# Epilepsy Services in Scotland







June 2022

### THE BACKGROUND

Across Scotland, people with epilepsy face a postcode lottery of specialist care. Despite epilepsy being one of the most common neurological conditions, we continue to see a significant disparity in care and support across the fourteen health boards in Scotland.

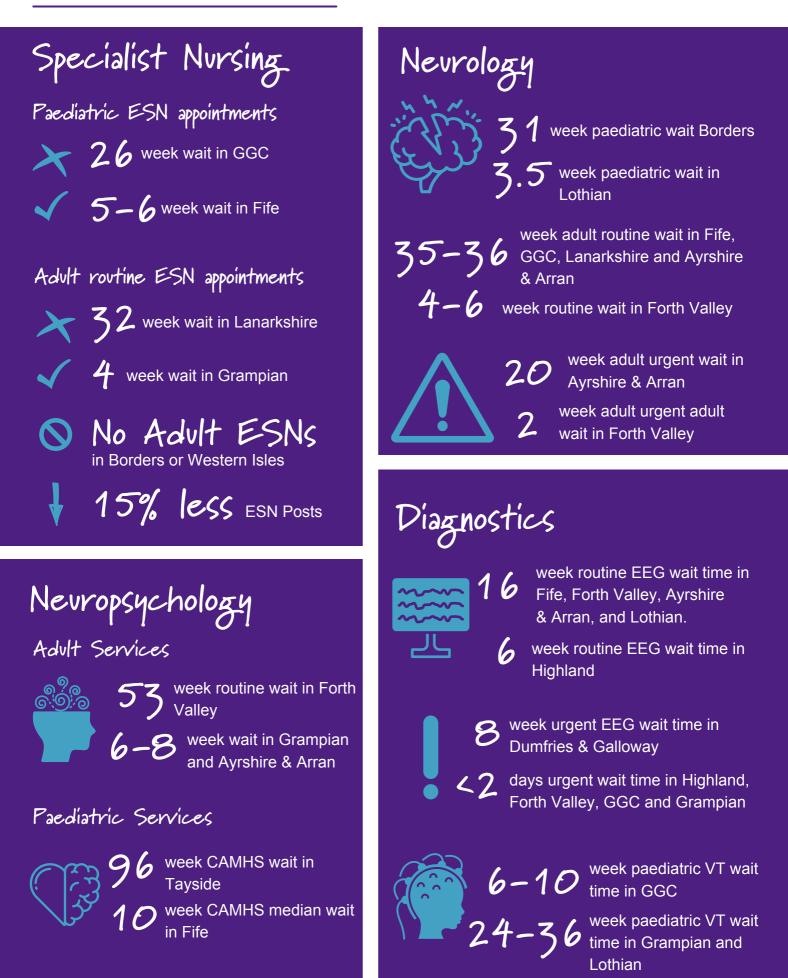
Accurate and timely diagnosis and effective treatment and management of epilepsy is vital. However, many people with epilepsy are consistently facing excessive waiting times for specialist care, with clinical epilepsy teams facing equally excessive caseloads.

In 2021 we undertook a mapping exercise, seeking to gather information to develop a better understanding of clinical epilepsy support across Scotland. We submitted a Freedom of Information (FOI) request to every health board in Scotland, asking questions regarding staff numbers (in whole time equivalent) and waiting times. The results of these FOIs were stark. One year on, we were keen to understand if things had changed and what this could mean for the epilepsy community. We submitted new FOI requests to all health boards. The collated responses from both the 2021 and 2022 FOIs have informed this report.

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## **KEY FINDINGS**



### THE POPULATION

### Who and where are the people with epilepsy in Scotland?

An estimated 1 in 97 people in Scotland have epilepsy, roughly 55,000 people (<u>1</u>), 4,200 of whom are estimated to be children (<u>2</u>).

Data recording on epilepsy in Scotland is poor. There is currently no up to date information on the epilepsy population, both in terms of accurate numbers and location. For this reason, population numbers provided in this report are estimates based on prevalence data, which we know is out of date, and therefore cannot be used to provide an accurate picture in Scotland.

