This project focuses on what happens to young people with Attention Deficit Hyperactivity Disorder (ADHD) when they are too old to stay with children's services. We know little about how many areas have specialist services for adults with ADHD and how many young people need to move to them when they are too old for children's services. Until the late twentieth century, ADHD was a controversial diagnosis. Once generally accepted, it is seen as a developmental disorder of children, and so mental health services for adults are not set up to manage young adults who have ADHD and continue to want support to cope with their lives. There are National Institute for Health and Care Excellence (NICE) guidelines about the management for ADHD in adulthood, and this often involves taking medication that General Practitioners feel inexperienced to prescribe without support from specialists, as happens with children. Existing work suggests that young people with developmental disorders like ADHD are particularly likely not to transfer to adult mental health services but there has yet to be an in depth study of this issue in the UK. This will be the first national study to examine how many young people are in need of services for ADHD as adults. We will also explore how current service users and service providers experience this transition. This project consists of 3 streams: 1) a 13 month surveillance study of young people with ADHD; 2) a qualitative study to explore the views and experiences of service users; 3) a mapping study that will combine information about the location of services from the surveillance and interviews with email/postal surveys of service commissioners, providers and key service user groups.

**Duration:** Surveillance will be undertaken for 13 months, commencing from November 2015 to November 2016 with a 9 month follow-up.

**Case definition:** Please report any young person with ADHD taking medication for ADHD seen by you for the first time in the 6 months preceding the young person reaching your service's age boundary. Please report any case even if you believe the case may have been reported from elsewhere.

This includes any:

- Young person with a clinical diagnosis of ADHD **who is reviewed for the first time** when within 6 months of reaching the services' age boundary, whatever this may be. Young people should only be reported **once** and those that have already been seen and reported in this time-scale should **not** be reported a second time.
- The young person is considered to require continued drug treatment for their symptoms of ADHD after crossing the service age boundary.
- The young person should not have been reported previously to the BPSU in relation to the current study.
- Young people with ADHD and comorbid diagnoses, including learning / developmental disabilities, should be reported **only** if it is their ADHD for which on-going drug treatment in adult services is required.

**Exclusion criteria:**

- Young people with a past / current history of ADHD but who do not require medication for their ADHD.
- Young people with past / current ADHD who are not currently taking medication for their ADHD.
- Young people with past / current ADHD who require transition to adult mental health services in relation to comorbid difficulties but not require or take current drug treatment for their ADHD.
- Young people who have been reported previously to the BPSU in relation to the current study.
- Young people who transition from paediatric services to CAMHS.

**Website:** [www.rcpch.ac.uk/bpsu/ADHD](http://www.rcpch.ac.uk/bpsu/ADHD)

**Funding:** National Institute for Health Research

**Ethical approval:** This study has been approved by NRES South Yorkshire Research Ethics Committee – Yorkshire & The Humber (REC reference: 15/YH/0426) and has been granted Section 251 HRA-CAG permission (CAG Reference: 15/CAG/0184).

**Further information:** If you would like any advice regarding the eligibility of a particular case for inclusion in the study please contact:

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