

**Corporate Services and  
Governance**

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**SENT BY EMAIL TO**

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**22 June 2026**

Dear Mr Shelford

**REQUEST FOR INFORMATION - FREEDOM OF INFORMATION (SCOTLAND) ACT 2002**

Thank you for your request received on 6 May 2026 for the provision of the following information:

I apologise that this response has been provided to you outside the statutory timescale of 20 working days as set out in FOISA. We aim to respond to all requests promptly and within timescales but unfortunately this is not always possible. I am sorry for the delay and any inconvenience this has caused. Your patience has been appreciated.

**Request:**

*I am writing to make a request under the Freedom of Information (Scotland) Act 2002 for the following information regarding ADHD assessments within NHS Greater Glasgow and Clyde.*

**Adult ADHD Assessments**

- 1. How many adults do you have waiting for an ADHD diagnosis at the moment?*
- 2. How many adults were given an ADHD Assessment in the last year (1st April 2025 - 31st March 2026).*
- 3. If an adult was referred to you now when would you expect them to be seen?*
- 4. Please describe your current Adult ADHD Assessment pathway.*

**Child ADHD Assessments**

- 5. How many children do you have waiting for an ADHD diagnosis at the moment?*
- 6. How many children were given an ADHD Assessment in the last year (1st April 2025 - 31st March 2026).*

7. *If a child was referred to you now when would you expect them to be seen?*
8. *Please describe your current Child ADHD Assessment pathway.*

**We are treating your request under our procedures for responding to requests for information under the Freedom of Information (Scotland) Act 2002.**

**Response:**

We should explain that our Adults' Mental Health services and Specialist Children's Services record their data independently, and so their responses are provided slightly differently.

***Adult ADHD Assessments***

***1. How many adults do you have waiting for an ADHD diagnosis at the moment?***

Our response is provided in Table 1.

Extract Date: 13-May-2026

<b>HSCP</b>	<b>Number Waiting</b>	<b>Minimum Wait (Weeks)</b>	<b>Maximum Wait (Weeks)</b>	<b>Average Wait (Weeks)</b>	<b>Median Wait (Weeks)</b>	<b>90th Percentile Wait (Weeks)</b>
East Dunbartonshire	592	0	166	63	54	143.6
East Renfrewshire	570	0	213	70	65	136
Glasgow City	4,917	12	266	130	132	200
Inverclyde	226	19	173	102	106.5	166.5
Renfrewshire	2,116	0	253	84	83.5	154
West Dunbartonshire	260	1	204	52	51.5	78
<b>Overall</b>	<b>8,681</b>	<b>0</b>	<b>266</b>	<b>107</b>	<b>106</b>	<b>186</b>

Table 1: Adult ADHD Assessment Services - Current Waiting List

**Notes**

- (1) The above table shows the number of patients currently waiting for assessment with Adult ADHD Assessment Services.
- (2) The maximum waiting time for assessment (in weeks) is also shown.
- (3) Outliers may be skewing the longest wait (90% of patients have been waiting 186 weeks or less).

***2. How many adults were given an ADHD Assessment in the last year (1st April 2025 - 31st March 2026).***

Please see our response in Table 2, shown overleaf.

Extract Date: 13-May-2026

HSCP	Financial Year	2025/26	Overall
Glasgow City	Number of referrals received (Adult CMHTs)	1,892	<b>6,582</b>
	Number of referrals received (ADHD WLI)	514	3,557
	Number of referrals rejected (ADHD WLI)	10	144
	<b>Percentage rejected (ADHD WLI)</b>	<b>1.90%</b>	<b>4.00%</b>
Renfrewshire	Number of referrals received	825	2,614
	Number of referrals rejected	0	3
	<b>Percentage rejected</b>	<b>0.00%</b>	<b>0.10%</b>
East Dunbartonshire	Number of referrals received	427	1,222
East Renfrewshire	Number of referrals received	301	941
Inverclyde	Number of referrals received	47	255
West Dunbartonshire	Number of referrals received	149	401

Table 2: Number of Referrals Received and Rejected

**3. If an adult was referred to you now when would you expect them to be seen?**

This is outlined in wait times quoted above for answer to your Question 1.

**4. Please describe your current Adult ADHD Assessment pathway.**

As at 10.06.2026:

**De novo assessment requests** - As a universal approach, all incoming referrals for possible ADHD are first screened/triaged by the locality Community Mental Health Team (CMHT) and processed from there. Referrals are from a clinical source only (GP) and are reviewed on an individual basis depending on the clinical content. These are received by the locality CMHT at secondary care adult level. If there is adequate clinical information to warrant assessment for possible Adult ADHD, referred individuals are triaged in terms of urgency, acuity and complexity as outlined below in 5 of the 6 HSCPs:

- Meet secondary care adult mental health criteria - Accept to community mental health team.
- Do not meet secondary care adult mental health criteria: - Appointed to an internal CMHT waiting list/clinic list.

