

## GP Practice Update

### Cheshire & Merseyside Neurodevelopmental Pathway for Children & Young People

#### Key Messages

##### The Current Neurodevelopmental Pathway

The Cheshire and Merseyside Neurodevelopment Pathway for Children and Young People was launched in June 2025 and is in the process of being rolled out across Cheshire and Merseyside. Each Place is now working with partner agencies and key stakeholders to establish a programme of work to drive forward implementation of the new pathway and supporting tools. Wirral Place has progressed furthest this work as an early adopter site, with the other eight Places at varying stages of progress.

Under the new pathway, the aim is that all children and young people with neurodiversity will be supported, through their educational setting and/or key professional, to access an early help offer using the Cheshire and Merseyside *Knowing Me (previously called This is Me)* profiling tool to identify where support is needed. The profiling tool will be completed by the educational setting and/or key professional with the child/young person and their family to develop a shared understanding of the child's needs and strengths across 10 areas. It is currently being rolled out across Cheshire and Merseyside during the 2025/26 school year and will continue into 2026/2027.

Not all neurodivergent children will meet thresholds for an individual neurodevelopmental diagnosis, so the new pathway will focus on meeting needs first without waiting for a diagnostic assessment.

Most children will have their needs reviewed after 12 weeks and then on an ongoing basis. Where the child/young person needs a diagnostic assessment, they can be referred for a neurodevelopmental assessment by their educational setting or key professional. The *Knowing Me* tool, once rolled out, will form part of the referral documentation. Within each Local Authority area, referrals will be triaged to see where and how their needs can be best met. Community support will continue to be offered throughout the pathway, whether children are progressed to diagnostic assessment or not.

All Cheshire and Merseyside NHS providers are now using a standardised stratification/prioritisation tool to ensure that the children and young people on the waiting list who need a diagnosis the most are prioritised for assessments.

In addition, all NHS providers are streamlining their assessment processes to ensure that assessment is proportionate to need and to enable more children to be seen in a timely way.

In 2026/27, to release specialist capacity within NHS secondary care providers, Cheshire and Merseyside ICB will be looking to roll out shared care for children and young people who are stable on ADHD medications in primary care, supported by the appropriate funding.

### **Right to Choose Providers for Neurodevelopmental Assessments**

We understand that some educational settings are promoting referrals to Right to Choose providers via their GP to as an alternative to the above NHS pathway.

The following things must be considered with Right to Choose providers:

- Whilst speed of access to a diagnosis may be the suggested benefit, this may not be the actual experience due to high levels of demand.
- There are quality concerns with some Right to Choose providers. Not all assessments meet NICE guidance or other clinical standards and have proper documentation in place. Some providers are not regulated by the Care Quality Commission (CQC). Assessments can lack essential components like school input or clear clinical evidence. Some assessment appointments are only offered remotely, with no face-to-face appointment option for robust assessments with a child/young person and their family.
- For children being assessed for ADHD, some Right to Choose providers offer only an assessment/diagnosis with no follow-up if ADHD medication is required. Not all Right to Choose providers have a standard NHS contract with Cheshire and Merseyside ICB, which is needed for the shared care element to transfer to the locally commissioned service if required.
- As a result of the challenges above, NHS services may be unwilling to offer follow up support, including entering into shared care arrangements with Right to Choose providers. This can delay access to medication for young people diagnosed with ADHD and families can be left struggling to find help.



Children and Young People's  
Transformation Programme



- NICE guidelines states and evidence from Cheshire and Merseyside and several other areas shows that a robust graduated response to understanding needs early can reduce the need for assessment and diagnosis. The graduated response means providing support to meet those needs, and reviewing whether the support is meeting those needs, increasing support and access to services if required. Where needs are met early in universal services such as educational settings, will reduce the number of children and young people going on to need assessment/diagnosis. This in turn frees up NHS specialist clinical capacity to focus on our children and young people with the greatest need and/or complexity.

We therefore request your support in ensuring that, where families are requesting Right to Choose referrals, they are aware of the local offer in each place, the new Cheshire and Merseyside neurodevelopmental pathway and Knowing Me profiling tool for children and young people, and the potential issues they may encounter with Right to Choose providers.

Details of the new Cheshire and Merseyside pathway can be found here:

[Cheshire and Merseyside neurodevelopment pathway - NHS Cheshire and Merseyside](#)