### **Epilepsy Study Organisational Questionnaire**

#### A. Introduction

Please complete one organisational questionnaire for each hospital in your Trust/Health Board that treats patients that have had an epileptic seizure

### What is this study about:

To investigate variation and remediable factors in the processes of care of patients presenting to hospital following an epileptic seizure.

### Who should complete this questionnaire:

This questionnaire has been designed to collect data on the organisational structures surrounding the care provided to patients that have a seizure and ongoing epilepsy management.

It should be completed by or with input from, clinicians(s) that provide care to this group of patients. This is likely to include, but not limited to, Neurology, Specialist Epilepsy clinicians, Emergency medicine, Acute medicine and Intensive care medicine.

#### Questions or help:

Further information regarding the study can be found here: https://www.ncepod.org.uk/epilepsy.html If you have any queries about the study or this questionnaire, please contact: epilepsy@ncepod.org.uk or telephone 020 7251 9060.

This study was commissioned by The Healthcare Quality Improvement Partnership (HQIP) as part of the Clinical Outcome Review Programme into Medical & Surgical care.

# B. The Hospital

1. 6	ow many inpatient i	beds does this nospital nav	er 
			1
2a. D	oes this hospital ha	ve an Emergency Departme	nt?
C	<b>)</b> Yes	O No	
	answered "Yes" to the Emergency De	[2a] then: partment open 24/7?	
C	) Yes	O No	
3. D	oes the hospital hav	ve a Neurology Department	on-site?
C	) Yes	O No	
4. D	oes the hospital hav	ve a Neurosurgery Departm	ent on-site?
$\mathcal{C}$	) Yes	O No	

# C. Staffing

1a.	What is the availability of consultant neuro	nogists on-site?
	O Consultant neurologists based on-site	
	O Visiting consultant neurologists with dedicate	ed sessions
	O Visiting consultant neurologists on adhoc bas	sis (no dedicated sessions)
	Not available on-site	
	16	
	If not listed above, please specify here	
Lb.	If answered "Consultant neurologists based How many consultant neurologists are emp	
		Unknown
1c.	If answered "Consultant neurologists based	
	How many whole time equivalent consultar	nt neurologists are employed at this hospital?
		WTE Unknown
Ld.	If answered "Visiting consultant neurologis	
	How many neurology consultant sessions o	on-site at this hospital per week?
	Sé	essions Unknown
le.	What are the arrangements for urgent in-h	ours neurology cover?
	Neurology consultant/registrar on-site 24/7	On-call neurology consultant/registrar
	O Telephone advice only	O No arrangement
	If not listed above, please specify here	
1f.	What are the arrangements for urgent out-	-of-hours neurology cover?
	Neurology consultant/registrar on-site 24/7	On-call neurology consultant/registrar
	Telephone advice only	No arrangement
	9 ,	<b>G</b> 3
	If not listed above, please specify here	
²a.	If answered "Consultant neurologists based	
	Does the hospital have consultant neurolog	gists with a specialism in epilepsy on-site?
	○ Yes ○ No	O Unknown
2b.	If answered "Yes" to [2a] then:	
	How many consultant neurologists with spenospital?	ecialism in epilepsy are employed at this
		Unknown
sa.	What is the availability of epilepsy specialis	st nurses on-site?
	Epilepsy specialist nurses based on-site	
	Visiting epilepsy specialist nurses with dedicate	
	O Visiting epilepsy specialist nurses on adhoc k	basis (no dedicated sessions)
	Not available on-site	
	Not available on-site  If not listed above, please specify here	

	Unknown
	st nurses based on-site" to [3a] then: ent epilepsy specialist nurses are employed at this
	WTE Unknown
If answered "Visiting epilepsy How many sessions on-site at	specialist nurses with dedicated sessions" to [3a] then: this hospital per week?
How many sessions on-site at	this hospital per week?  sessions Unknown
How many sessions on-site at  . Which of the following does the	this hospital per week?  sessions Unknown

