**ADHD pathway for primary age children who have interactions with CAMHS via the joint CCS/CAMHS pathway**

Primary school age child has symptoms of ADHD:

Community Pediatricians gather relevant information: Referral Form (Unified if possible), EHA, Parenting course/input, SEND involvement and reports, Conner’s, SDQ and SNAP IV requested

If a comorbid mental health difficulty is identified and/or information suggests a different neurodevelopmental diagnostic process is also helpful then a CAMHS choice mental health assessment will be offered where a care plan will created.

CAMHS will be responsible for care and risk management once assessed.

This can run alongside the ADHD pathway detailed to the left if appropriate.

**Please note there maybe variations to the pathway depending on clinical need.**

Whilst on waiting list are CAMHS now responsible for care?

6-12 weeks following the parent workshop, parents may call in to CAMHS to request an appointment with a consultant psychiatrist to explore medication management.

Child will be placed on the waiting list for an assessment appointment.

If your child is prescribed medication, they will remain open to the CAMHS team for medication reviews.

No further contact received by CAMHS. Your child will be discharged from CAMHS. Care continues under CCS if required.

In the majority of cases the ADHD parent workshop will be the only intervention required.

As per guidance, the strategies need to be implemented for at least 6 weeks before further intervention can be considered.

If there is sufficient information to suggest ADHD diagnosis ….

Parents will be invited to the ADHD parent workshop as a primary intervention. Currently being offered virtually, it includes: what ADHD is, school advice, sleep, medication options and behavioural management.

Is this communicated by peads??

If ADHD is not suggestive:

Your community pediatrician will make contact via letter with feedback. No further role for CAMHS.

If ADHD diagnosis is supported…

QB results will be passed back for review and discussion at next joint CCS/CAMHS pathway meeting.

If further information is required for diagnosis then your child will be offered a QB test.

Your child will be placed on QB waiting list held by CAMHS. QB test will take place with a CAMHS clinician at the Newtown Centre, Hunts.

Responsibility of care and risk management remains with community peadiatricans and they are your main point of contact for advice.

Case is referred for discussion at the joint CCS/CAMHS MDT referrals meeting by the community pediatricians. The meetings are held monthly. The purpose of the meeting is to agree next steps.   
Several possible outcomes: