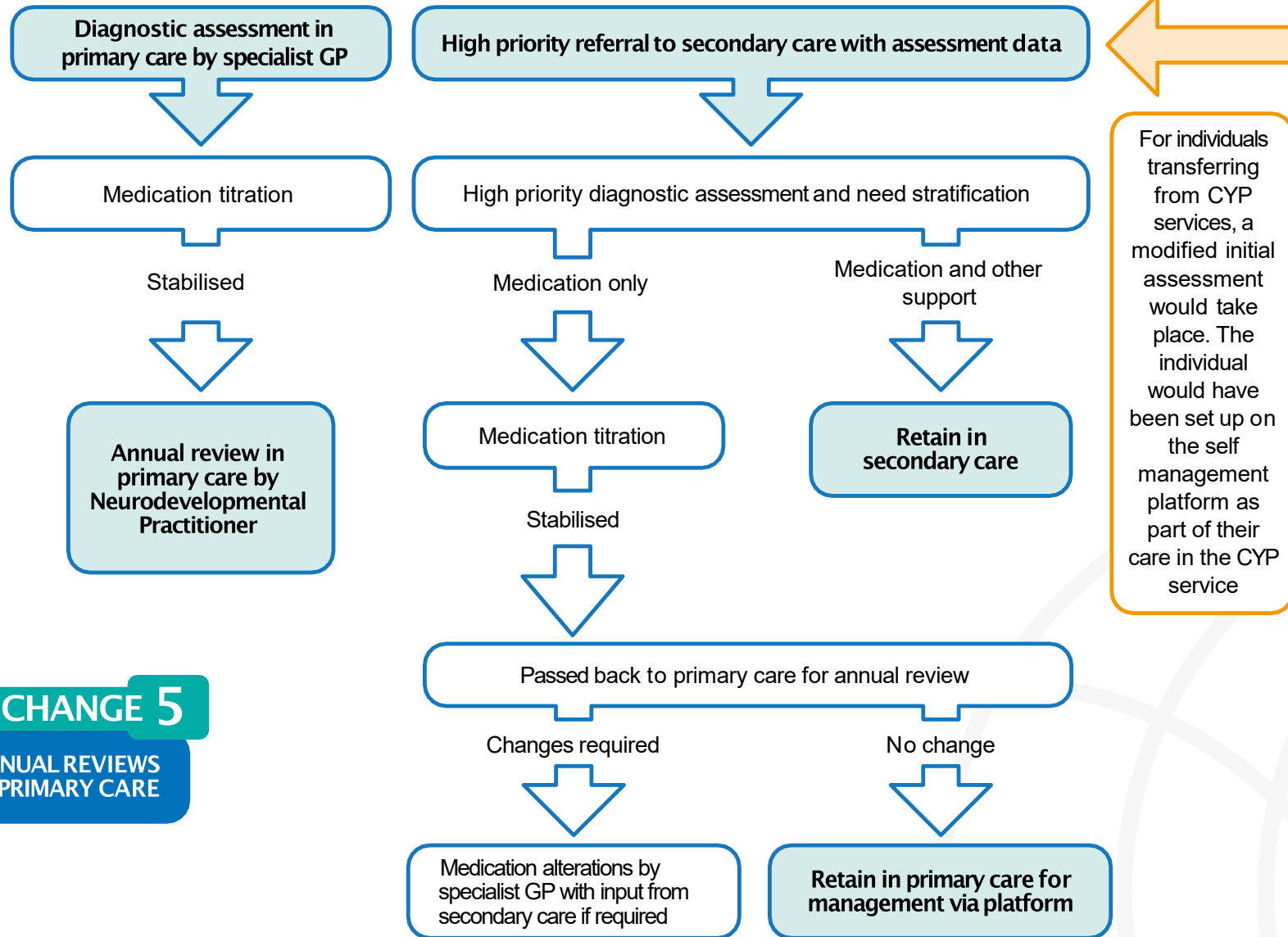
## CHANGE 2

NEW NDP ROLE

# PRIMARY CARE



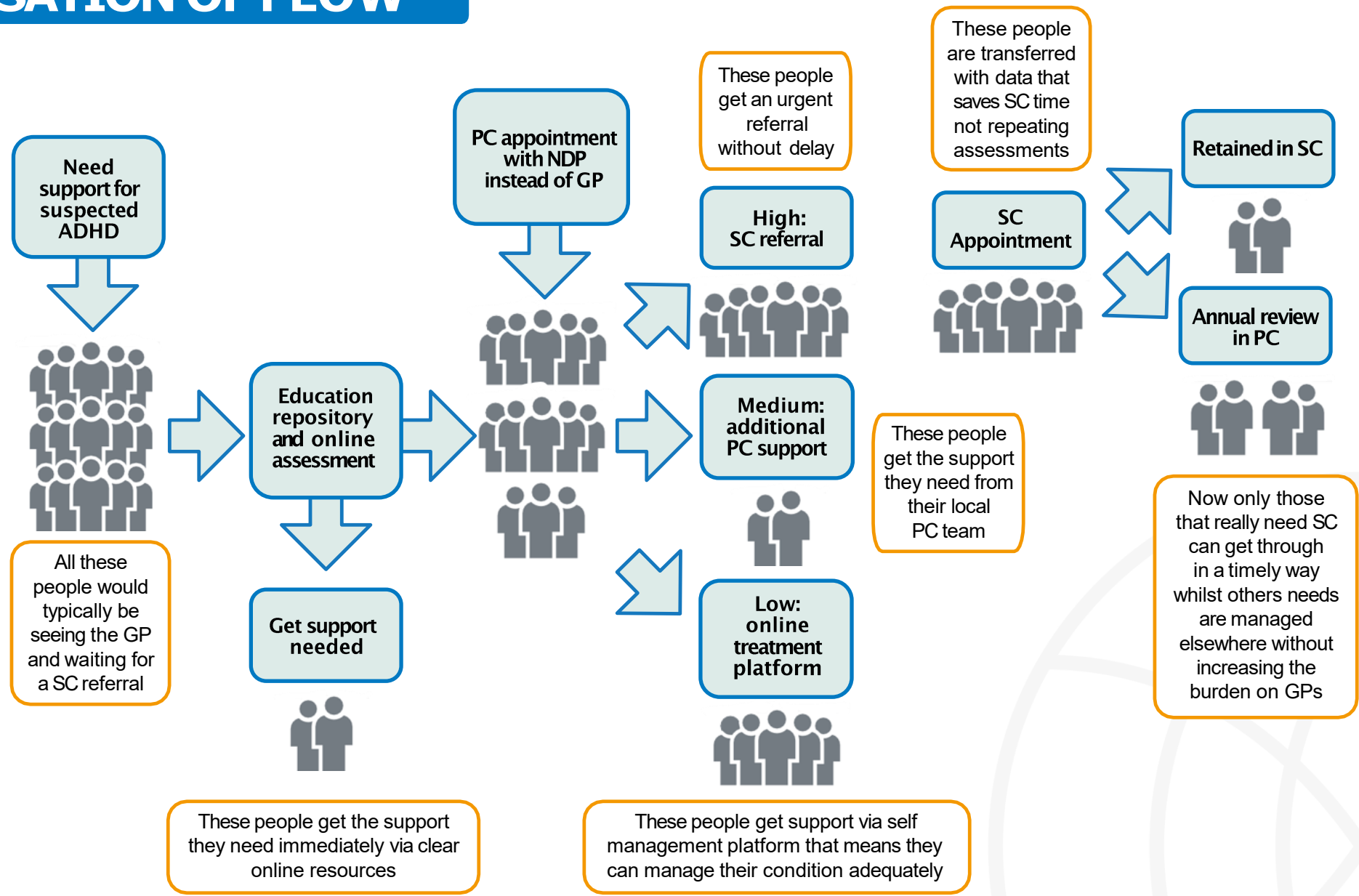
# SPECIALIST CARE



## CHANGE 5

### ANNUAL REVIEWS IN PRIMARY CARE

# VISUALISATION OF FLOW





# Connect with us

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