**Child ADHD Assessments**

**5. How many children do you have waiting for an ADHD diagnosis at the moment?**

As of 1 May 2026, there were 5,409 of children and young people on the Neurodevelopmental Pathway waiting list with ADHD being either a sole reason for referral or part of a joint reason, typically with ASD, for referral. The numbers are shown overleaf in Table 3

Referral Reason	No. of children and young people
ADHD	2521
ADHD + another neurodevelopmental condition	2888
Total	5409

Table 3: Children and young people referred for ADHD assessment

Please note the following:

- Reason for referral is not mandatory when referring. As such, the numbers within this response may be an underrepresentation of the true number of children referred for either an ADHD or joint assessment.
- Additionally, reason for referral is not fixed, and therefore the reason given for referral may be different from the diagnosis a child or young person receives from the service

**5. How many children were given an ADHD Assessment in the last year (1st April 2025 - 31st March 2026).**

There were 757 children and young people who had a first appointment in the Neurodevelopmental Pathway (NP) in 2025/26 and had a referral reason including ADHD, either as the sole referral reason or part of a joint referral reason.

Please note:

- NHSGGC cannot provide data to the completion of assessments – this number is for children and young people who had their first appointment in the Neurodevelopmental Pathway with a referral reason including ADHD between 1 April 2025 and 31 March 2026.
- Reason for referral is not mandatory when referring. As such, the numbers within this response may be an underrepresentation of the true number of children referred for either an ADHD or joint assessment.
- Additionally, reason for referral is not fixed, therefore the reason given for referral may be different from the diagnosis a child or young person receives from the service

**6. If a child was referred to you now when would you expect them to be seen?**

The median, shortest and longest waits (in weeks) of those who were waiting for their first appointment in April 2026 are shown below in table 4.

Length of waits for those awaiting a first Neurodevelopmental appointment in April 2026	
Median	89 weeks
Shortest	0 weeks
Longest	219 weeks

Table 4: Waits for ND appointments (Children and young people)

Please note:

- The Neurodevelopmental Pathway waiting list is organised by a combination of length of time on the waiting list, clinical need and whether the child had previously been referred to CAMHS prior to the formation of the ND Pathway. It is not ordered on neurological condition.
- These figures relate to everyone who had their first appointment on the Neurodevelopmental Pathway, not just those with a referral reason of ADHD.

**7. Please describe your current Child ADHD Assessment pathway.**

Presently the child and young person ADHD Assessment pathway within the NHSGGC Neurodevelopmental Pathway follows the stages shown here:

- Full neurodevelopmental history using standardised format;
- School neurodevelopmental questionnaire;
- Depending on evidence and individual child or young person it may then not go further regarding specific ADHD as another neurodevelopmental presentation may be more appropriate to progress – ASD, for example;
- If this work is supportive of an ADHD assessment being progressed then these component parts would follow:
- Clinic session to allow interaction and observation of child or young person. This can be ADOS assessment if autism is also being considered at this stage;
- Conners Rating Scale with parent(s), school and or young person depending on age and stage;
- School observation
  - If required further clinic session for play-based assessment;
- Evidence compiled on Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-V) evidence table and taken to multi-disciplinary team (MDT) discussion. The professional makeup of this group can vary on a case-by-case basis.
- The outcome of the MDT will be shared with parent/young person and report completed.

I hope that this is helpful. If you are not satisfied with our response to your request, you have a right to request a review of this decision within 40 working days of receiving this response. Your request for review must be in permanent form and should state:

- That you are asking for a review of this decision and
- Why you are unhappy with the response you have received.

**Director of Corporate Services and Governance  
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Or by email to:

[ggc.foi.dalian@nhs.scot](mailto:ggc.foi.dalian@nhs.scot)

If following a review you remain dissatisfied with the outcome, you have the right to ask for advice, assistance or to make a formal appeal in writing to the Scottish Information Commissioner within six months of receiving the outcome of a review. The Commissioner can be contacted at:

[enquiries@foi.scot](mailto:enquiries@foi.scot)

[www.foi.scot](http://www.foi.scot)

or at: **Kinburn Castle, Doubledykes Road, St Andrews, Fife, KY16 9DS.**

If following appeal to the Scottish Information Commissioner you still remain dissatisfied with the outcome, you have a right of appeal to the Court of Session on a point of law against the decision of the Scottish Information Commissioner.

Should you require any clarification about this letter or the right to request a review please contact me at the details at the top of the first page of this letter.

Yours sincerely

**Freedom of Information Officer**