### D. Services

O Yes	O No	Unknown
b. If answered "Yes Which services a please tick all that	are available?	
☐ Walk-in clinic ☐ Text message		one support
Please specify any	additional options here	
c. If answered "Wa Hours available	lk-in clinic" to [1b] thei (walk in clinic)	n:
O Monday - Frida	ay (normal working hours)	<ul><li>Monday - Friday (extended hours)</li></ul>
7 days a week	(normal working hours)	7 days a week (extended hours)
If not listed above,	, please specify here	
	ephone support" to [1b (telephone support)	o] then:
O Monday - Frida	ay (normal working hours)	<ul><li>Monday - Friday (extended hours)</li></ul>
O 7 days a week	(normal working hours)	7 days a week (extended hours)
If not listed above,	, please specify here	
	ail response service" to (email response service	
O Monday - Frida	ay (normal working hours)	Monday - Friday (extended hours)
7 days a week	(normal working hours)	7 days a week (extended hours)
If not listed above,	, please specify here	
	kt message service" to ( (text message service)	
	ay (normal working hours)	
•	(normal working hours)	O 7 days a week (extended hours)
If not listed above,	, please specify here	
g. If answered to [1 Hours available		
	y (normal working hours)	<ul><li>Monday - Friday (extended hours)</li></ul>
•	(normal working hours)	7 days a week (extended hours)

2a.	Which of the following are available on-site ( $please\ tick\ all\ that\ apply$	investigations)?
	<ul> <li>□ Electroencephalogram (EEG)</li> <li>□ CT</li> <li>□ 12-lead electrocardiogram (ECG)</li> <li>□ Vagal Nerve Stimulation (VNS)</li> <li>□ Outpatient/ambulatory video EEG</li> </ul>	<ul><li>☐ MRI</li><li>☐ 3-lead electrocardiogram (ECG)</li><li>☐ Anti-seizure medication blood screen</li><li>☐ Inpatient video telemetry</li></ul>
	Please specify any additional options here	
2b.	If answered "Electroencephalogram (EEG)" to What hours is EEG available?	o [2a] then:
	<ul><li>Monday - Friday (normal working hours)</li><li>7 days a week (normal working hours)</li></ul>	<ul><li>Monday - Friday (extended hours)</li><li>7 days a week (extended hours)</li></ul>
	If not listed above, please specify here	
2c.	If answered "MRI" to [2a] then: What hours is MRI available?	
	<ul><li>Monday - Friday (normal working hours)</li><li>7 days a week (normal working hours)</li></ul>	<ul><li>Monday - Friday (extended hours)</li><li>7 days a week (extended hours)</li></ul>
	If not listed above, please specify here	
3a.	Does this hospital have an on-site drug and a	alcohol liaison service?
	O Yes O No	○ Unknown
3b.	If answered "Yes" to [3a] then: What hours is the service available?	
	<ul><li>Monday - Friday (normal working hours)</li><li>7 days a week (normal working hours)</li></ul>	<ul><li>Monday - Friday (extended hours)</li><li>7 days a week (extended hours)</li></ul>
	If not listed above, please specify here	
Зс.	If answered "No" to [3a] then: Where are patients with known epilepsy/suspepisode was precipitated by drugs and/or alc	
	<ul> <li>Alcohol and drug liaison service within Trust/He</li> <li>Alcohol and drug liaison service within neighbor</li> <li>Community based alcohol and drug liaison service</li> <li>Not routinely referred</li> </ul>	ouring Trust/Health Board
	If not listed above, please specify here	
	ease indicate how each of the following services.	es are accessed
4a.	Neurophysiology	0.0%
	On-site Off-site different Trust/Health Board	<ul><li>Off-site but within Trust/Health Board</li><li>No access to service</li></ul>
	If not listed above, please specify here	

ib. Neuropsychiatry	
On-site	Off-site but within Trust/Health Board
Off-site different Trust/Health Board	No access to service
If not listed above, please specify here	
Lc. If answered "On-site", "Off-site but wit Trust/Health Board" to [4b] then: What is the current average waiting ti	thin Trust/Health Board" or "Off-site different me (neuropsychiatry)?
	Weeks Unknown
d. Neuropsychology	<del></del> -
○ On-site	Off-site but within Trust/Health Board
Off-site different Trust/Health Board	O No access to service
If not listed above, please specify here	
le. If answered "On-site", "Off-site but wit Trust/Health Board" to [4d] then: What is the current average waiting ti	thin Trust/Health Board" or "Off-site different me (neuropsychology)?
	Weeks

