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**Re Official Information Request for ADHD diagnosis and services information**

I refer to your official information request dated 08 November 2021 for the following information:

- 1. Do you diagnose ADHD for those under the age of 18, and for those over 18? If so, what is the process to getting a diagnosis, and who does the diagnosis? If not, please explain why not.**
- 2. What is the waiting list/average time frame to be diagnosed over the last 12 months? (for under and over 18)**
- 3. What support do you provide once they are diagnosed?**
- 4. Do you have the ability to cope with an ADHD person in crisis? What care is provided?**

**Response**

We have provided the information under each of your questions below.

- 1. Do you diagnose ADHD for those under the age of 18, and for those over 18? If so, what is the process to getting a diagnosis, and who does the diagnosis? If not, please explain why not.**

For those under the age of 18 years, they may be assessed and treated for ADHD through either child and youth mental health services or under paediatric services (Starship). Information is provided below for each question, separating out these two different pathways.

For those over the age of 18 years, within adult mental health services, we do not provide a specific assessment and diagnostic service for those referred primarily for ADHD.

In Auckland DHB's Child and Youth Mental Health Services ADHD is usually diagnosed by collecting assessment information from the young person, parents, and school, and applying diagnostic criteria laid out in the Diagnostic and Statistical Manual of Mental Disorders (DSM). Diagnoses are made by appropriately qualified clinical staff, usually Clinical Psychologists, Child and Adolescent Psychiatrists and Paediatricians.

In Auckland DHB's Paediatric Services, we take referrals for ADHD assessment up to the patient's 15<sup>th</sup> birthday. The process is:

- referral from a GP to our service
- we collect information from school, parents, young person (this includes structured questionnaires such as Conners Rating Scales, as well as clinic assessment and additional information about school behaviour, performance, and what has been done to date to support young person and whānau)
- for families facing barriers to accessing our services, we can also engage the Starship Community team to assist with assessment, information gathering, and providing guidance to young person/whānau
- a specialist paediatrician makes the diagnosis (majority), sometimes with the assistance of a psychologist (small minority)

**2. What is the waiting list/average time frame to be diagnosed over the last 12 months? (for under and over 18)**

For Child and Youth Mental Health Services, we have identified all cases with a diagnosis of ADHD as well as cases open to ADHD services. Of these cases we identified those who had a first face-to-face appointment, including telehealth consultations, within the period 1/11/20-31/10/21. Please be aware that it is likely that these cases under-represent the true number of ADHD cases but is the closest we are able to identify without examining all records manually.

The average wait time between referral and first face to face (including zoom) appointment for this group was 119 days.

Paediatric Services have larger volumes to deal with and do not collect waitlist data. Some young people have other complicated medical and/or developmental issues and the ADHD diagnosis may occur some years into long term follow up. For the majority of young people referred newly to our service, the time from referral to diagnosis is approximately 3-4 months. This is longer than historically due to the impact of COVID which has extended referral times.

We are unable to provide more accurate assessment of the information requested, as it would require the review of individual clinical records of patients.

Due to the sensitivity of this information, frontline clinical staff would need to review individual clinical files over the course of four years, and it would not be appropriate to use a contractor to review the records. This would take the frontline staff away from their clinical work and prejudice our ability to provide core clinical services and it would take the frontline staff away from their clinical work and prejudice our ability to provide core clinical services.

We have considered whether charging or extending the timeframe for responding to this aspect of your request would assist us in managing this work and have concluded it would not. We have, therefore, determined to refuse this element of your request under Section 18(f) of the Official Information Act due to substantial collation and research.

### **3. What support do you provide once they are diagnosed?**

For Child and Youth Mental Health Services we can outline the support describing how a person diagnosed with ADHD is offered information around the condition; treatment (primarily medication); on-going monitoring and review until stabilisation. Care is integrated with their General Practitioner. We may also liaise with other services involved, such as their school.

The young person and their family may also be involved in other mental health supports if there are co-presenting issues, such as anxiety, mood or behavioural difficulties. These supports might include individual therapy, group therapy, parenting programmes, medication.

For Paediatric Services, we make sure we discuss the forms of support available in the community, advice provided that can be used in discussions with school to take account of the diagnosis in providing learning support, a discussion about the place of medication, and if medication is commenced follow up occurs for a period of time (varies depending on the patient and whānau needs) to optimise medication. Once stable on medication ongoing care with clear advice is provided to the patient's GP, with easy access to our service for advice or further input as needed. Some young people with complex needs (for example multiple diagnoses) have long term formal specialist follow up.

### **4. Do you have the ability to cope with an ADHD person in crisis? What care is provided?**

Care provided would depend on the nature of the crisis. There is a 24/7 crisis mental health response available for those in need of such care through the regional child and youth crisis mental health service.

For urgent issues (i.e. those which are not an emergency) a referral to our services can be responded to quickly (within days) as needed. We are also able to provide urgent medical advice (e.g. medication adjustment).

I trust this information answers your questions.

You have the right to seek an investigation and review by the Ombudsman of this decision. Information about how to make a complaint is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz) or freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Auckland DHB website.

Yours sincerely,



Ailsa Claire, OBE  
**Chief Executive**