FOI 6049 - Attachment 1

Section 1: Specialist headache clinics			
1. (a)	Do you have a specialist headache clinic in your Trust?	Hywel Dda University Health Board (UHB) confirms that it does not have a specialist headache clinic.	
1. (b) (i)	If yes, please give details.	Not applicable.	
1. (b)(ii)	If no, please give details of the clinic you would refer out to.	The UHB confirms that headache patients are referred to the General Neurology Clinic.	
2. (a)	How many people did you support through your specialist headache clinics in 2019?	Not applicable.	
2. (b)	How many people did you support through your specialist headache clinics in 2020?	Not applicable.	
3.	What is the average waiting time from GP referral to first appointment at the specialist headache clinics in your Trust (current or for when you last had data)?	Not applicable.	
4. (a)	Has Covid-19 affected the services provided by your specialist headache clinic(s)? (E.g. staff redeployment, virtual services rather than face to face, anything else)	Not applicable.	
4. (b)	If yes, please give details.	Not applicable.	
5.	How many Full Time Equivalent (FTE) headache specialist doctors are employed by your Trust (in secondary care or GPs with an extended role)?	The UHB confirms that it has 2.5 FTE Consultant Neurologists that support this sub speciality in addition to General Neurology.	
6.	How many FTE headache specialist nurses are employed by your Trust?	The UHB confirms that it does not employ any headache specialist nurses.	
7. (a)	Do you have plans in 2021/22 to increase headache specialist services?	The UHB confirms that it does have plans to increase headache specialist services.	
7. (b)	If yes, please give details.	The UHB confirms that it is looking to recruit additional workforce to support a headache specialist service within their job plans.	

8. (a)	Do you have plans in 2021/22 to do additional work with GPs regarding education, community management or pathways?	The UHB confirms that it does plan to undertake additional work with GPs regarding education, community management and pathways.
8. (b)	If yes, please give details.	The UHB confirms that it is continuing to support the existing headache pathway currently in place.
8. (c)	If no, please explain any reasons (e.g. budgets / other priorities / other organisations' responsibility).	Not applicable.
9. (a)	Have you completed the Self-Assessment Questionnaire included in NHS RightCare's Headache and Migraine Toolkit within the past year?	The UHB confirms that two (2) consultants are yet to complete the Self-Assessment Questionnaire, included in the NHS RightCare's Headache and Migraine Toolkit during the past year.
9. (b)	9. (b) If yes, did this indicate that the requirements of the headache and migraine system were: (a) fully met, (b) partially met, or (c) not met?	Not applicable.
	Section 2: Access to Calcitonin Gene-Relate	ed Peptide (CGRP) medication
10. (a)	10. (a) Can eligible patients currently access Calcitonin Gene-Related Peptide (CGRP) medication through your Trust?	The UHB confirms that patients can currently access Calcitonin Gene-Related Peptide (CGRP) medication.
10. (b) (i)	If yes, how many people are accessing CGRP medication through your Trust?	The UHB confirms that there are, on average, three (3) patients a month, accessing CGRP medication.
10. (b) (ii)	If yes, what is the current waiting time to access a prescribing specialist?	The UHB confirms that there is no specific waiting list. Patients are placed on the general routine waiting list.
10. (b) (iii)	If yes, is the administration of CGRP treatments monitored by a headache specialist?	The UHB confirms that the administration of CGRP treatments is monitored by a headache specialist. The UHB confirms that both Ajovy (fremanezumab)
10. (b) (iv)	If yes, are both Ajovy (fremanezumab) and Emgality (galcanezumab) available to patients?	and Emgality (galcanezumab) are available to patients.
10. (c)	If no, do you refer and fund it out of area? Please give details.	Not applicable.
	Section 3: Train	ing
11. (a)	Do you have any education or training programmes with GPs in your area on migraine? (E.g. regarding patient management in the community, patient information or referral pathways)	The UHB confirms that there is no specific migraine training programmes for GP's. However, each Cluster is supported to identify their own training needs and to identify training as appropriate. Additionally, all GP's undergo annual appraisals, which includes an assessment of learning needs. Migraine is a common presentation in General Practice and would be captured by this process enabling GP's to ensure they have adequate training in this field.

11. (b)	If yes, or if any is planned, please give details.	Not applicable.		
Section 4: Inequalities				
12. (a)	Are you aware of local inequalities of access to headache specialist services amongst any groups (e.g. by gender, ethnicity, disability, socio-economic groups)?	The UHB confirms that it is not aware of local inequalities of access to headache specialist services amongst any groups.		
12. (b)	12. (b) If yes, please give details of the inequalities and any work you are doing or planning to address this.	Not applicable.		