We questioned the recorded epilepsy population in each health board. As this information is not routinely captured, many health boards were unable to provide an answer. Some health boards provided an estimate, many of which were significantly different to both what prevalence data would suggest and the previous year's estimate.

|                  | E attace to at             | E a filma a fa al       | E attine at a d              | Haalth Daard Eathmate 0004  | Health Board Estimate 2022  |
|------------------|----------------------------|-------------------------|------------------------------|---|---|
|                  | Estimated<br>Epilepsy Pop. | Estimated<br>Adult Pop. | Estimated<br>Paediatric Pop. | Health Board Estimate 2021  | Health Board Estimate 2022  |
| Ayrshire & Arran | 3,786                      | 3.483                   | 303                          | -   |   |
| Borders          | 1,136                      | 1.045                   | 91                           | 1,100   | -   |
| Dumfries &       | 1,526                      | 1,404                   | 122                          | 102 adults  | 135 adults  |
| Galloway         | 1,020                      | 1,404                   | 122                          | 102 addits  | 100 addits  |
| Ganonay          |                            |                         |                              |   | ~78 children  |
| Fife             | 3,814                      | 3,509                   | 305                          | 1,100 adults (not including those<br>seizure free)<br>Over 450 children currently<br>prescribed epilepsy medication | -   |
| Forth Valley     | 3,155                      | 2.903                   | 252                          | 2,529   | 1.664 adults  |
| r or an valley   | 0,100                      | 2,000                   | 202                          | 2,020   | 1,004 dualts  |
|                  |                            |                         |                              |   | 207 children  |
| Grampian         | 5,155                      | 4,743                   | 412                          | 3,000   | ~2,500 adults   |
|                  |                            |                         |                              |   |   |
|                  |                            |                         |                              |   | 360 children  |
| GGC              | 11,757                     | 10,816                  | 941                          | -   | -   |
| Highland         | 3,299                      | 3,035                   | 264                          | 1,550   | ~900 (patients routinely seen<br>and followed up by epilepsy<br>services – total number may be<br>higher considering those<br>discharged)<br>150 children |
| Lanarkshire      | 6,753                      | 6,213                   | 540                          | -   | -   |
| Lothian          | 8,247                      | 7,587                   | 660                          | -   | -   |
| Orkney           | 222                        | 204                     | 18                           | -   | 20 adults   |
|                  |                            |                         |                              |   |   |
| 01               | 0.07                       | 0.40                    | 40                           | 450   | 0 children  |
| Shetland         | 237                        | 218                     | 19                           | 152   | 255 adults<br>21 children<br>(excludes details from 2<br>independent GP practices)  |
| Tayside          | 4,128                      | 3,798                   | 330                          | 3,950   | ~4000 adults  |
|                  |                            |                         |                              |   |   |
|                  | 070                        | 054                     |                              | 410   | 500 children  |
| Western Isles    | 273                        | 251                     | 22                           | 418   | 510 adults  |
|                  |                            |                         |                              |   | 24 children   |
|                  |                            |                         |                              |   |   |

### **EPILEPSY SPECIALIST NURSES**

Epilepsy Specialist Nurses (ESNs) offer vital support to people with epilepsy. They act as a bridge between a patient and their neurologist and can reduce strain on acute services ( $\underline{3}$ ). ESNs promote a greater understanding of the condition through advice and support, and can enable people with epilepsy and their carers to better manage their epilepsy, improving the burden on people's physical and mental health ( $\underline{4}$ ).

The Scottish Intercollegiate Guideline Network (SIGN) develops evidence based clinical practice guidelines for the NHS in Scotland (<u>5</u>). However, it is evident current epilepsy care provided by health boards across Scotland does not align with the SIGN epilepsy guidelines.

The guidelines recommend each epilepsy team should include ESNs. However, this is not the case for all health boards. NHS Borders fail to provide an adult ESN service, meaning the support drops off when children transition to adult services. Furthermore, NHS Western Isles have chosen not to replace the adult ESN post and instead generalise neurology nursing, diluting specialist support to the rural community.

The SIGN guidelines recommend patients with a new diagnosis of epilepsy should receive an appointment with an ESN within 30 working days of diagnosis. However, only Dumfries & Galloway, Fife, Forth Valley, Highland and Grampian reported an urgent waiting time of 4 weeks or under.

