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Deputy Denis Naughten,
Dail Eireann,
Kildare Street,
Dublin 2.

29th September 2022

PQ Number: 44569/22

PQ Question: To ask the Minister for Health the mechanism available to an adult to secure an ADHD diagnosis; the current waiting times for access to such a diagnosis; and if he will make a statement on the matter. -Denis Naughten

Dear Deputy Naughten,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

ADHD in Adults NCP

The ADHD in Adults National Clinical Programme's Model of Care was launched on the 14th January, 2021. When fully implemented, 11 Adult ADHD Clinics will be established to provide assessment and multi-modal treatment in the CHOs in line with the Model of Care. Up until 2022 the Programme was funded for 3 of the 12 Adult ADHD NCP sites (2.5 teams). The 2022 Estimates process provided funding for a further 3.5 Adult ADHD teams. A further 5 teams are required to have full national coverage including a team for the prison population in Dublin. Each team consists of a Consultant Psychiatrist, Senior Psychologist, Senior Occupational Therapist, CNSMH and an Administrator.

ADHD in Adults NCP		Adult ADHD Teams – in CHO Teams	Funding required for full implementation
2019 PFG funding	€1,300,000	2.5	
2022 PFG funding	€1,800,000	3.5	
CHO Teams yet to be funded	€2,543,450	5.0	€2,543,450
MDT maternity cover	€500,000		€500,000
Training costs for new teams	€100,000		€100,000
Accommodation refurbishment	€600,000		€600,000
Total funding required:			€3,743,450

¹Cost is based on latest available payscales and estimated maternity cover for multidisciplinary teams

²An additional team will also be required for the Dublin prison services – cost €508,690k.

Through the HSE's 2022 estimates process a further 3.5 new teams have been funded for development. Information will be updated as soon as staff have been recruited and services have been set up and available to see patients. This will bring the number of specialist Adult ADHD teams up to 50% national coverage.

Additional funding will be required for full national coverage for specific Adult ADHD teams.

In the mean-time patients can speak to their GPs about their symptoms and if the GP thinks it is appropriate they can make a referral to the patient's local Adult Mental Health Team (AMHT), this is based on the patient's home address. The AMHT will carry out an initial screening and if the patient screens positive for possible ADHD they will be referred on to the Adult ADHD service as appropriate. The referral going through the Adult Mental Health Team is an important part of the process as there is a higher association of co-morbidities with other mental health problems such as depression and anxiety with adults who have ADHD.

This does mean that in the meantime it can be difficult to get advice or help. It is suggested that nevertheless, people do ask their GPs to refer them to their local community adult mental health service. The services have been advised to refer to NICE guidelines 2018, 2019 on the assessment and management of children, adolescents and adults with ADHD for guidance.

The provision of funding for teams, specific training needs, dedicated programme management time, bespoke data systems and for and appropriate accommodation to develop services nationally is essential to meet the needs of patients and their families. HSE Community Services are currently developing a data system for community services but it not known when this will be available to services.

I trust this information is of assistance to you. Please do not hesitate to contact me if you have any further queries.

Yours sincerely,



Dr Amir Niazi
National Clinical Advisor & Group Lead for Mental Health
Clinical Design and Innovation
Health Service Executive