

RIGHT TO CHOOSE (RtC) AND SHARED CARE GUIDANCE FOR ADHD/ASD

Sheffield
LMC



GUIDANCE FOR SHEFFIELD GPs

JUNE 2025

In the current climate of significant pressures faced by the NHS across the board, many patients are seeking specialist ADHD / ASD assessments via NHS Right to Choose (RtC). Whilst some of these assessments will provide management plans in line with local NHS provision, GPs are faced with a dilemma of having to action the recommendations where there is conflict between what the RtC provider is recommending versus what is agreed and commissioned as an NHS service locally.

The following guidance is intended to support GPs and their staff navigate this challenge.

A recommendation from an RtC provider should not result in an automatic decision of accepting or rejecting the recommendation simply because it is from an RtC service. Each situation must be considered on the individual circumstance and decision made, where appropriate, with colleagues in the GP surgery if they are uncertain about their competence to take responsibility for the patient's continuing care. The following factors should be considered before considering either an RtC or private provider recommendation to an NHS treatment / prescription:

- Is the medicine allowed on NHS prescription? For example, is it included in the NHS "Blacklist"
- Would the medicine normally be prescribed as part of the local NHS treatment pathway?
- Is the medicine included in the local NHS drug formulary
- Is the medicine prescription off-licence?
- Is the medicine specialist and for consultant prescribing only?
- Do I know enough about the medicine and any associated monitoring to prescribe and take on the clinical responsibility?
- Is the medicine suitable for self-care or can it be purchased over the counter?
- Should this be a private prescription for an NHS patient as the medicine is not commissioned by the NHS?

It is important to note that in initiating the referral through RtC, the GP practice can be expected to action the recommendations as long as they are in line with the local NHS provision (for example, prescription of a shared care medication for ADHD). Therefore, it is vital that the challenges of this process are discussed with the patient before the referral is initiated in the first place. If the GP is aware at the point of referral that they are unable to commit to sharing care with the patient's choice of provider, it is prudent to discuss this with the patient prior to referral.

The LMC has created templates that practices can use to communicate this with the patient and the RtC provider:

Appendix 1: Initial communication with the patient **before** the referral.

Appendix 2: Template referral letter to the RtC provider.

Appendix 3: Patient ADHD / ASD referral questionnaire (patient to complete and attach with Appendix 2).

APPENDIX 1

ADVICE TO PATIENT BEFORE REFERRING VIA RIGHT TO CHOOSE

You have asked your GP to refer you for an ADHD or ASD assessment and / or treatment service provider under your Right to Choose (RtC). Your GP will write the referral and provide it to you, or send it directly to your nominated provider at your request. If you have any queries about the appointment, please contact the provider directly.

RtC providers are usually private provider companies that hold an NHS contract with one or more NHS commissioners. When choosing an RtC provider it is important to consider the following points:

Choice

Your GP cannot choose for you. You need to research the options and make the choice yourself, then contact your GP to inform them of your chosen provider and they will advise you on how to proceed. One point of reference for RtC providers is ADHD UK: <https://adhd.uk/>.

Referral

The number of RtC providers is large, and each provider may have its own referral process. It is not practical for your GP to complete a different referral process for every patient who chooses a different provider. Most providers need a core set of information, so your GP may ask you to complete a questionnaire and an ADHD self-assessment score as part of a standardised referral. If the provider needs additional information, they can request it from the practice or by asking you directly.

Diagnosis and follow-up

Most RtC providers exclusively perform remote and/or online assessments, and the local NHS ADHD services may or may not have sufficient confidence in these diagnostic processes to accept their diagnoses. They may not take over your care unless they have completed their own assessment and diagnostic process. Therefore, your diagnosis may not be universally accepted, and you may find you cannot seek treatment and follow-up directly with local services following an RtC diagnosis.

Prescriptions

If you are diagnosed with ADHD the RtC provider may suggest medications for you. The medications used for ADHD are restricted so that GPs cannot routinely prescribe them. The specialist service is responsible for prescribing them. They can request that your GP prescribes them under an agreement called a 'shared care agreement' but your GP may not be able to enter into this agreement for reasons of patient safety and resources. It is not safe for GPs to try to keep up with so many providers, each with their own contact details and processes when prescribing such safety critical medications.

There are risks associated with selecting an RtC provider. If the business stops trading for any reason, or if they have their NHS contract removed, then their care and any prescriptions would more than likely cease, which is another reason your GP may not feel it is safe or good practice to enter into an agreement to prescribe for them.

When you are choosing your RtC provider you may find it useful to use this information to support your decision making, and also to share with your chosen provider so that they are aware that their duty in prescribing, in particular, is unlikely to be taken over by your GP.

APPENDIX 2

TEMPLATE REFERRAL LETTER TO THE RtC PROVIDER

Dear Provider

This is a referral for the below named patient under their right to choose (RtC) their NHS provider.

The patient details and reasons for the referral are set out below. Due to the large range of providers and their different referral mechanisms this practice is unable to complete any specific referral process or forms that you may usually use and, instead, presents the information below as a contractually valid referral. If you are unable to accept the information in this format, please advise the patient who can reconsider their choice of RtC provider.

Please find enclosed the patient questionnaire that they have completed to inform this referral, and the patient information leaflet used to counsel them when choosing a provider. Please note that for reasons of patient safety a shared care prescribing request from you may not be accepted by the practice if it does not comply with the Sheffield Shared Care Protocol (SCP). In these circumstances, the prescribing of any SCP designated drugs will remain your responsibility.

PATIENT CHOSEN RtC PROVIDER:

Email of RtC provider to send the referral to:

[Patient Details]

[Practice Details]

South Yorkshire ICB (Sheffield Place)

Yours sincerely,

[Name of the referring clinician]

APPENDIX 3

PATIENT ADHD/ASD REFERRAL QUESTIONNAIRE:

What are the symptoms, problems or experiences that lead you to suspect that you may have ADHD?

How do these symptoms impact on your life (eg education/work/home)?

Do you have a family history of ADHD? (and if yes who has this diagnosis?)

(IF referral for ADHD)

ADHD self assessment score:

<https://adhduk.co.uk/adult-adhd-screening-survey/>

Part A score:

Part B score:

Patient Declaration:

By submitting this form I confirm I have read the guidance associated with this referral document and I consent to the referral to the RtC provider named above. I am happy for my GP to email this along with a summary of my medical records to the RtC provider.

Patient name and signature:

Date: