## Statement on overseas psychiatric and private ADHD assessments

The guidance from the NHS Lothian waiting times governance page is as follows: **Private Patients Transferring to NHS** 

If a patient has been seen/assessed on a private basis and wishes to transfer to NHS for further assessment, they must first go back to their GP for review. Their GP may choose to refer them to NHS Lothian. These referrals should be treated as any other new referral and the patient must first be added to the 'True' waiting list and seen as a 'new' patient.

The GP and first new appointment with NHS may not be bypassed for 'routine' patients even if the patient was originally seen by an NHS Lothian consultant at their private appointment. However, private patients triaged as medically **'urgent'** by an NHS Lothian consultant may be directly added to the appropriate inpatient waiting list for treatment to ensure the best possible clinical outcome (for example, cancer patients).

The principle is that they should not be put at any advantage or disadvantage in relation to the NHS care they receive.

## Edinburgh advice on private ADHD referrals

- 1. Referral made by GP for NHS assessment after private UK assessment and diagnosis
  - a. Must meet criteria for usual referral threshold. *NB this may change*
  - b. Must include copy of paperwork including initial assessment and recent prescribing.
  - c. If the GP requests, the Triage team can give feedback on whether the current prescribing meets local criteria while waiting for assessment.
  - d. Patient placed on standard NDD waiting list for assessment.

This is in keeping with the guidance on the NHS Lothian intranet waiting times page.

- 2. Referral made by GP for NHS assessment after overseas assessment and diagnosis.
  - a. Must meet criteria for usual referral threshold. NB this may change
  - b. Must include copy of paperwork including initial assessment and recent prescribing.
  - c. If the GP requests, the Triage team can give feedback on whether the current prescribing meets local criteria while waiting for assessment.
  - d. Patient placed on standard GA waiting list for assessment or NDD waiting list or NDD review clinic waiting list depending on criteria (*to be clarified by pan -lothian group*)

## Queries from patients regarding 'shared care'

The shared care protocol is a specific agreement that has been negotiated between local GPs and NHS Lothian for 'specialist' medications including ADHD ones. This allows them to be prescribed in primary care as long as the patients are technically under a specialist service.

The private clinics ask the GPs if they are willing to enter into a shared care agreement with themselves for specific patients and this is at the GPs discretion but the majority decline to do this until the patient is in local NHS secondary care services. If someone has a private diagnosis of ADHD and is referred to our NHS Lothian mental health services, then they join the assessment waiting list as per the guidance above.

The private clinics often work remotely and expect the GPs to do the initial baseline screening of blood pressure, pulse, weight and ECG but they are not obliged to do this and so may decline.

## Advice on psychiatric diagnoses from outwith NHS Lothian/UK

If someone is still seeing a psychiatrist elsewhere either on trips home or via the internet/phone we will not take on their care without a written request from the psychiatrist with a letter outlining their history and diagnosis and current treatment plan. This can be in the original language as it can be translated here but it necessary to transfer their care fully to local services. For GPs making a referral:

Please forward documentation from their current or previous psychiatrist.

- For people with current contact this would include a transfer letter outlining their history and diagnosis, ideally a list of past treatment and current treatment plan.
- For people with a prior history but no active follow-up we would need a copy of at least their last clinic letter and ideally a fuller description of their history if available in other documentation. This may not be possible to obtain.
- For ADHD we would require the original letter /report detailing the diagnostic process and any follow-up letters to date detailing titration on current treatment.

A copy of a prescription is NOT sufficient.

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