

FOI from The Migraine		Section 1: Commissioning and care planning		Section 2:		Section 3: Access to Calcitonin Gene-Related Peptide (CGRP) medication		Section 4:		Section 5:																			
1. (a) Within the past year, have you reviewed or found opportunities for improvement in pathways and care for headache and migraine?	1. (b) (i) If yes, what did this review find?	1. (b) (ii) If no, what has prevented this so far?	1. (c) Do you have any plans to implement the findings of the optimum clinical pathways for adults for Headache & facial pain published by the National Neurosciences Advisory Group (NNAAG) in February 2023?	1. (a) Have you reviewed the migraine needs of your local population (e.g. numbers of people living with migraine who are diagnosed and not yet diagnosed) and planned services to meet these needs (e.g. by offering opportunities for training in migraine management to GPs, as well as adequate access to secondary and tertiary specialists)?	2. (b) If not, are there plans to do so?	3. (a) Do you plan to appoint a Migraine/Headache Lead in your area (e.g. to coordinate migraine care, share guidelines among colleagues, or lead needs assessments, service development and health care professional education across the area)?	3. (b) If not, are there alternative arrangements in place to coordinate migraine care?	4. (a) Do you have a specialist headache clinic in your Board/Trust area?	4. (b) (i) If yes, please give details.	4. (b) (ii) If no, please give details of the clinic you would refer out to.	5. (a) How many people did you support through your specialist headache clinics in 2022?	5. (b) How many people did you support through your specialist headache clinics in 2022?	6. What is the average waiting time from GP referral to first appointment at the specialist headache clinics in your Board/Trust area (current or for when you last had data)?	7. How many full time equivalent (FTE) headache specialist doctors are employed by your Board/Trust area (in secondary care or GPs with an extended role)?	8. How many FTE headache specialist nurses are employed by your Board/Trust area?	9. (a) Do you have plans in 2023/24 to increase headache specialist services?	9. (b) If yes, please give details.	10. (a) Can eligible patients currently access Calcitonin Gene-Related Peptide (CGRP) medication through your Board/Trust area?	10. (b) (i) If yes, how many people are accessing CGRP medication through your Board/Trust area?	10. (b) (ii) If yes, which of the following CGRP medications can they access: Ajovy/fremanezumab, Emgality/galcanezumab, Vyepti/eptinezumab, or Aimovig/erenumab.	10. (b) (iii) If yes, what is the current waiting time to access a prescribing specialist?	10. (b) (iv) If yes, is the administration of CGRP treatments monitored by a headache specialist?	10. (b) (v) If yes, is the administration of CGRP treatments subject to any additional restrictions or criteria?	10. (c) If no, do you refer (out of area)? Please give details.	11. (a) Do you have any education or training programmes with GPs or pharmacists in your area on migraine? (E.g. regarding GP/pharmacy education, patient management in the community, patient information or referral pathways)	11. (b) If yes, or if any are planned, please give details.	11. (c) If no, please explain any reasons (e.g. budgets / other priorities / other organisations' responsibility)	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)?	12. (b) If yes, please give details of the inequalities and any work you are doing or planning to address this.
Yes	We have reviewed our processes and hope to implement a QI process this year to try and make a business case for a nurse specialist to assist the headache service	No - not applicable	No	No	No	N/A	Yes, Headache is part of Neurology Service and the Trust does have separate Headache Clinics.	Weekly clinics on Monday (2 doctors), Thursday 3 doctors, Botox injection clinic 3 sessions per week (1 doctor, 1 physician associate)	N/A	The cost of locating and retrieving the information exceeds the "appropriate limit" as stated in the Freedom of Information (Fees and Appropriate Limit) Regulations 2004. To obtain this information would require a manual trawl and count of Health records, would exceed the £450 limit and is therefore cost prohibitive.	Urgent - 20 week	Speciality Doctor - 0.3WTE, GPs 0.6WTE	None	The Trust has plans to increase the headache service should appropriate commissioning and funding support be available	Yes	between 50-60 people getting CGRP in SHSCT	Access to all listed medications with the exception of Vyepti/eptinezumab	The cost of locating and retrieving the information exceeds the "appropriate limit" as stated in the Freedom of Information (Fees and Appropriate Limit) Regulations 2004. To obtain this information would require a manual trawl and count of Health records, would exceed the £450 limit and is therefore cost prohibitive.	Yes	Administration of CGRP treatments are in line with NICE guidance	N/A	No	N/A	N/A	There are no inequalities of access to Services.	N/A			