



Case Study: Nottinghamshire Healthcare NHS Foundation Trust – Adult

ADHD Shared Care Service

Disclaimer: Please note that Takeda has provided support to the organisation represented within this write up.

Overview

The Nottinghamshire Neurodevelopmental Service (NeSS) leads on the diagnosis, titration, and stabilisation of adults with ADHD. Once stabilised, patients are transferred to primary care under a shared care agreement. This model has created a growing demand for structured annual reviews across a large and diverse patient population.

To meet this need, NeSS implemented two tailored care pathways:

- One for individuals transitioning from Community Paediatrics and CAMHS.
- One for those already under adult ADHD services.

Recognising the pressures faced by GPs, the service has prioritised automation and streamlined processes to reduce administrative burden. GP feedback has been instrumental, and the service is currently undergoing a full pathway review in collaboration with primary care colleagues.

Quantitative Outcomes:

1. Shared Care Transitions

- Approx. **1,400 patients** currently managed under shared care.
- Year-on-year growth in transitions from NeSS to GP care.

2. Annual Reviews

- **100 patients reviewed monthly** via automated scheduling, reducing GP workload and improving access to titration.
- **200 patients currently overdue** for review (at time of writing):
 - 86 not yet invited
 - 45 invited but not booked
 - 30 invited with no response (awaiting discharge)

3. Missed/Delayed Reviews

- **DNA Rate (2024/25):**
 - Average: 17%
 - Peak: 23% (September 2024)
- **DNA Rate (2025/26 YTD):**
 - Average: 14%
 - Peak: 15.6% (May 2025)

- **Invite letter delays:** 4–6 weeks on average

4. Pathway Utilisation

- Patients allocated across two pathways (CAMHS/Paediatrics vs. Adult Service)
- Ongoing monitoring of transition timelines and throughput

5. Service Capacity

- High volume of new diagnoses and titrations completed by NeSS
- Streamlined pathways contributing to reduced waiting times

6. GP Engagement

- **All 127 GP practices** actively participating in shared care across the ICB
- GP reported adherence to shared care protocols
- Ongoing service review with GP input to improve pathway design and delivery

7. Referral Activity (2025/26 YTD)

- **421 referrals** for 'Diagnosed ADHD' — **39%** of total referrals
- Referral type (first-time vs. re-referral) not clear
- Re-referrals often due to instability or medication-related issues

Qualitative Outcomes

1. Patient Experience

- Strong patient satisfaction with the shared care model
- Consistent positive feedback highlighting the high quality of care for both the transition and ongoing care
- Improved accessibility through multiple clinic locations across city and county because of recent pathway changes

2. GP Confidence

- GPs report improved clarity and support under the shared care model
- Training and resource needs identified to further enhance confidence
- GP views actively shaping ongoing service improvements

