

Reference:	FOI.20193.26
Subject:	Headache and migraine service
Date of Request:	13 April 2026

Requested:

Definitions (for this request):

‘Headache & migraine service’ means any commissioned, hosted, or directly provided service/clinic (secondary care, community, or integrate) that offers assessment and/or ongoing management of headache disorders (including migraine) for adults and/or children, whether stand-alone or embedded within neurology/pain services.

‘Clinical/service lead’ means the named clinician responsible for clinical leadership of the headache/migraine service/pathway (e.g., consultant neurologist, GPwER, or other appointed lead).

‘Workforce size’ refers to staff who work within, or are formally allocated to, the headache/migraine service/pathway. Please provide both headcount and Whole Time Equivalent (WTE), where available.

Requested information (please answer for your organisation):

Service existence and configuration

1. Does your NHS body host, or directly provide a dedicated headache and/or migraine service/clinic? If yes, please specify whether it is: dedicated headache clinic; migraine clinic; neurology clinic with dedicated headache sessions; community service; or other (please describe).
2. Please provide the service name(s), provider organisation(s)/site(s), and patient group(s) served (adult, paediatric, or both).

Named clinical/service lead

3. Please provide the name, job title, and employing organisation of the current named clinical/service lead for the headache/migraine service/pathway.
4. If there is no single named lead, please provide the name(s) and title(s) of the most senior clinician(s) responsible for headache/migraine care/pathway governance.

Workforce size (headcount and WTE)

5. For the most recent 12-month period available (or the latest point-in-time establishment), please provide the staffing complement allocated to the headache/migraine service/pathway, broken down as follows:
 - a. Nurses (including headache specialist nurses/ANPs) – headcount and WTE, and banding (e.g., Agenda for Change band) if recorded.
 - b. Pharmacists (clinical pharmacists, prescribing pharmacists, medicines optimisation) – headcount and WTE, and banding/grade if recorded.
 - c. Administrative/clerical staff – headcount and WTE, and banding/grade if recorded.

- d. Any other staff groups materially involved in the service (optional but helpful): consultants/medical staff, allied health professionals, psychologist, physician associates – headcount and WTE.

Service capacity indicators

6. Number of headache/migraine clinics/sessions delivered per week or per month (or annual total).
7. Number of new and follow-up appointments for headache/migraine in the last 12 months (if recorded).
8. Current waiting time for first appointment (e.g., median or RTT measure used locally) for headache/migraine referrals.

Response:

Hywel Dda University Health Board (UHB) does not hold the requested information as it does not provide specialist headache/migraine clinics; all referrals received for headache/migraine are seen within general Neurology clinics.