

Assessing variation in Axial Spondyloarthritis Services

Freedom of Information Request

August 2019

About you

Recognition and Referral

1. Does your Health Board have a specified pathway from primary care to secondary care for inflammatory back pain in place?

Please select one of the following response options

- Yes
- No

If you answered 'yes', please give details below of the pathway and, if applicable, arrangements in place to raise awareness in primary care

Not applicable.

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If none of the above response options apply to you, please provide more information on your local arrangements below

The UHB refers patients via its electronic referral system.

If the medical history is suggestive of inflammatory back pain they receive an appointment for the early inflammatory arthritis clinic.

The UHB also recommends for their General Practitioner (GP) to request MRI spine and SI joints scans as per NICE guidance protocol prior to the patient's rheumatology clinic appointment to avoid a delay in diagnosis.

Diagnosis in specialist care settings

2. What is the average current waiting time to diagnosis for a patient referred with inflammatory back pain?

Please select one of the following response options

Option	Please tick here (one option only)
Less than 1 month	<input checked="" type="checkbox"/>
1 – 2 months	<input type="checkbox"/>
2 – 3 months	<input type="checkbox"/>
3 – 4 months	<input type="checkbox"/>
4 – 5 months	<input type="checkbox"/>
5 – 6 months	<input type="checkbox"/>
6 – 12 months	<input type="checkbox"/>
More than 12 months	<input type="checkbox"/>

3. Are patients with suspected axial SpA (AS) routinely referred for a full spinal MRI?

Please select one of the following response options

Option	Please tick here (one option only)
Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

If neither of the above response options apply to you, please provide more information on your local arrangements below

Not applicable.

Information and Support

4. How do you ensure patients are given information and support following their diagnosis?

The UHB ensures patients are provided with the Versus Arthritis booklet on axial spondyloarthritis (AS) and written pharmaceutical information. Additionally, the contact details for the rheumatology clinical nurse specialist (CNS) advice line service is provided for further support.

Please select whichever response options apply

Option	Please tick here (tick all that apply)
Written information	✓
Verbal information	✓
Access to a helpline	✓
Named contact in the team	✓
Group educational sessions	
Other (please provide details)	

Pharmacological management of axial SpA (AS)

5. What guidance are patients with axial SpA (AS) given when deciding whether to access biologic treatment?

Please provide details of arrangements in your local area below

The UHB's Consultants or CNS's provide guidance and recommendations by way of written information and also provide advice on the expectation a biologic treatment can achieve.

6. Bearing in mind the NICE anti TNF guidance for ankylosing spondylitis (TA383) states that, '*Treatment with another anti TNF is recommended for people who cannot tolerate, or whose disease has not responded to, treatment with the first TNF-alpha inhibitor, or whose disease has stopped responding after an initial response*', after failure with one biologic, how many other biologics will your commissioners fund a patient with axial SpA (AS) to try, including IL 17As?

Please select one of the following response options

Option	Please tick here (one option only)
None	
1	
2	
3 or more	✓

If none of the above response options apply to you, please provide more information on your local arrangements below

Not applicable.

Non-pharmacological management of axial SpA

7. What proportion of adults with axial SpA (AS) are referred to a specialist physiotherapist for a structured exercise programme within your local area when first diagnosed?

Please provide details below

The UHB offers all new patients a referral to a specialist physiotherapist for a structured exercise programme.

Flare management

8. What percentage of patients with axial SpA (AS) have a written care plan to support them with a flare?

Please provide details below

Hywel Dda University Health Board (UHB) is unable to provide you with all of the information requested, as it is estimated that the cost of answering your request would exceed the “appropriate level”, as stated in the Freedom of Information (Fees and Appropriate Limit) Regulations 2004. The “appropriate level” represents the estimated cost of one person spending 18 hours, or (2½ working days), in determining whether the UHB holds the information, and locating, retrieving and extracting the information.

In order to provide you with all of the information being requested, the UHB would need to manually scrutinise all rheumatology patient records to identify any information that would fulfil your request.

The UHB is therefore applying an exemption under Section 12 of the Freedom of Information Act 2000 (FOI), which provides an exemption from a public authority’s obligation to comply with a request for information where the cost of compliance is estimated to exceed the appropriate limit.

Organisation of care

9. Does the Trust have a dedicated axial SpA (AS) clinic?

Please select one of the following response options

Option	Please tick here (one option only)
Yes	
No	✓

If neither of the above response options apply to you, please provide more information on your local arrangements below

Not applicable.

Mental health and well being

10. Are axial SpA (AS) patients under the care of a rheumatologist offered access to psychological services?

Please select one of the following response options

Option	Please tick here (one option only)
Yes	
No	√

If you ticked yes, please specify the services below

Not applicable.

For any further information on the contents of this Freedom of Information request, could you please contact foi@nass.co.uk.