Since 2021, the number of ESN posts in Scotland has fallen by an estimated 15%. This report highlights the significant caseloads the majority of ESNs in Scotland are responsible for, made worse by the shrinking workforce.

|                  | ESNs                          | ESN per Adult with Epilepsy  | ESN per Child with epilepsy |
|------------------|-------------------------------|------------------------------|-----------------------------|
| Ayrshire & Arran | 1 Adult                       | 1 ESN per 3,483 adults       | 1 ESN per 168 children      |
| -                | 1.8 Paediatric (inc. vacancy) |                              |                             |
| Borders          | No Adult                      | 1,045 Adults with no support | 1 ESN per 114 children      |
|                  | 0.8 Paediatric                |                              |                             |
| Dumfries &       | 0.6 Adult                     | 1 ESN per 2,340 adults       | 1 ESN per 305 children      |
| Galloway         | 0.4 Paediatric                |                              |                             |
| Fife             | 2.36 Adult                    | 1 ESN per 1,487 adults       | 1 ESN per 305 children      |
|                  | 1 Paediatric                  |                              |                             |
| Forth Valley     | 2 Adult (inc. 1 vacancy)      | 1 ESN per 1,452 adults       | 1 ESN per 315 children      |
|                  | 0.8 Children's Community      |                              |                             |
|                  | Nurse with epilepsy interest  |                              |                             |
| Grampian         | 1.6 Adult                     | 1 ESN per 3,228 adults       | 1 ESN per 225 children      |
| (+ Shetland &    | 2 Paediatric                  |                              |                             |
| Orkney)          |                               |                              |                             |
| GGC              | 3.62 Adult                    | 1 ESN per 2,988 adults       | 1 ESN per 941 children      |
| (+ Lanarkshire   | 2 Paediatric                  |                              |                             |
| Paediatrics)     |                               |                              |                             |
| Highland         | 2 Adult                       | 1 ESN per 1,518 adults       | 1 ESN per 173 children      |
|                  | 1.53 Paediatric               |                              |                             |
| Lanarkshire      | 1 Adult (employed by GGC)     | 1 ESN per 6,213 adults       | GGC                         |
| Lothian          | 2.55 Adult                    | 1 ESN per 2,975 adults       | 1 ESN per 660 children      |
|                  | 1 Paediatric                  | -                            |                             |
| Tayside          | 2 Adult                       | 1 ESN per 1,899 adults       | 1 ESN per 220 children      |
|                  | 1.5 Paediatric                |                              |                             |
| Western Isles    | No Adult                      | 251 Adults with no support   | 22 Children with no support |
|                  | No Paediatric                 |                              |                             |
|                  |                               |                              |                             |

### **MENTAL HEALTH & SPECIALIST SUPPORT**

People with epilepsy are more likely to struggle with their mental health. Depression and anxiety are higher amongst people with epilepsy compared to the general population. It is estimated that 1 in 3 people with epilepsy will suffer from depression, compared to the UK average of 1 in 6 (6,7).

For those diagnosed with epilepsy as an adult, it can have a significant impact on a person's life, impacting their lifestyle, work, relationships and more. For those who have had epilepsy from a young age, their mental health issues may stem from childhood. Research published in the Lancet cited children with epilepsy are known to have a four-fold increased risk of psychiatric disorders compared to their peers ( $\underline{8}$ ). The research pointed to lack of access to psychiatric services during adolescence exacerbating the risk of mental health problems and suicide amongst older adolescents and young adults.

Moreover, the COVID-19 pandemic has had a significant impact on the epilepsy community. Our 2021 COVID-19 Impact Report revealed 80% of respondents with epilepsy felt the pandemic had an impact on their mental health and wellbeing ( $\underline{9}$ ). Anecdotal evidence from our Welfare Rights and Helpline Services point to these pressures being further compounded by socioeconomic factors such as rising inflation and persistent un- and underemployment in people with epilepsy.

