



This file contains the *Qualitative Study – Topic Guide for Child Clinicians* from the NIHR CATCh-uS ADHD Transition Research Project (2015 – 2019).

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Topic guide 4: Professionals from children's services

1. Transition from children's services to adult services

- I. What is the age boundary of your service?
- II. What are your views and experiences of the transition of young people with ADHD.
- III. What are your thoughts about the
 - NICE guidelines,
 - use of CPA,
 - any transition protocol or policy

In case the professional needs probing, please use appendix 1 for this question.

2. Pre-transition drop-out

- Of those YP that drop-out (stop treatment or medication against your advice), do you know why they stop/drop-out?
- Do you feel you have been able to help the young person to make a sensible decision about "what to do after this service/care stops"?
 If so, how? What do you tell them?

3. The transition process

MAIN QUESTION:

- a) Who do you refer to? What services do you refer young people to within AMHS (is this a general policy within your service)? E.g. Generic adult CMHT, Generic adult CMHT with specialist ADHD service, Specialist Adult ADHD service, Other
- b) Transition planning and user/carer involvement
 - Who is usually involved in the transition process? Probing questions: Is there
 any involvement from non-health services, e.g. education, social services,
 GP? To what extent are the young person and their family involved in
 transition planning and transition meetings?
 - Who would you want to be involved?

4. Difficult transitions

- a) Have you encountered cases where transition has been particularly difficult?
 - If yes, what have been the issues?

- What steps were taken to resolve the difficulties?
- b) In your experience, does transition vary by diagnosis? If yes,
 - Are there conditions that have positive transition process; and are there aspects that could be translated to the transition process for YP with ADHD?
 - Does it make a difference if there are comorbidities involved?
- c) Where the decision is made not to transfer into adult services,
 - a. What are the most common reasons for this?
 - b. Do you discuss what other options are, or what to do when they want to re-enter services?

5. Optimal transition

How do they think the quality of transition / rate of good transfers of your patients with ADHD could be improved – in an ideal world and in the real world?