South Eastern Sydney Local Health District

SESLHD Primary Care Transition ADHD Service

Fact Sheet: Collaborative ADHD Management for Children & Young People in South Eastern Sydney Local Health District - Information for GPs

South Eastern Sydney Local Health District (SESLHD) is transitioning to a new management model for children and young people with ADHD.

The model has been developed in partnership with CESPHN and is supported by recent NSW legislative changes enabling a greater role for GPs in ADHD treatment and management. The focus of the model is on strengthening collaboration between paediatricians, psychiatrists and GPs to improve access to ADHD services for families.



The SESLHD Primary Care Transition ADHD Service supports the safe transition of children and young people with ADHD who are stable on medication from specialist care by a paediatrician or psychiatrist to GP-led management through one of two pathways.

1. **Shared care pathway**: The GP and Paediatrician/Psychiatrist share responsibility for ongoing care; or
2. **Transfer of care pathway**: where ongoing treatment and management is assumed by the GP.

Both pathways are supported by clear escalation processes, enabling access to Paediatrician/Psychiatrist consultation, clinical review and re-referral when required.

What will this mean for children and young people?

- Paediatricians and psychiatrists will continue to complete the ADHD assessment diagnosis and initial treatment stabilisation.
- Once a child's ADHD management is stabilised, the ADHD Transition Service Clinical Nurse Consultant (CNC) will contact the child's regular GP to discuss the agreed care pathway, including support for SafeScript NSW authority applications and continuation prescribing where required.
- The Paediatrician/Psychiatrist will provide a comprehensive ADHD management plan, including guidance about medication prescription and titration, and information regarding escalation and re-referral.

GP responsibilities

- Complete a NSW Health endorsed ADHD training program to be eligible for continuation prescribing: https://www.health.nsw.gov.au/pharmaceutical/doctors/Pages/adhd-management-prescribes.aspx, then
- Apply via SafeScript NSW for a general authority to prescribe psychostimulant medications: https://www.health.nsw.gov.au/safescript OR, if not a Continuation Prescriber – Apply via SafeScript NSW for approval to prescribe for the individual child.
- Provide regular ADHD reviews and prescriptions for ADHD medication as per identified management pathway.
- Escalate any non-urgent clinical concerns to the ADHD Transition Service CNC or utilise specialist advice services

  SUSTAIN Virtual Paediatrician Support Service https://schneducation.com.au/sustain

  GP Psychiatry Support Line https://www.gpsupport.org.au/

How the pathways work

1. Paediatrician/Psychiatrist identifies child/young person as suitable for transition, confirms pathway for Shared Care or Transfer of Care, and obtains consent from family.
2. Paediatrician/Psychiatrist completed comprehensive handover documentation.

3. Paediatrician/Psychiatrist refers child/young person to ADHD Transition Service CNC.
4. ADHD Transition CNC contacts GP and supports pathway enrolment.
5. GP is identified as a Continuation Prescriber or completes training and prescribing requirements.
6. Ongoing care is initiated via Shared Care Pathway or Transfer of Care Pathway.

Shared Care Pathway

- The GP and Paediatrician/Psychiatrist share responsibility and management for ADHD care.
- The GP undertakes routine prescribing, monitoring and follow-up, while the Paediatrician/Psychiatrist remains the primary consultant and is available for review, advice and escalation when needed.

Transfer of Care Pathway

- Responsibility for ADHD care is transferred to an authorised GP continuation prescriber.
- The Paediatrician/Psychiatrist episode of care concludes, with future involvement occurring through consultation or re-referral if needed.



Training and Resources

SESLHD is developing education sessions to strengthen GP confidence and capability in ADHD management. GPs can register for scheduled events through My Education on the CESPHN website at https://cesphn.org.au/general-practice/education-and-events

Practice-based education sessions are also available. GPs interested in arranging a session can contact the ADHD Transition Service CNC.

Training:

- NSW Health ADHD Co-Management Care for General Practitioners https://short-courses.sydney.edu.au/course/ADHD
- NSW Health-Continuation Prescribing https://www.health.nsw.gov.au/pharmaceutical/doctors/Pages/adhd-management-prescribes.aspx
- NSW Health-SafeScript NSW Education and Training https://www.health.nsw.gov.au/pharmaceutical/safescript/practitioners/Pages/education-training.aspx

Guidelines:

- Australasian ADHD Professional Association (AADPA) Australian Evidence Based ADHD Clinical Practice Guideline (2022) https://aadpa.com.au/product/australian-adhd-guideline/
- AADPA ADHD Prescribing Guide for Australian ADHD Professionals (2025) https://aadpa.com.au/adhd-prescribing-guide/

Working together in ADHD care

This initiative strengthens collaboration between Paediatrician/Psychiatrists and GPs to support children and young people with ADHD. Working together will improve access to assessment, treatment and ongoing support across SESLHD.

If you have any questions or if there is anything we can do to assist you during this transition, please do not hesitate to contact the ADHD Transition Service CNC

Email: SESLHD-ADHDTransitionService@health.nsw.gov.au

Phone: (02) 9526 3900



Thank you for your ongoing support and collaboration.