Hospital’s Parkinson’s campaign further improves care for patients

Slough, UK, 13 April 2016: A senior doctor has revealed how a campaign to improve the care of people with Parkinson’s at one of the UK’s largest hospitals has succeeded in delivering better treatment for patients.

Dr Sarah Jackson, a movement disorders consultant at the Royal Devon & Exeter Hospital, initiated a campaign for change after an audit demonstrated the hospital could further improve care of its Parkinson’s patients. In just five years the changes have delivered a specialist ward – one of the few in the UK, with trained Parkinson’s nurses which together with a multi-disciplinary medical team, have been able to improve care for those with Parkinson’s admitted to the hospital.

A recent medical study, “Measuring the burden and mortality of hospitalisation in Parkinson’s disease”, revealed that Parkinson’s patients have higher rates of emergency admissions with longer hospital stays, higher costs and in-hospital death than the average patient. One reason for this is poor medication management in hospitals, a situation NHS England described as “unacceptable” in response to a BBC Newsnight programme which investigated the inadequate care of Parkinson’s patients in hospital.

The study highlighted that the treatment of people with Parkinson’s in hospital is complex, particularly when they are admitted as an emergency with an additional serious or life-threatening illness caused by a fall or infection which is often a result of the condition itself. The failure to address the special needs of Parkinson’s patients results in higher costs for the NHS, as well as a poor patient experience, higher number of complaints about patient care and may lead to a permanent reduction in mobility. The report also investigated the causes of emergency admissions among these patients and found the most common were: pneumonia (13.5%); physical deterioration (9.4%); urinary tract infection (9.2%) and hip fractures (4.3%).

The study highlights how critical it is for Parkinson’s patients to receive the right treatment at the right time. And also draws attention to the high economic burden to the NHS of expensive and potentially preventable emergency admissions and treatments. An emergency admission for a person with Parkinson’s costs about £3,338 per patient compared to £1,417 for a planned non-emergency stay.

Parkinson’s patients need to continue taking their medication on time in hospital otherwise they may become ill and have to stay longer, which is why the patient charity, Parkinson’s UK launched a “Get it on Time” awareness campaign in 2006.

Dr Jackson told other doctors and nurses at a recent “Get It on Time” meeting, run jointly between UCB and Parkinson’s UK, how several initiatives had worked together to transform the care of patients at the hospital. She said: “What has made the biggest difference is raising the profile of Parkinson’s within the hospital and outside in the community. One of our recent educational meetings had 50 delegates, including a GP. It’s been a culture change and a lot of little things.”

Since the 2010 audit carried out by Dr Jackson the following changes were made:

- Setting up of the Bolham ward with 12 beds for Parkinson’s patients
- Two dedicated job-sharing Parkinson’s nurses, Sam Moore and Stacey Andrew, who both carry mobiles so they can be contacted by Emergency Department, surgical and medical wards and/or the Acute Medical Unit.
- The nurses proactively seek out Parkinson’s Patients in the hospital
• Daily reviews of the hospital’s movement disorders database to see if there are any new Parkinson’s patients
• Established a closer relationship with the community-based Parkinson’s nurse who sees the patients at home. This is to ensure that when the patient is discharged from hospital they have a treatment plan. This is also beneficial in highlighting any issues that may have arisen
• Earlier discharge of patients because they rehabilitate better in their own home
• Proactive engagement with the occupational therapist
• Setting-up of an integrated Parkinson’s Disease (PD) meeting inviting researchers, clinicians, Parkinson’s nurses and therapists
• Raising awareness of Parkinson’s across the hospital and also in prisons
• Medicines management: ensuring that nurse changeovers don’t impact the patient, in particular getting their medication on time

The hospital now has a pathway for Parkinson’s patients as well as a PD care plan. This means that when a patient gets admitted to the Emergency Department or the Acute Medical Unit, the Parkinson’s nurse is alerted and meets the patient and if there are no other medical complications they are taken to the Bolham Ward. Once in the ward their care is reviewed within 24 hours by a specialist Parkinson’s consultant.

In the five years during which the changes have been implemented there have been impressive changes. The average length of stay following admission has been reduced by 50% - from 24 days to 12 – in patients whose average age is late 70s. The improvement in medication management, with patients failing to get their first dose within a prescribed time has gone from 60% to 3%.

A recent patient survey is also testament to the turnaround: In 2010 and again four years later patients were asked a series of questions. In 2010 when asked how confident they were about staff caring for them knowing about Parkinson’s the response was 60% - in 2014 that increased to 86%. Patient satisfaction with the management of their Parkinson’s illness in hospital rose to 86% from 75% in 2010. Today more than 90% of patients now see a specialist Parkinson’s doctor or nurse.

The Patient View

Barbara Morris is a 68-year-old Parkinson’s patient who was admitted to the hospital A&E earlier this year after losing her balance and fracturing her hip.

Barbara, a retired art teacher said: “I just fell on the pavement. After my fall I was taken to hospital in great pain. After A&E I was taken to a very busy orthopaedic ward but Dr Jackson and the Parkinson’s nurse suggested I transfer to Bolham because I would get specific care for my Parkinson’s.

“Not all nurses are clued up about Parkinson’s and it’s wonderful to have the support of a medical team who understand the symptoms and understand that you need your medication in reach. It’s also good that we can speak to the Parkinson’s nurse about anything we are not happy about.

“I noticed the change since my last visit. There is more awareness that Parkinson’s patients are not just being difficult. The Parkinson’s nurses are fantastic and very aware of the fact that you need to get your drugs on time, especially at night”

Note to editors:

“Measuring the burden and mortality of hospitalisation in Parkinson’s Disease” is a medical study of the English Hospital Episodes Statistics Database and a collaboration between UCB and three of the UK’s leading medical experts working with Parkinson’s patients.
References:

4. Personal PowerPoint document written by Dr Sarah Jackson

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