
INTEGRATED CARE FOR THE TREATMENT OF ADHD

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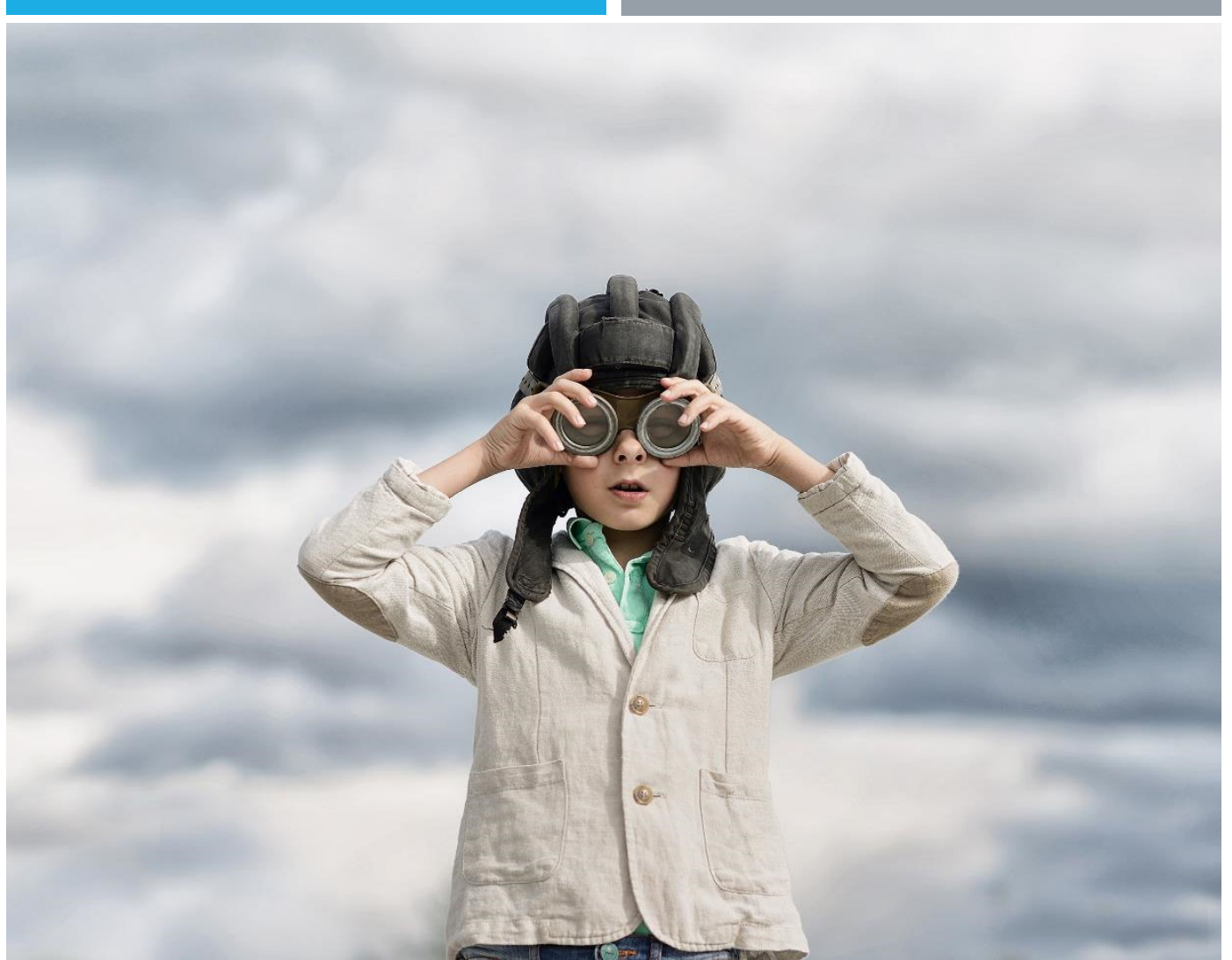
ADHD IN AUSTRALIA

