
Transitional Care to Adult ADHD Services in a North West England District

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Purpose - We aimed to analyse the transitional care of adolescents diagnosed with ADHD in childhood into adult specialist ADHD services in a local district. We also reviewed current practice and designed a multi-disciplinary transitional care pathway to adult services for adolescents with complex health needs based on best practice and available clinical guidelines.

Design/methodology/approach - Adolescents diagnosed with ADHD from childhood who were eligible for transition to adult ADHD services and who reached the age of 16 years over a period of two years consecutively (July 2009 to June 2011) were studied by a retrospective analysis of their clinical records. Our current transitional care pathway was reviewed and revised.

Findings - Out of 504 patients on the specialist ADHD database, 104 adolescents were eligible for transition to adult services. 19 patients (18%) were referred to CAMHS. 68 adolescents (65%) were discharged from the paediatric services following voluntary discontinuation of medications and non-attendance at follow-up clinics. Only 16 patients (15%) were successfully referred to the specialist adult ADHD services (3 discharged). A multi-disciplinary transitional care pathway to adult services for young people with complex health needs and learning difficulties and information for the carers and young people have been designed and adopted in the local city borough, agreed by all the stakeholders.

Practical implications - A total of 73% of eligible patients were either discharged or lost to follow-up. There must be some flexibility in the referral pathway to the adult ADHD services to allow some of the adolescents who were previously lost to follow-up to be re-referred by other primary or secondary care healthcare professionals if the need arises in the future.

Originality/value - There is a high rate of discontinuation of medications, loss to follow-up and a remarkably low rate of successful transition to locally commissioned adult ADHD services among adolescents diagnosed with ADHD in childhood.