### E. Protocols and policies 1a. Does this hospital have a protocol for patients who have suffered a head injury? ( No Unknown 1b. If answered "Yes" to [1a] then: Does this include guidance for patients with epilepsy? O No Unknown 2a. Does this hospital have a guideline for the emergency management of suspected first seizure patients? Unknown Yes O No 2b. If a first seizure patient presents to the Emergency Department, is it hospital policy to contact the on-call neurologist? O No Yes Unknown 3. Does the hospital have a protocol for treating convulsive status epilepticus? Yes O No Unknown 4. Is it hospital policy for the Emergency Department to contact the epilepsy team when existing epilepsy patients are admitted? Yes O No Unknown

# F. Epilepsy management, follow up and outpatient review

Yes	No	○ Unknown
. If answered "Ye	•	<b>9</b> •
		for an appointment to the first seizure clinic following
		Weeks Unknown
		ients that attend the Emergency Department with a st seizure clinic?
O Yes	O No	O Unknown
I. If answered "No Where are first	o" to [1a] then: seizure patients	usually referred?
O First seizure	clinic elsewhere with clinic at another Tru pased first seizure cl	
If not listed abov	e, please specify he	re
e. If answered "No Is it routine pro suspected first		ients that attend the Emergency Department with a seizure clinic?
	○ No	O Unknown
2. Following a dia	gnosis of epilepsy	what services are patients routinely referred
2. Following a dia to/provided wit please tick all the	ignosis of epilepsy th? at apply	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the	ignosis of epilepsy th? at apply	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone fo	ignosis of epilepsy th? at apply illow-up   ny additional options	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone fo	ignosis of epilepsy th? at apply illow-up   ny additional options	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone fo Please specify and Telephone for Please specify and Telephone fo	ignosis of epilepsy th? at apply illow-up  my additional options  ital run outpatient	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone fo Please specify and Telephone for Please specify and Telephone fo	ignosis of epilepsy th? at apply illow-up  my additional options  ital run outpatient	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone for Please specify are a. Does this hospital Yes  Description of Yes  Yes  Yes  Let If answered "New Telephone for Italian in the Italia	ignosis of epilepsy th? at apply illow-up  my additional options  ital run outpatient  No ith epilepsy offere  No o" to [3a] then:	what services are patients routinely referred  Primary care follow-up
2. Following a dia to/provided wit please tick all the Telephone for Please specify and Telephone f	ignosis of epilepsy th? at apply Illow-up  ital run outpatient  No ith epilepsy offere  No o" to [3a] then: epsy patients refe	what services are patients routinely referred  Primary care follow-up

4.	4. Which of the following are provided for patients with epilepsy who attend to please tick all that apply	his hospital?
	A named lead consultant	
	A nominated key worker	
	A named Epilepsy specialist nurse	
	<ul><li>An agreed personal care plan/long -term care plan</li><li>Escalation of treatment policy</li></ul>	
	Shared care agreement with specialist centre	
	Arrangements to provide feedback	
	Emergency care plan	
	Please specify any additional options here	
5a.	a. Is medication adherence routinely monitored for people with established ep	ilepsy?
	<ul><li>Yes - all patients</li><li>No</li></ul>	
	If not listed above, please specify here	
5b.	b. If answered "Yes - all patients" or "Yes - all patients experiencing an increas to [5a] then: How is this done?	se in seizures"
	Anti-seizure medication blood levels	
	If not listed above, please specify here	
6a.	a. Are patients provided with specific information/education regarding epileps	y?
6b.	b. If answered "Yes" to [6a] then: What does it include? please tick all that apply	
	■ Need to assess risk factors	
	Complications of epilepsy	
	Written self-management plan	
	<ul><li>☐ SUDEP (Sudden Unexpected Death in Epilepsy)</li><li>☐ Management of epilepsy related risks (eg. alcohol, drugs, medication non-adhere</li></ul>	250)
	Impact on life	ice)
	☐ Driving	
	First point of contact	
	Please specify any additional options here	
6c.	ic. If answered "Yes" to [6a] then:  When is patient education/information provided?	
	○ Before discharge from hospital ○ First clinic appointment	
	Before discharge and at first clinic appointment	
	If not listed above, please specify here	

**Additional Information** 

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# THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE

By doing so you have contributed to the dataset that will form the report and recommendations due for release in the autumn of 2022