

13 April 2026

ADHD Shared Care Agreements

I am compiling analysis on ADHD prescribing and care pathways in the region for publication at themoment.blog.

I would be grateful if you could provide the following information for the financial years 2018–19 through to 2024–25 (or the most recent full year available):

1.
Shared care agreements in place at year end

The total number of ADHD shared care agreements in place at the end of each financial year, where a GP within your trust area is prescribing ADHD medication under a shared care arrangement with a secondary care provider.

2.
New shared care agreements initiated

The number of new shared care agreements initiated in each financial year, broken down where possible by whether the originating assessment was conducted by an NHS provider or a private provider.

3.
Shared care agreements declined or terminated

The number of shared care agreement requests that were declined or terminated in each financial year, and the primary reason recorded for each refusal or termination (e.g. capacity, clinical concern, policy change).

4.
Policy on private assessments

Whether your trust has a formal written policy governing the acceptance of shared care agreement requests originating from private ADHD assessments, and if so, the date that policy was introduced or most recently revised. If such a policy exists, please provide a copy.

Paediatric Service response

It will not be possible to provide this information as there is not a specific code to allow us to run a report.

13 April 2026

To undertake this exercise would necessitate a manual interrogation of data which would involve a significant number of hours. This would exceed the costs limit specified in the FOI act.

We estimate that compliance with this element of the request for information would exceed the appropriate costs limit. Under Section 12 of the Freedom of Information 2000, the limit has been specified as £450 and represents the estimated cost of one or more persons spending 18 hours in determining whether we hold the information, locating, retrieving and extracting this information.

Adult Service response.

This data is not readily available from our current electronic care record and would therefore require a manual review, which would exceed 18 hours.

As above