Research Project:  
Evaluation of headache service quality

[ list the local collaborator(s) ]

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Service manager’s questionnaire

Under the auspices of the Global Campaign against Headache, headache centres in Europe and the United States, and the University of Oxford in the UK, are collaborating to define and measure quality of headache care. This is a step towards making improvements in headache care at local, national and international levels.

A multi-dimensional definition of quality has been agreed, along with a set of quality indicators. This study is an evaluation of the quality indicators implemented in specialist headache centres. Health-care providers, patients and administrative staff are asked to complete short questionnaires, and a review of randomly selected patients’ records is conducted.

If the study is successful, it will be followed by studies in other settings, including primary care. Ultimately, the quality indicators, once validated, will be used to improve headache services.

There are five short questionnaires. This one of 17 questions is aimed at the service manager (the person responsible for ensuring the service is properly maintained). Please complete it by ticking the relevant box for each question. Once you have done so, please return it to [local collaborator].

First please indicate whether you are (tick one):

qualified doctor O qualified nurse O not clinically qualified O

the numbers of full-time-equivalent staff in the headache service:

staff doctors _______ trainee or temporary doctors _______

nurses _______ other health-care providers _______

and the date of completion: _______/_____/20__
1. Are diagnostic diaries available in your headache service?
   O yes
   O no

2. Does a formal triage system exist in your headache service?
   (this means any system during the first telephone contact, or on receipt of a referral letter, that identifies patients’ particular needs and reacts accordingly)
   O yes
   O no (go to 4)

3. Is your triage system designed to pick out potentially urgent cases for early appointments?
   (for example, patients with cluster headache)
   O yes
   O no

4. Does an access route to psychological therapies exist in your headache service?
   (these may be provided within your own service or by direct referral to another service)
   O yes
   O no

5. Is an instrument for disability assessment available in your headache service?
   O yes
   O no

6. Does your headache service allow follow-up of every patient who needs it?
   O yes
   O no

7. Is a follow up diary or calendar available in your headache service?
   O yes
   O no
8. Does a referral pathway exist from primary care to your headache service?
   O yes
   O no (go to 10)

9. Does this pathway permit, and respond to, urgent referral when needed?
   O yes
   O no

10. Are information leaflets for headache patients available in your headache service?
    O yes
    O no

11. Does a protocol (rules and written procedures) to limit wastage of resources exist in your headache service?
    O yes
    O no

12. Is a record of running costs kept for your headache service?
    O yes
    O no

13. Is your headache service equally accessible for all patients who need it?
    (if access to the service depends on ability to pay or another restriction unrelated to clinical need, answer “no”)
    O yes
    O no

14. Is an outcome measure available in your headache service that is based on self-reported symptom burden?
    O yes
    O no

15. Is an outcome measure available in your headache service that is based on self-reported disability burden?
    O yes
    O no

16. Is an outcome measure available in your headache service that is based on self-reported quality of life?
    O yes
    O no
17. Does a protocol (rules and written procedures) for reporting serious adverse events exist in your headache service?
O yes
O no

Please add further comments, if any, below:

Thank you for completing the questionnaire. Please return it to [local collaborator]