Recognising the increasing pressures on people with epilepsy, we questioned neuropsychology services and CAMHS (Child and Adolescent Mental Health Services). The responses revealed extensive waiting times, with children and young people in some health boards waiting over a year for access to these specialist services. It is vital people with epilepsy have timely access to specialist mental health and neuropsychology support.

### **AVOIDABLE DEATHS**

A 2021 study found epilepsy-related deaths have not reduced over time in Scotland, yet a large proportion of epilepsy-related deaths are preventable (<u>10</u>). Mortality rate for those aged 16-54 is double that of the age groups as a whole, with as many as 76% of these deaths being potentially preventable.

Of all the epilepsy-related deaths identified across Scotland, 62% were hospitalised for seizures in the years before their deaths, yet only 27% had been referred to a neurology clinic during that same period. SUDEP (Sudden Unexpected Death in Epilepsy), poorly controlled epilepsy, cardiovascular disease, and alcohol and drug abuse were cited as causes of avoidable deaths, with a further suggestion that many of these young adults may also have had mental health problems.

The stark findings of this study demonstrate the desperate need for radical improvement of epilepsy and neuropsychology services, with measures put in place to combat extensive waiting times across neurology. This is essential for the health and wellbeing of people with epilepsy across Scotland.

## CONCLUSION

This report has shown the huge inequity of epilepsy care across Scotland remains unacceptably variable. For example, adults under the care of NHS Fife can expect a routine neurologist waiting time of 36 weeks and urgent of 20 weeks while those in Forth Valley face a routine waiting time of 12-16 weeks and urgent of 2 weeks. Similar disparity exists in paediatric services. Dumfries and Galloway reported paediatric patients are seen by an ESN within 48 hours of referral while GGC reported a paediatric ESN waiting time of 26 weeks.

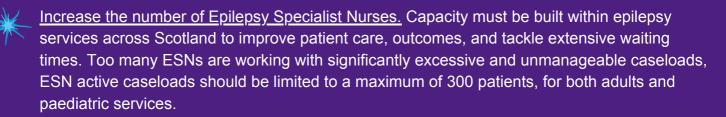
When comparing the responses of the 2021 and 2022 FOI requests, while some services have improved waiting times, others have remained poor or deteriorated further. Ayrshire and Arran, for example, has seen a reduction in adult routine neurologist waiting time by 33 weeks, from 68 to 35 weeks. However, the waiting time for a routine EEG has increased by 13-14 weeks. Similarly, whilst Tayside reported a reduction in waiting times for adult services, there has been an increase for paediatric. Adult routine ESN and neurologist waiting time reduced by 8-6 weeks but paediatric waiting time increased by 14-16 weeks.

The 15% reduction in Epilepsy Specialist Nursing posts is especially concerning. Less posts further contributes to a system of over burden which is detrimental to patient and staff health and wellbeing. ESNs offer vital support to people with epilepsy to better manage their condition and live well on their own terms.

This disparity in access to specialist care could significantly delay some patients from achieving seizure control. Uncontrolled seizures increase the risk of mortality and massively impact the lives of people with epilepsy, further contributing to poor mental health. The extensive neuropsychology waiting times for both adult and paediatric services across the country highlight the poor support available for those who may be struggling to manage the emotional burden of the condition.

The pandemic has only further intensified existing pressures on these vital services. This, compounded with increasing socioeconomic pressures further puts people with epilepsy in need of specialist support.

### Recommendations





<u>Improve prevalence data recording of epilepsy.</u> Better epidemiological information on epilepsy, for both adults and paediatrics, will improve knowledge about the condition, will allow for better services to be developed which meet the meets of the population and will assist with workforce planning.



Improve neuropsychology services across Scotland. Specialist neurology mental health support should be offered at initial diagnosis, with regular reviews throughout the management of an individual's epilepsy.

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## **AYRSHIRE & ARRAN**

### 3,786 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

1 adult ESN and 1 paediatric ESN. There is also a 0.8 Paediatric ESN post being advertised.

- There is no waiting for new adult epilepsy appointments, however, they are unable to separate nurse led appointments from other appointments.
- Waiting time is 10 weeks for paediatric ESNs.