3. Improved Care Coordination

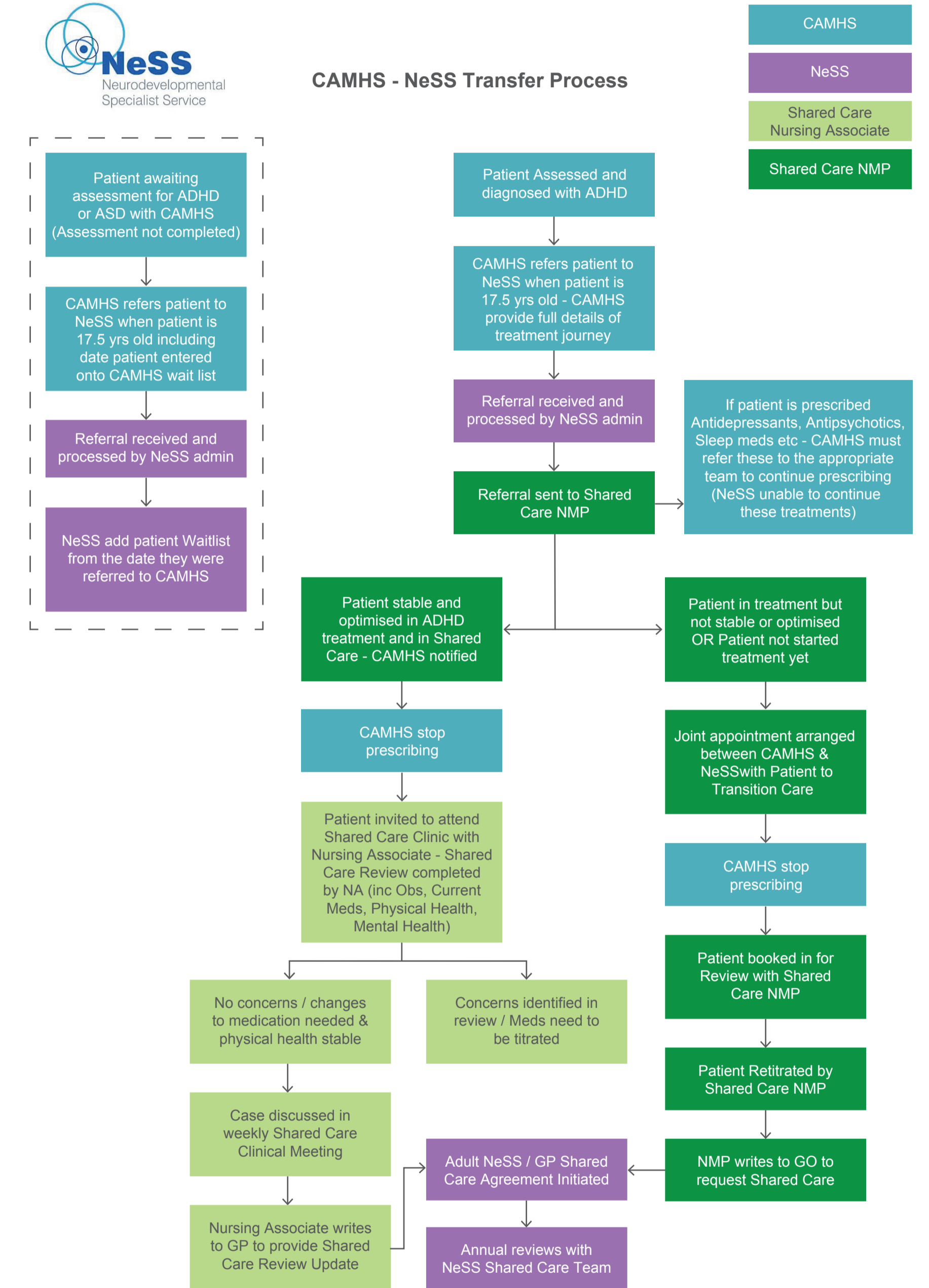
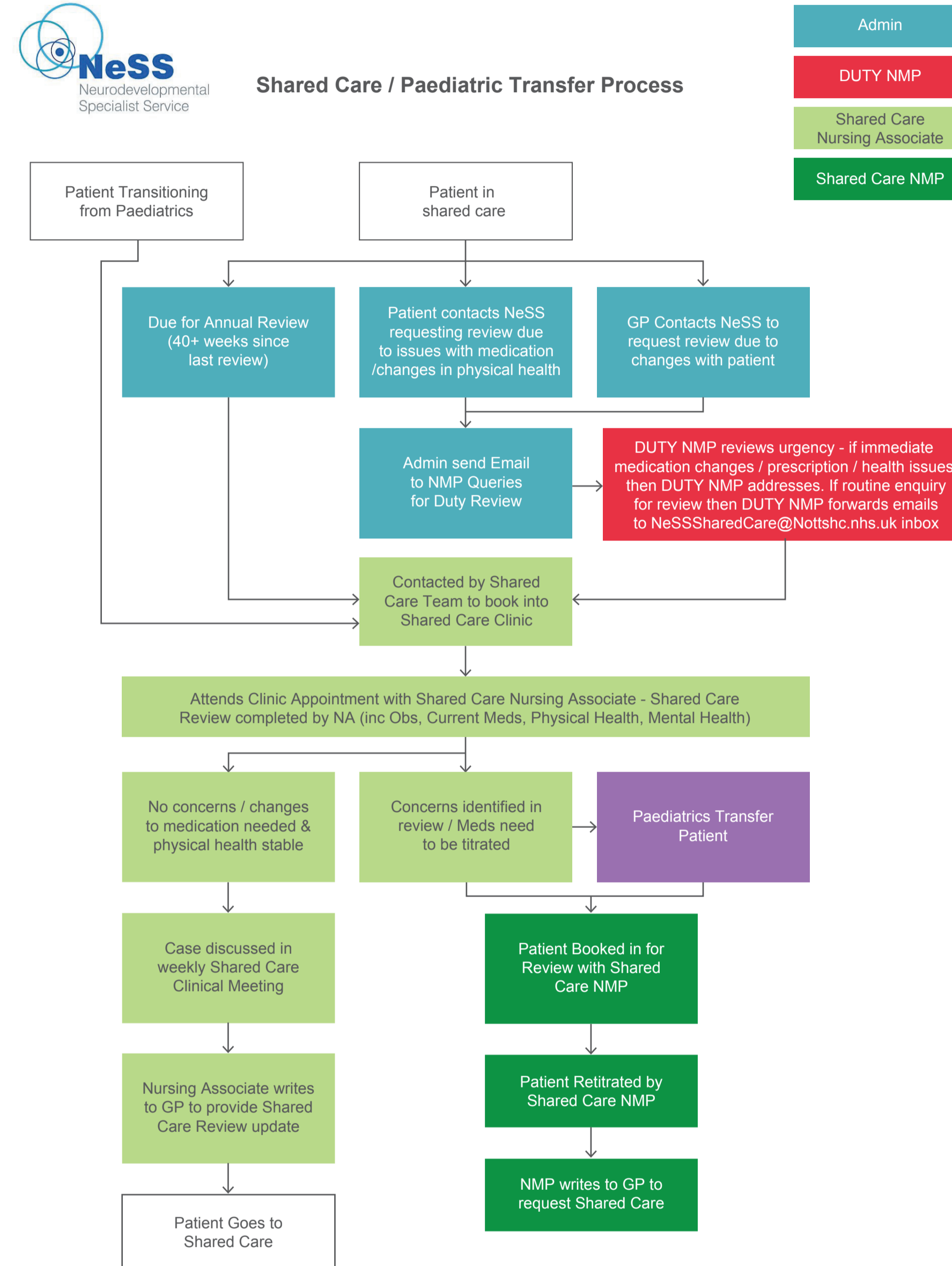
- Strengthened communication between NeSS and primary care
- Clearer roles and responsibilities across services

