

QS 39

NICE quality standard for attention deficit
hyperactivity disorder (QS39)

THE | COMMISSIONING
review

NICE National Institute for
Health and Care Excellence

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Introduction

In July 2013, NICE published a quality standard for the diagnosis and management of attention deficit hyperactivity disorder (ADHD) in children aged 3 years and older, young people and adults.

ADHD is the most common behavioural disorder in the UK, and is estimated to affect 2-5% of school-aged children and young people. By the age of 25, an estimated 15% of people diagnosed with childhood ADHD still have a full range of symptoms, and 65% still have some symptoms that affect their daily lives.

ADHD is a behavioural condition characterised by hyperactivity, impulsiveness and inattentiveness. Common symptoms of ADHD include:

- a short attention span,
- restlessness or constant fidgeting
- being easily distracted.

Quality statements

Symptoms of ADHD can overlap with symptoms of other related disorders. Common coexisting conditions in children with ADHD include anxiety disorders and disorders of mood, conduct, learning, motor control and social communication; in adults they include personality disorders, bipolar disorder, obsessive–compulsive disorder and substance misuse.

NICE quality standards describe high-priority areas for quality improvement in a defined care or service area. Each standard consists of a prioritised set of specific, concise and measurable statements. They draw on existing guidance, which provides an underpinning, comprehensive set of recommendations, and are designed to support the measurement of improvement. The quality standard, in conjunction with the guidance on which it is based, should contribute to the improvements outlined in the following frameworks:

- NHS Outcomes Framework 2013–14²
- Improving outcomes and supporting transparency: Part 1: a public health outcomes framework for England, 2013–2016³
- The Adult Social Care Outcomes Framework, 2013–14⁴

The tables following shows the outcomes, overarching indicators and improvement areas from the frameworks that the quality standard could contribute to achieving.

QUALITY STANDARD

The Adult Social Care Outcomes Framework 2013–14	
Domain	Overarching and outcome measures
Enhancing quality of life for people with care and support needs	<p>Overarching measure Social care related quality of life*</p> <p>Outcome measures People manage their own support as much as they wish, so that they are in control of what, how and when support is delivered to match their needs. Proportion of people who use services who have control over their daily life. People are able to find employment when they want, maintain a family and social life and contribute to community life, and avoid loneliness or isolation. Proportion of adults in contact with secondary mental health services living independently, with or without support.**</p>
Ensuring that people have a positive experience of care and support	<p>Overarching measure People who use social care and their carers are satisfied with their experience of care and support services. Overall satisfaction of people who use services with their care and support.</p> <p>Outcome measures People know what choices are available to them locally, what they are entitled to, and who to contact when they need help. The proportion of people who use services and carers who find it easy to find information about support</p>
<p>Aligning across the health and care system * Indicator complementary ** Indicator shared</p>	

NHS Outcomes Framework 2013-14	
Domain	Overarching and outcome measures
Enhancing quality of life for people with care and support needs	<p>Overarching measure Social care related quality of life*</p> <p>Outcome measures People manage their own support as much as they wish, so that they are in control of what, how and when support is delivered to match their needs. Proportion of people who use services who have control over their daily life. People are able to find employment when they want, maintain a family and social life and contribute to community life, and avoid loneliness or isolation. Proportion of adults in contact with secondary mental health services living independently, with or without support.**</p>
Ensuring that people have a positive experience of care and support	<p>Overarching measure People who use social care and their carers are satisfied with their experience of care and support services. Overall satisfaction of people who use services with their care and support.</p> <p>Outcome measures People know what choices are available to them locally, what they are entitled to, and who to contact when they need help. The proportion of people who use services and carers who find it easy to find information about support.</p>
<p>Aligning across the health and care system</p> <p>* Indicator complementary</p> <p>** Indicator shared</p>	

QUALITY STANDARD



List of quality statements

Statement 1. Children and young people with symptoms of attention deficit hyperactivity disorder (ADHD) are referred to an ADHD specialist for assessment.

Statement 2. Adults who present with symptoms of attention deficit hyperactivity disorder (ADHD), who do not have a childhood diagnosis

of ADHD, are referred to an ADHD specialist for assessment.

Statement 3. Adults who were diagnosed with and treated for attention deficit hyperactivity disorder (ADHD) as children or young people and present with symptoms of continuing ADHD are referred to general adult psychiatric services.

Statement 4. Parents or carers of

children with symptoms of attention deficit hyperactivity disorder (ADHD) who meet the NICE eligibility criteria are offered a referral to a parent training programme.

Statement 5. Children and young people with moderate attention deficit hyperactivity disorder (ADHD) are offered a referral to a psychological group treatment programme.

Statement 6. People with attention deficit hyperactivity disorder (ADHD) who are starting drug treatment have their initial drug dose adjusted and response assessed by an ADHD specialist.

Statement 7. People with attention deficit hyperactivity disorder (ADHD) who are taking drug treatment have a specialist review at least annually to assess their need for continued treatment.

To implement the quality standard, please refer to the full standard on the NICE website at: <http://www.nice.org.uk/qs39>

The NICE quality standard for the diagnosis and management of attention deficit hyperactivity disorder (ADHD)



in children aged 3 years and older, young people and adults is based on the following NICE guidance:

- National Institute for Health and Clinical Excellence (2013) Antisocial behaviour and conduct disorders in children and young people: recognition, intervention and management. NICE clinical guideline 158. <http://guidance.nice.org.uk/cg158>
- National Institute for Health and Clinical Excellence (2009) Attention deficit hyperactivity disorder: diagnosis and management of ADHD in children, young people and adults. NICE clinical guideline 72. <http://guidance.nice.org.uk/CG72>
- National Institute for Health and Clinical Excellence (2006) Attention deficit hyperactivity disorder (ADHD) - methylphenidate, atomoxetine and dexamfetamine (review). NICE technology appraisal guidance 98. <http://guidance.nice.org.uk/ta98>

References

1. NHS Choices - www.nhs.uk/Conditions/Attention-deficit-hyperactivity-disorder/Pages/Introduction.aspx
2. NHS Outcomes Framework 2013–14 - www.gov.uk/government/publications/nhs-outcomes-framework-2013-to-2014
3. Improving outcomes and supporting transparency: Part 1: a public health outcomes framework for England, 2013-2016 - www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_132358
4. The Adult Social Care Outcomes Framework, 2013–14 - www.dh.gov.uk/health/2012/11/ascof1314/