### Neurology

2 consultant neurologists and no paediatric consultant neurologists. This service is provided by consultant neurologists on a visiting basis from NHS GGC.

- The waiting time for adult neurologists is 35 weeks and paediatric is 20 weeks.
- New first seizure clinic waiting time for adults is 23 weeks and for paediatrics is 17 weeks.

Consultant neurophysiology is provided by NHS GGC, but there are 1.6 neurophysiology technicians.

- EEGs: Routine waiting time is 16 weeks, urgent waiting time is 2 weeks.
- Videotelemetry (VT): Waiting time is 34 weeks.

#### Neuropsychology

- Clinical Health Neuropsychology waiting time is 6 weeks.
- Rainbow House paediatric service waiting time is 47 weeks. CAMHS waiting time is 6 weeks.

- Neurology: The waiting time for neurologists has significantly reduced for routine appointments. Last year the waiting time was recorded as routine 68 weeks, this year it was reported as 35 weeks.
- EEGs: The waiting time for EEGs extended for routine appointments, from 2-3 weeks last year to 16 weeks this year. Urgent waiting time has also increased from 1 to 2-3 weeks.

### BORDERS

### 1,135 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

There is no adult ESN and a 0.8 paediatric ESN. No waiting times were provided.

#### Neurology

2 consultant neurologists (adults and paediatrics are seen by the same service).

• Waiting time is 31 weeks.

There are no consultant neurophysiologists or neurophysiology technicians. EEGs and VT are provided by NHS Lothian.

#### Neuropsychology

- Neuropsychology services are provided by NHS Lothian.
- CAMHS waiting time is 45 weeks.

- ESNs: There remains no adult ESN in NHS Borders.
- Neurology: Over the year, the waiting time to see neurologists has reduced by 18 weeks, from 49 to 31 weeks.

## DUMFRIES & GALLOWAY

### 1,526 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

0.6 adult ESN and 0.4 paediatric ESN.

• All adult patients are currently being seen 'on time' and paediatric patients are seen by an ESN within 48 hours of referral.

### Neurology

1.6 consultant neurologist and paediatric services are provided by NHS GGC.

• Waiting time for adults is 15 weeks on average.

There are no consultant neurophysiologists or neurophysiology technicians as there are no facilities in Dumfries for this.

- EEGs: Outsourced to Kilmarnock and there is an 8 week average waiting time for both urgent and non-urgent.
- VT: Waiting time is 24-48 weeks.

#### Neuropsychology

No neuropsychology or CAMHS information was provided.

- ESNs: Since last year, the adult ESN vacancy has been filled.
- Neurology: The waiting time to see consultant neurologists has gone up from 11 weeks to 15 weeks.
- EEGs/VT: Waiting times for both services have remained consistent.

### 3,814 people with epilepsy

### Epilepsy Specialist Nurses (ESNs)

There are 2.36 adult ESNs and 1 paediatric ESN.

- For adults, the routine waiting time is 16 weeks and urgent waiting time is 4 weeks.
- Paediatric clinics are joint with consultants, the waiting time is 5-6 weeks.

### Neurology

2.77 consultant neurologists and 2 vacancies currently covered by locums. In paediatrics, there is 1 acute consultant paediatrician with special interest in epilepsy post unfilled and 2 community paediatricians with a special interest in epilepsy to commence in March 2022.

- Adult urgent waiting time is 20 weeks and routine is 36 weeks.
- Paediatric clinics are joint with the ESN, the waiting time is 5-6 weeks.

There is 1 consultant neurophysiologist and 1.77 neurophysiology technicians.

- EEGs: Routine waiting time is 16 weeks and urgent cases are seen within 3 days.
- VT: Service is provided by NHS Lothian.

#### Neuropsychology

- Multiple parts of the Psychology service provide various forms of neuropsychology input so waiting times vary.
- The median CAMHS waiting time is 10 weeks and urgent cases are seen within 3 days. 90% of cases wait less than 40 weeks.

- Neurology: Neurologist waiting time for urgent adults has lengthened considerably, from 12 to 20 weeks. Routine waiting times have dropped slightly from 39 to 36 weeks. Last year it was reported there were no paediatric patients waiting to see a neurologist, this year there is a 5-6 week waiting time.
- EEGs: Routine waiting time for EEGs has lengthened from 8-10 weeks to 16 weeks.