4. Pathway Accessibility

- Stakeholders report that both care pathways are user-friendly and effective, with pathway allocation perceived as fair and appropriate to individual needs
- Joint clinics with paediatrics support smoother transitions before age 18 years and 3 months, reducing anxiety for patients and families

5. Staff Experience

- Clinicians report increased job satisfaction due to defined roles and streamlined processes
- Dedicated shared care pathway enables Non-Medical Prescribers (NMPs) to manage a higher volume of patients for titration and stabilisation, enhancing service efficiency and expanding clinical capacity
- Enhanced multidisciplinary collaboration across teams



Key Contacts:

Jacqueline Dziewanowska, Autism Disorder Nurse Consultant at Nottinghamshire Healthcare NHS Foundation Trust

Jacqueline.dziewanowska@nottshc.nhs.uk

Rachel Maddaford, Service Development Manager, Takeda UK rachel.maddaford@takeda.com

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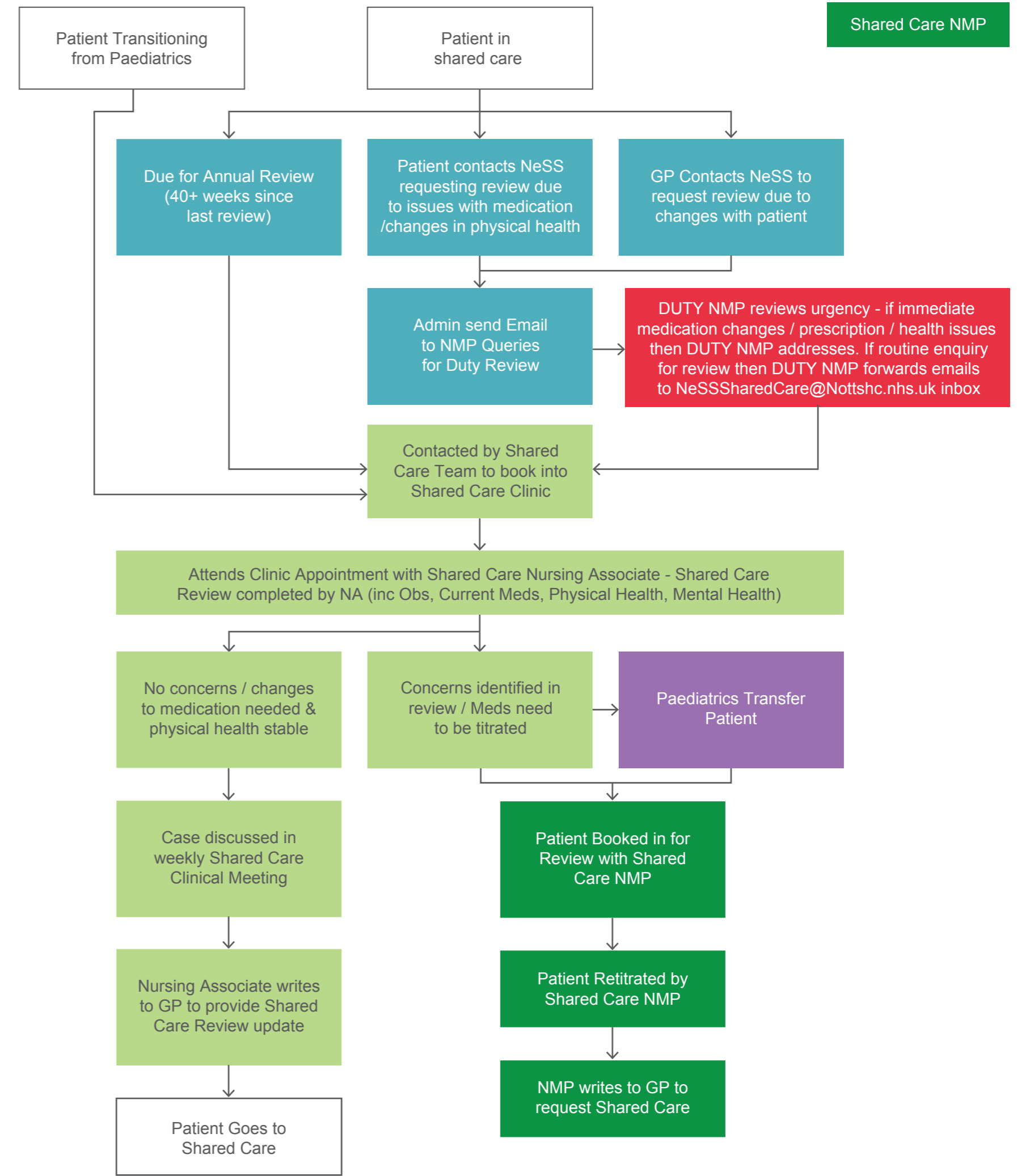
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Shared Care / Paediatric Transfer Process



CAMHS - NeSS Transfer Process

