

Oifig an Chomhairleora Chliniciúil Náisiúnta agus Ceannaire Grúpa do Mheabhairshláinte

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Deputy Mark Ward, Dail Eireann, Leinster House, Kildare Street, Dublin 2.

> Date issued: 14.12.2023 Todays Date: 07.03.2024

PQ Number: 51606/23

PQ Question: To ask the Minister for Health his views on the funding for the national clinical programme for ADHD in adults in each of the years from 2019 to date; his views on the rollout of the national clinical programme; how this operates in the new regional health areas; and if he will make a statement on the matter. -Mark Ward

Dear Deputy Ward,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position.

The Adult ADHD National Clinical Programme (NCP) recommends that 11 catchment area teams are established at secondary/tertiary care level together with 1 team to work alongside the National Forensic Psychiatry Teams working in the Dublin prisons. To date 7 of the 11 Teams have been funded and the details of this funding shown in the table below.

Year	Funding	Total WTE
2017	0.97m	10.5
2021	0.25m	2
2022	1.8m	17.5

Funding for the remaining teams was sought in Budget 2023 and 2024 but not granted. On the basis of the documented demand with growing waiting lists in the current operational services, additional posts (2 per site) were also requested in the Budget 2024 submission to the Department of Health. These were not granted either.

The NCP recommends that the service response is one of stepped care. This means:

 ADHD Ireland which works in partnership with the NCP must receive proportionate multi- annual funding to support it deliver this role as the first step in a stepped care model of care. 2. Neurodiversity Hubs at Primary/Disability Care level are essential as the first statutory (HSE) response to adults with ADHD.

As of yet it is not clear how the current services will operate in the new regional health areas. However, it is vital that this Programme remains under the National Mental Health Clinical Programme Office and that any funding allocated for new services is held by that office and send to the region only when staff are recruited. Finally that the implementation of each service continues to be overseen and supported by that Office via this Clinical Lead until all components of the Programme, including the stepped care model, are in place and have been thoroughly evaluated.

I trust this information is of assistance to you. Please do not hesitate to contact me if you have any further queries.

Yours sincerely,

Dr Amir Niazi

National Clinical Advisor & Group Lead for Mental Health Clinical Design and Innovation

Health Service Executive