### FORTH VALLEY

### 3,155 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

1 adult ESN and 1 adult ESN vacancy. No paediatric ESNs, but there is 0.8 children's community nurse with a special interest in epilepsy (split between epilepsy and CCN duties).

- For adults, urgent waiting time is 2 weeks and routine is 12-16 weeks.
- There is no nurse led paediatric clinic so there is no waiting time information available.

### Neurology

4.2 consultant neurologists. There is no paediatric consultant neurologist but there is 0.8 general paediatrician with a special interest in epilepsy.

- Adult waiting time is 2 weeks for urgent cases, and 4-6 week routine waiting time.
- At the time of the FOI request, there were no urgent paediatric patients waiting, and 1 waiting for a routine appointment.

No consultant neurophysiologists but a neurophysiologist from Queen Elizabeth University Hospital is employed for 1 session a week to report routine EEGs and an agreement is in place with on-call consultant neurophysiologist to report urgent inpatient EEGs. There are 0.74 neurophysiology technicians.

- EEGs: Routine waiting time is 16 weeks and urgent waiting time is 1-2 days for inpatients.
- There is no VT service.

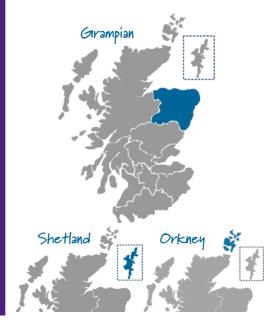
#### Neuropsychology

- 53 week waiting time for routine neuropsychology referrals however urgent referrals are prioritised and seen much more quickly.
- CAMHS urgent waiting time is 1-3 days and routine is 67 weeks.

- ESNs: The longest adult waiting time was reported at 11 weeks last year. This year it has risen to a routine waiting time of 12-16 weeks.
- Neurology: The waiting time for consultant neurologists has reduced since last year, with the current waiting time for a routine appointment being 4-6 weeks, and last year the longest waiting time being 11 weeks.
- EEGs: The waiting time for EEGs has increased, with the routine waiting time rising from 6 weeks to 16 weeks. Urgent waiting times have remained consistent.

### **GRAMPIAN** & SHETLAND AND ORKNEY

5,614 people with epilepsy
5,155 people in Grampian
237 people in Shetland
222 people in Orkney



### Epilepsy Specialist Nurses (ESNs)

1.6 adult ESNs and 2 paediatric ESNs.

- For adults, routine waiting time is 4 weeks and there is no wait for urgent cases.
- Paediatric routine waiting time is 9 weeks and urgent waiting time is 3 weeks.

### Neurology

6.6 consultant neurologists and 2 paediatric consultant neurologists.

- For adults, 35 week waiting time for new neurology. First seizure or urgent waiting time is normally 6-8 weeks.
- Paediatric urgent waiting time is 10 weeks and routine waiting time is 22 weeks.

No consultant neurophysiologists but 1 vacancy. No neurophysiology technicians.

- EEGs: Routine adult waiting time is 16 weeks and paediatric is 12 weeks. Urgent waiting time is within 24 hours (Monday-Friday).
- VT: Adult waiting time is 48 weeks and paediatric is 24-36 weeks.

#### Neuropsychology

- First seizure or urgent epilepsy referrals normally get an appointment within 6-8 weeks.
- Current waiting time to CHOICE (First Assessment & Treatment) appointment is 8 weeks in Aberdeen City/Shire and 13 weeks in Moray. Current waiting time to First Partnership appointment is 28 weeks in Aberdeen City/Shire and 12 weeks in Moray.

- ESNs: Adult ESN waiting time has reduced from a longest wait of 12 weeks last year to 4 weeks this year.
- Neurology: No waiting list was recorded for adult neurology last year.
- Neurophysiology: There were 6 neurophysiology technicians reported last year, there were none this year.
- EEGs: Routine waiting time for EEGs for adults has reduced from 30 weeks to 16 weeks and paediatric from 16 weeks to 12 weeks.
- VT: Waiting time has increased it was recorded as 39 weeks last year for adults, this year it is 48 weeks. For paediatrics, waiting time was recorded as 12 weeks, this year it is 24-36 weeks.