- ADHD affects 5-8% of children, but it can be difficult to access diagnosis and treatment
- Early diagnosis and management is important for:
 - Academic progress
 - Behavior in school
 - Social development
 - Self esteem
 - Risk reduction (e.g., substance misuse, risk taking behavior)
 - Development of healthy habits (e.g., routines, coping skills)
 - Management of mental health co morbidities'
 - Life skills (e.g., time management)
 - Reducing family stress and empowering parents
 - Early intervention is more cost effective in the long run (less need for more significant interventions later)

THE STUDY

A 5-YEAR PILOT STUDY OF INTEGRATED CARE FOR TREATMENT OF ADHD

- Piloting a new model of care which involves specially trained GPs (study GPs) treating people with ADHD in general practice.
- This study is aiming to improve the access of children to a General Practitioner who can assess, diagnose and manage ADHD in children aged 4-17 years.
- If this study is successful, it is possible that this model may be adopted more widely.



THE STUDY IN ACTION

- Run at the Lifespan community ADHD clinic in Cranebrook and Hazelbrook General Practice
- This clinic is being run under the supervision of Dr Alison Poulton and is part of a 5-year pilot study with Nepean Blue Mountains LHD
- GP investigators receive training in the diagnosis and management of ADHD at the clinic and online
- The study gives the GP ODP status (but turn-around for scripts up to 10 working days)
- GPs can recruit their own patients who they have diagnosed with ADHD and who they will treat in their own practices.
- As more GPs are trained, the capacity to treat people with ADHD will increase.
- All patients are registered as part of the study and data collected over the 5 years
- Study outcomes:
 - number of patients treated in primary care
 - Safety
 - Quality of care- adherence to the study protocols
 - Patient/parent satisfaction survey

JOURNEY TO THE LIFESPAN ADHD CLINIC

- 8 years as a GP at Hazelbrook general practice
- Interest in behavioral pediatrics
- Roadblock in referrals for behavioral pediatrics
- Decision to work in a Pediatric ADHD clinic



PEDIATRIC ADHD CLINIC EXPERIENCE

- CMO within the clinic for 12 weeks
- Working with Dr Poulton, Dr Dyson (GP with over 30 years experience in ADHD) and a pediatric registrar
- Mix of new and review patients
- Referred some Hazelbrook patients so I was able to follow up them up
- Lecture series and afternoon teaching and case reviews
- Developed health pathways for ADHD



