Qbtech

ADHD Assessment Consistency Scorecard

An evidence-informed self-audit for clinics and healthcare organizations

Disclaimer: This scorecard is intended solely as an educational and quality improvement resource. It does not constitute medical advice, legal advice, or clinical guidance, and should not be used as the sole basis for diagnosing ADHD or making treatment decisions. Clinical judgment should always be exercised, taking into account the individual patient's presentation, applicable professional standards, and local regulations. Completion of this scorecard does not indicate compliance with any specific guideline, accreditation, or regulatory requirement.

Qbtech makes no representations or warranties regarding the completeness or applicability of this tool to any individual service or jurisdiction and accepts no liability for decisions made based on its use.

Instructions and information

How to score

For each statement, select one response and assign a score accordingly.

Score	Description
0	Rarely / Never
1	Sometimes / Inconsistently applied
2	Always / Standard practice

Note: Maximum score is 50

Interpreting your score

41-50 – Highly standardized

Well done. Your service demonstrates a high level of consistency across your ADHD assessment workflow. Continue monitoring quality through regular audit, training, and review.

31-40 – Well established

You've standardized most of your core processes, although some variation may still exist between clinicians or sites.

21-30 – Developing

Several important elements are in place, and you're on the right path. With greater consistency, you may be able to improve efficiency and support more reliable care delivery.

0-20 – Opportunity to improve

Your service may benefit from reviewing your workflows, documentation standards, and clinical governance processes to reduce unnecessary variation.

Evidence base

This scorecard was informed by internationally recognized ADHD guidance and quality improvement principles, including:

- National Institute for Health and Care Excellence (NICE). Attention Deficit Hyperactivity Disorder: Diagnosis and Management (NG87). Updated 2025
- American Academy of Pediatrics (AAP). Clinical Practice Guideline for the Diagnosis, Evaluation, and Treatment of ADHD in Children and Adolescents. Pediatrics. 2019
- American Academy of Child and Adolescent Psychiatry (AACAP). Practice Parameter for the Assessment and Treatment of Children and Adolescents With ADHD. 2007
- American Psychiatric Association (APA). Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR). 2022
- World Health Organization (WHO). International Classification of Diseases, 11th Revision (ICD-11)
- Faraone SV, et al. The World Federation of ADHD International Consensus Statement: 208 Evidence-Based Conclusions About ADHD. Neuroscience & Biobehavioral Reviews. 2021
- Institute for Healthcare Improvement (IHI). Quality Improvement Essentials Toolkit (for continuous improvement concepts)

Consistency scorecard for ADHD clinics

Referral and intake	Score 0-2
1. All patients follow a standardized referral and intake process	
2. Pre-assessment questionnaires are routinely completed before the clinical appointment	
3. Developmental, educational, and medical history is collected using standardized documentation	
4. Relevant collateral information (parents, teachers, caregivers or partners where appropriate) is routinely requested	
5. Patients receive consistent information about what to expect before assessment	
Clinical assessment	**Score 0-2**
1. All clinicians assess symptoms using DSM-5-TR or ICD-11 diagnostic criteria	
2. Functional impairment is documented across multiple settings	
3. Alternative explanations and differential diagnoses are routinely considered	
4. Co-occurring mental health conditions are assessed using a consistent approach	
5. Clinicians use standardized rating scales appropriate for the patient's age	
Evidence-based decision making	**Score 0-2**
1. Clinical decisions are based on multiple information sources rather than a single assessment	
2. Objective assessment tools are considered where clinically appropriate	
3. Diagnostic uncertainty is documented consistently	
4. Diagnostic conclusions are supported with clear clinical rationale	
5. Complex cases are discussed within multidisciplinary teams where available	
Documentation and communication	**Score 0-2**
1. Patients receive a clear explanation of diagnostic findings	
2. Written reports follow a standardized format	
3. Reports clearly document evidence supporting the diagnosis	
4. Patients receive information on treatment options and shared decision-making	
5. Recommendations are communicated consistently to referring clinicians	
Follow up and patient care	**Score 0-2**
1. Treatment plans are individualized but follow agreed workflows	
2. Follow-up appointments follow standardized protocols	
3. Clinicians receive regular training on ADHD assessment	
4. The service periodically audits diagnostic consistency	
5. Assessment processes are reviewed and improved using quality improvement principles	
Total score	**/ 50**