

CASE STUDY

Adoption of ADHD programme across the NHS helps tackle waiting list challenge

ADHD – the challenge

Attention Deficit Hyperactivity Disorder (ADHD) is a disorder of brain development that affects around one in 20 school-aged children worldwide. If undiagnosed or untreated it can significantly impact personal development, academic outcomes, and family interaction.

Timely detection and treatment are likely to moderate risks and improve outcomes but within the NHS there was no simple test to determine whether a child had ADHD.

Despite evidence-based national guidelines, the process for diagnosis can include multiple steps based on clinical judgement informed by subjective reports from parents, teachers, and observation of the patient – as a result, across the NHS in England many children seeking diagnosis and treatment for ADHD face long waiting times, and patchy or unavailable services.

What we did

Based on a successful pilot within three mental health trusts in the East Midlands, in 2020 England's 15 local Health Innovation Networks were commissioned by the NHS to lead the coordinated, rapid national roll-out of the Focus ADHD programme.

This programme was based on implementing the QbTest technology within mental health trusts and paediatric services.

QbTest is an objective assessment tool – developed by Qbtech – that supplements clinical assessment processes and measures all three core components of ADHD (attention, impulsivity, and activity).

The national programme rolled out from April 2020 and despite the impact of the Covid-19 pandemic it exceeded all national targets, benefiting 71,102 young people (by March 2024) and saving an estimate £38.5M for the NHS by releasing healthcare capacity and reducing the number of appointments.

Impacts of the Health Innovation Network Focus ADHD programme (April 2020 to March 2024):

- More than 71,000 young people have benefited
- 95,097 hours of healthcare capacity has been released
- 41,582 clinical appointments have been saved
- 75% all of NHS trusts that provide ADHD services have adopted the innovation (79 trusts)
- £38.5M estimated NHS savings have been achieved
- 375,546 miles of travel has been avoided by reducing appointments and observations, helping reduce Co2 emissions.

Outcomes

Capitalising on the HINs' twin abilities to operate locally whilst working in a coordinated way to drive rapid innovation implementation, this trailblazing programme (launched at the start of the Covid-19 pandemic) went from a standing start to national adoption within less than three years. The programme won four national awards and by March 2024 had supported 71,102 young people and was being delivered in 79 NHS trusts across England.

The intervention has enabled a big reduction in time from assessment to diagnosis by an average of 153 days, increasing staff capacity by reducing the number of appointments needed for diagnosis (an estimated 95,097 hours of clinical time released 2020 to 2024) with estimated NHS savings of £38.5M, enabling redirection of resources to other parts of the ADHD pathway.

In March 2023 the National Institute for Clinical Excellence (NICE) published a [Medical Innovation Briefing](#) (MIB) – highlighting the benefits of objective testing technology when used as part of a comprehensive ADHD assessment – and in September 2023 NICE recommended Qbtest to support ADHD diagnosis for children and young people.

The success of the HIN programme has also helped provide a launchpad for [Qbtech](#), the innovator that developed the QbTest – the company has expanded internationally and in October 2024 registered 1M tests worldwide.

Whilst the formal HIN programme completed in March 2023, the ability of the HINs to not just drive adoption – but drive it in ways that it stays embedded when we step back – is enabling ongoing implementation of the QbTest. For example, between 2023 to 2024 during the 12 months following the formal end of the national HIN programme, the innovation spread to a further 10 NHS trusts and an additional 15,000 children and young people benefited.

Critical learning from this programme is relevant to any NHS transformation programme, and a blueprint document captures this knowledge: [Innovation, Implementation, Readiness and Resourcing](#)

Critical success factors

- The HINs' **national network and local knowledge and connections**, provided the means to rapidly roll out this programme in a consistent and coordinated way.
- **A suite of specific adoption tools** ensured consistent rollout across multiple organisations.
- **Building will** with clinical teams ensured the programme got off to a positive start and developed momentum.
- The **patient voice** was at the heart of the programme, along with **understanding of health inequalities** so protected groups were not unintentionally disadvantaged.
- Approaches to **embed and sustain** adoption once the HINs stepped back, is ensuring ongoing positive impacts.

Contact us

For more about this programme contact healthinnovation-em@nottingham.ac.uk

"It would not have been possible to grow and expand so rapidly throughout every NHS region in England, without the support of Health Innovation East Midlands and the other local HINs.

"They broker connections into health systems that would have taken us years to develop alone. They understand the conditions critical to successful innovation adoption, and we have drawn on their expertise throughout our ongoing journey. For any company seeking markets within the NHS, the knowledge, support, and insight of the HINs is invaluable."

Tony Doyle, Commercial Director, Qbtech (developer of the QbTest)