Key messages aimed at improving the care of people with Parkinson's disease and swallowing difficulties whilst in hospital

MESSAGE 1. DOCUMENT THE SWALLOW STATUS OF ALL PATIENTS WITH PARKINSON'S DISEASE AT THE POINT OF REFERRAL TO HOSPITAL



12/25 respondents to the online patient survey indicated that problems with eating, drinking or swallowing medication, while in hospital, were not taken seriously by the healthcare team

83/277 (30%)
patients had
dysphagia when
presenting to
hospital

20/79 sets of notes of patients who were known to have dysphagia did not contain information relating to dysphagia

MESSAGE 2. SCREEN PATIENTS WITH PARKINSON'S DISEASE FOR SWALLOWING DIFFICULTIES AT ADMISSION



30/409 (7.3%)
patients had a history
of aspiration
pneumonia prior to
their admission

96/449 (21.4%) patients had indicators of dysphagia on admission. The most common indicators were difficult or slow chewing and swallowing and coughing or choking

287/479 (59.9%) patients had their ability to continue with normal diet and fluid intake, which is an indicator of dysphagia, assessed at admission.

MESSAGE 3. REFER PATIENTS WITH PARKINSON'S DISEASE WHO HAVE SWALLOWING DIFFICULTIES (OR WHO HAVE PROBLEMS WITH COMMUNICATION) TO SPEECH AND LANGUAGE THERAPY



51/209 (24.4%) patients were referred to speech and language therapy following swallow screening on arrival at hospital. The case reviewers were of the opinion that a further 36/132 (27.3%) patients should have been referred

96/377 (25.5%) patients were referred to speech and language therapy on admission, and in 87 patients this was for dysphagia

Case reviewers indicated there was a delay in referral to speech and language therapy in 25/96 patients

MESSAGE 4. NOTIFY THE SPECIALIST PARKINSON'S DISEASE SERVICE (HOSPITAL AND/OR COMMUNITY) WHEN A PATIENT WITH PARKINSON'S DISEASE IS ADMITTED, IF THERE IS ANY INDICATION THAT THERE HAS BEEN A DETERIORATION OR PROGRESSION OF THEIR CLINICAL STATE



307/397 (77.3%) patients were under the care of a Parkinson's disease service prior to their admission

180/316 (57%) sets of case notes contained no evidence that patients with Parkinson's disease had a named contact with their Parkinson's disease service

Parkinson's disease consultants and/or specialist nurses were involved for 160/497 (32.2%) patients

MESSAGE 5. PROVIDE WRITTEN INFORMATION AT DISCHARGE ON HOW TO MANAGE SWALLOWING DIFFICULTIES



168/292 (57.5%) patients/carers were provided with information on the administration of medicines prior to discharge. The information was more likely to be provided if the patient's Parkinson's disease medication had been altered during the admission

There was no evidence in the case notes of communication at discharge with those responsible for the care of the patient in the community in 90/275 (32.7%) cases reviewed

There was evidence in the case notes that the patient's level of swallowing/aspiration risk in the community was considered prior to discharge for 61/210 (29.0%) patients