-> 7,753 people in Lanarkshire

芛 273 people in Western Isles

### Epilepsy Specialist Nurses (ESNs)

3.62 adult ESNs and 2 paediatric ESNs.

- Adult waiting time is 20 weeks and paediatric is 26 weeks.
- Since last year, there is no longer an ESN in the Western Isles.
- Lanarkshire does not provide a paediatric service but has an adult ESN who is employed by GGC. Adult waiting time in Lanarkshire is 32 weeks.

#### Neurology

33 consultant neurologists. 6 paediatric consultant neurologists and paediatric consultant neurologist 1 vacancy.

- Adult new out-patient waiting time is 36 weeks and new epilepsy is 6-8 weeks. Paediatric new out-patient waiting time is 26 weeks.
- In Lanarkshire, 2 visiting consultant neurologists employed by GGC provide an adult service. This service has a longest waiting time of 58 weeks with 95% of patients seen within 35 weeks.

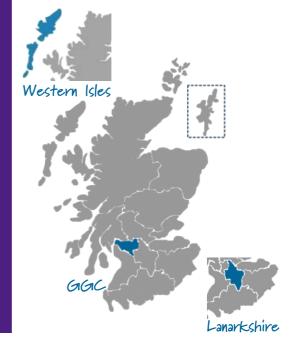
5.6 consultant neurophysiologists with 0.4 vacancy. There are also 13.32 adult neurophysiology technicians with 1 vacancy and 3.8 paediatric neurophysiology technicians.

- EEGs: Routine adult waiting time is 12 weeks and urgent is within 2 days. Paediatric routine wait time is 9 weeks and urgent is within 2 days.
- VT: Adult waiting time is 52 weeks and paediatric inpatient waiting time is 6 weeks and outpatients is 10 weeks.

#### Neuropsychology

Adult neuropsychology waiting time is 12 weeks and CAMHS waiting time is not recorded.

- ESNs: The number of ESN posts in GGC, Lanarkshire and Western Isles has reduced since last year. There is no longer an ESN in the Western Isles, last year there was a 0.5 ESN post.
- Neurology: Last year, Lanarkshire and Western Isles reported a GGC average waiting time of 18-20 weeks for consultant neurologist referrals. This year, GGC consultant neurologist waiting time is 36 weeks for outpatients, and 6-8 weeks for new epilepsy. Paediatric waiting time was 6-7 weeks last year, and new out-patient waiting time was recorded as 26 weeks this year.
- EEGs: Adult routine waiting time has increased from 9 weeks to 12 weeks and paediatric routine waiting time has increased from 8 to 9 weeks. Urgent waiting times have remained consistent.



### HIGHLAND

### 3,299 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

2 adult ESNs and 1.53 paediatric ESNs.

• There are 2 monthly clinics for adult ESNs and there is daily phone support for paediatrics.

### Neurology

4 consultant neurologists and 2 visiting paediatric neurologists.

- Adult waiting time is 29 weeks for inpatient/day cases and 15 weeks for outpatients.
- Paediatric neurology referrals wait until the next clinic. Most paediatric epilepsy patients are seen by the paediatrician with an interest with 2-3 clinics per month.

Workforce data does not identify specific specialities and therefore consultants are mapped to neurology and neurophysiology.

- EEGs: Adult routine EEG waiting time is 6 weeks and urgent is 2 days. Paediatric routine waiting time is usually 8 weeks and urgent waiting time is less than 1 week.
- VT: Waiting time is up to 32 weeks.

#### Neuropsychology

The waiting lists are not built in a way that would allow an answer for adult neuropsychology waiting time. CAMHS outpatient waiting time is 48 weeks.

- ESNs: Last year 1 adult ESN was reported, this year there are 2.
- Neurology: There has been an increase in the number of consultant neurologists by 1. Waiting times provided last year do not allow for comparison this year.
- EEGs: Routine adult waiting time has reduced by 1 week since last year and urgent waiting time has remained the same.
- VT: Waiting times have reduced by 4 weeks since last year.