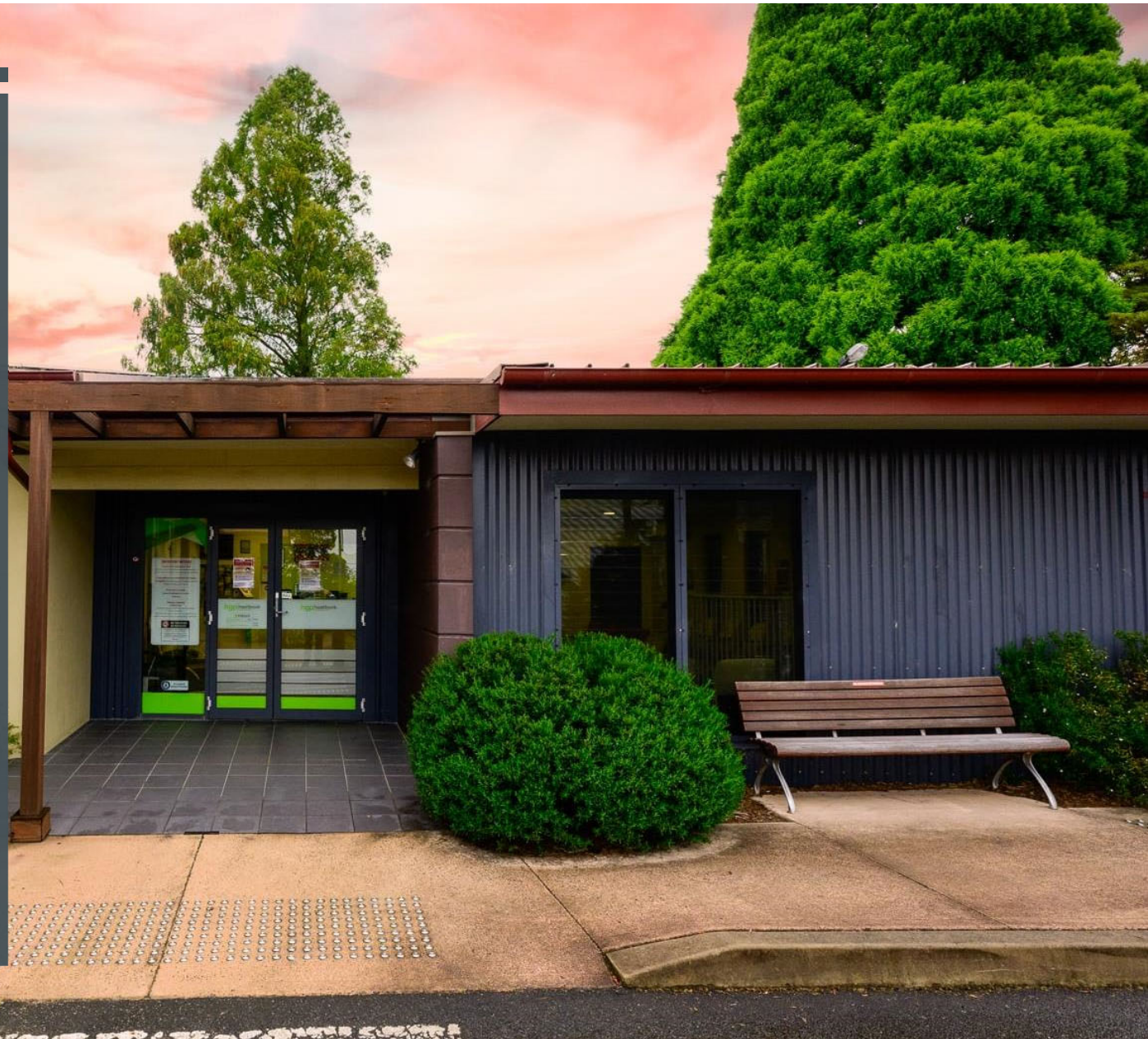
MOVING TO INDEPENDENT ADHD MANAGEMENT

- During training I was seeing patients back at Hazelbrook to follow them up
- I was able to follow the patients up more frequently and in between if they had concerns
- The patients/parents were happy to be treated by a doctor who knew their family and child's history
- Completed the training course
- Approved for ODP status



ADHD CLINIC IN ACTION

- Official clinic begins in September
- Referrals will initially be from our own practice and local GPs – this is open to expansion within our catchment
- Two designated administration staff who manage bookings, including sending initial forms for completion prior to first appointment or follow up appointments if required
- Administration staff will contact patients and reschedule appointments if forms not returned prior to first appointment
- Initial appointment is 1 hour and follow up appointments 30 minutes
- Privately billed with Cost: \$350/250 (initial) and \$200/\$150 (follow up)



THE ANTICIPATED MODEL DEVELOPMENT

- GPs are ideally placed to identify, diagnose and manage uncomplicated ADHD, referring when there are concerns or more complex issues
- There are many GPs that have a special interest with special training in specific areas (e.g., mental health, women's health etc). It is common for these GPs to hold patients for longer than GPs who may not have additional training. This would be no different to with ADHD.
- More GPs undergoing ADHD training at Hazelbrook General practice in the future
- Dissemination and sharing of knowledge
- Localized and personalized care within the community



BENEFITS TO THE COMMUNITY

- Quicker access to care
- More flexibility with appointments
- Reduced waiting times with more GPs on board
- Lowering the burden on pediatricians and hospital clinics



FUTURE OF ADHD CARE IN COMMUNITY GP SYSTEM

- Telehealth consultations
- PHN funding (administration costs and families unable to afford the private fees)
- Community awareness programs
- Healthpathways further development
- Extending the age range to include adults



CHALLENGES & MITIGATION

- Ensuring GPs have access to training
- Pathways to pediatrician, psychiatry and allied health referrals for trained GPs
- Cost of services to patients
- Cost of administration to the GP clinic
- GP clinic management of ADHD appointments, staff training





QUESTIONS