

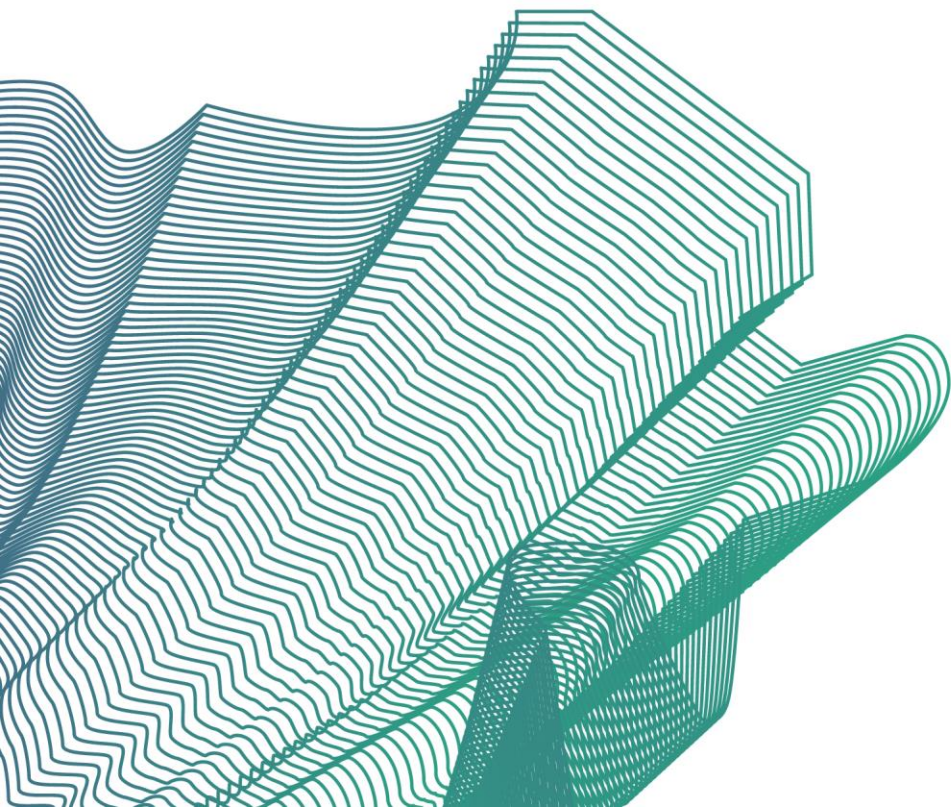
ROTHERHAM

ROTHERHAM PLACE PARTNERSHIP | HEALTH AND SOCIAL CARE

Spotlight Presentation

Neurodevelopmental Model

Wednesday 16 November 2022



South Yorkshire
Integrated Care Board

**Rotherham, Doncaster
and South Humber**
NHS Foundation Trust

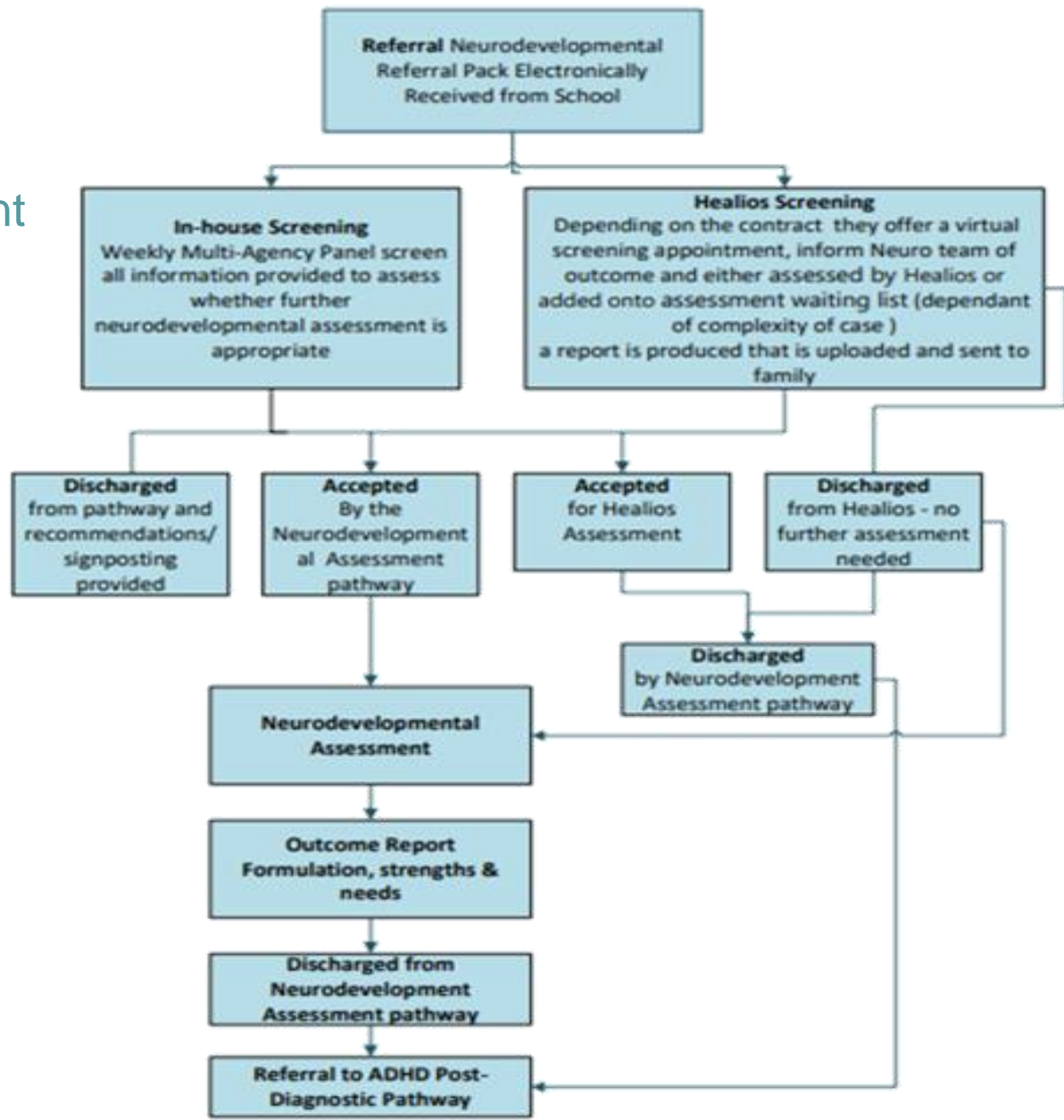
The Rotherham
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Rotherham Neurodevelopment Pathway



What's working well

- Electronic Education Referral Process
- Multi Agency screening panel and multi-disciplinary team
- A comprehensive assessment based on NICE guidance
- Increased Capacity
- Positive Service Evaluations

Challenges and Risks

- The volume of referrals to both Diagnostic and Post-Diagnostic ADHD Pathway.
- Growing waiting lists & waiting times
- The volume, quality & appropriateness of referrals received into the service.
- Referral to screening time.
- Lack of capacity within the Post-Diagnostic ADHD Service

What needs to happen and by when

1. The data shows a significant increase in referrals month on month despite the partnership working and changes to referral processes.
 - Review the referral packs and process
 - Request evidence of two school terms of suitable intervention prior to referral into the neurodiversity pathway.
 - Pilot a pre-screening model which will immediately identify the obvious referrals which would not require a multi-agency review. This should reduce the time from referral to screening for some children
2. A substantial amount of clinical time is lost due to inappropriate (33%) and inadequate (27%) referrals.
 - Continue to increase knowledge where possible of the education workforce promoting a greater understanding of neurodivergent children's needs, developmental trauma and attachment and the complexity of children's presentations that include the child's history, culture, trauma, family dynamics and the need for psychological formulation.
 - Availability of other interventions such as 123 Magic for children with possible ADHD before assessment to access medication.
3. Review the contract with Healios.
4. Review the way we present data
5. Increase funding into the Post-Diagnostic Service