### LOTHIAN

### 8,247 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

2.55 adult ESNs and 1 paediatric ESN.

• Adult waiting time is approximately 11 weeks and there is no paediatric wait.

#### Neurology

15 consultant neurologists (including 4 through the University of Edinburgh) and 7 consultant paediatric neurologists.

- · Adult waiting time is 7 weeks for new patients
- Paediatric services have a median waiting time of 3.5 weeks.

2 consultant neurophysiologists and 8 neurophysiology technicians with 3 neurophysiology technician vacancies. NHS Lothian also covers patients from NHS Borders.

- EEGs: Routine waiting time is 14-16 weeks for adults and 6.7 weeks for paediatrics. There is a 2 week waiting time for urgent adults and no urgent waiting time for paediatrics.
- VT: Waiting time for adults is 40 weeks and SPECT scan waiting time is 12 weeks. VT waiting time for paediatrics is 31.7 weeks. NHS Lothian also provide VT services for patients from NHS Fife.

#### Neuropsychology

- Adults are currently waiting 43 weeks for neuropsychology services but ongoing improvements mean the expected waiting time is to be 18 weeks by October 2022. NHS Lothian also provide this service for NHS Borders.
- CAMHS has a median waiting time of 31 weeks.

- ESNs: Since last year, the number of adult ESNs has reduced by 0.85 and paediatric ESNs by 2. No waiting times were provided last year so comparison is not possible.
- Neurology: The number of consultant neurologists has reduced by 2 and paediatric consultant neurologists has increased by 1.5. No waiting times were provided last year so comparison is not possible.
- The number of neurophysiology technicians has reduced by 5.85 (including vacancies).
- EEGs: Routine waiting times for adults has increased from 4 weeks last year to 14-16 weeks this year. Urgent waiting time has increase from within 1 week to 2 weeks. Paediatric waiting time has remained consistent.
- VT: Waiting times for adults have reduced from 52 weeks to 40 weeks. Paediatric waiting times have increased from 9 weeks to 31.7 weeks.

### TAYSIDE

### 4,128 people with epilepsy



### Epilepsy Specialist Nurses (ESNs)

2 adult ESNs and 1.5 paediatric ESNs.

• Adult waiting time is 18 weeks and paediatric is 16-17 weeks.

### Neurology

5.3 consultant neurologists and 2 consultant paediatric neurologists with 1 unfilled post. The 3 paediatric neurologists cover a regional service in conjunction with 2 colleagues in Aberdeen – this includes Highlands, Orkney, Shetland, Grampian and Tayside (also includes NE Fife).

• Adult waiting time is 18 weeks and paediatric is 16-17 weeks.

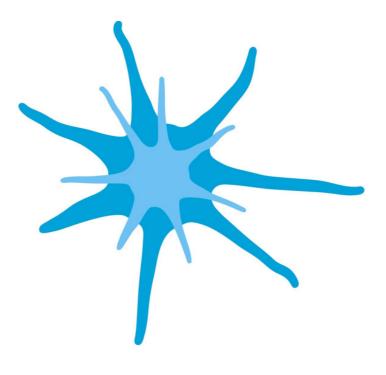
0.9 consultant neurophysiologists with a 0.3 unfilled post and 5.5 neurophysiology technicians with 1 unfilled post.

- EEGs: Routine waiting time is 7 weeks and urgent waiting time is same day for inpatients and within a week for outpatients.
- VT: Paediatric waiting time is 28 weeks.

#### Neuropsychology

- Adult waiting time is 24 weeks.
- CAMHS waiting time is up to 96 weeks.

- ESNs: Routine waiting time for adult ESNs has reduced from 24-26 weeks to 18 weeks. However, paediatric waiting time was recorded as 1-2 weeks last year, it is now 16-17 weeks.
- Neurology: Routine waiting time for adult neurologists has decreased from 24-26 weeks to 18 weeks. However, paediatric waiting time was recorded as 1-2 weeks last year, this year is is 16-17 weeks.
- EEGs: Routine waiting time for adults has increased from 4 weeks to 7 weeks. Urgent remains consistent.



get in touch

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