Request under Freedom of Information Act 2000

# Request Ref: NGFOI 19/20: 006

Thank you for your request for information received at Northampton General Hospital NHS Trust (NGH) on 02/04/2019.

I am pleased to be able to provide you with the following information:

## Training and staff awareness

Q1. What training is provided/sourced by the Trust to raise awareness among staff (in particular ward based staff) about the needs of inpatients with Parkinson's, particularly around timing of medication for these patients?

All newly qualified nurses receive preceptorship training and as part of this have clinical skills sessions. Within these sessions the particulars/importance of Parkinson's medications & their timings are referenced.

Our Student nurses from the University of Northampton are provided with a specific lecture regarding Parkinson's disease during their training.

Q2. How many a) staff overall and b) ward based staff have undertaken such training during 2017/2018 and 2018/2019 to date?

- a) 2017/18 156 2018/19 – 135
- b) We are unable to provide these figures for ward based staff as we do not collate this information in sub-category level.

## <u>Alert system</u>

Q1. Does the Trust have any kind of electronic (or other) alert system in place to flag to the Parkinson's service when a person with the condition is admitted to hospital in a) a planned way and b) as an emergency?

The Trust does not currently have a flagging system in place for when a person with Parkinson's is admitted to hospital. This is something currently being discussed.

Q2. If the Trust does not have an alert system, how are the Parkinson's specialist service notified and subsequently involved in the care of a person admitted with Parkinson's (whether or not Parkinson's is the reason for admission.)

All in-patient referrals are done through the care flow system or telephone call referrals.

## Self-administration of medication policies

Q1. Does the Trust have a self-administration of medication policy? If a policy does not currently exist, are there any current plans to implement one? Yes we have a self-administration policy.

Q3. If a self-administration policy is not implemented, why is this the case?  $\ensuremath{\text{NA}}$ 

Q2. If a self-administration policy is in place what systems and protocols are in place to a) ensure full and effective implementation and b) monitor its implementation?

The self-administration policy is currently due for review; a recent review of the selfadministration of insulin policy will feed into this. A working group of nurses (ward



and Parkinson's) and pharmacy staff will be established to take the review forward, with a multidisciplinary led approach.

## **Carers**

Q1. Does the Trust have a policy that allows carers to visit the person with Parkinson's they care for outside of visiting hours?

The Trust does have a Carers policy which allows open visiting outside of 'normal' times. The Trust also encourages and prompts the implementation of 'John's Campaign' which, although predominantly highlights patients with dementia & open access for carers, recognises the benefits of extended visiting/access for patients with specific care needs. Although our Carers policy does not stipulate specific conditions it is written to be on an individual patient needs requirement.

Q2. What training do ward staff receive to ensure they fully understand how a carer can support an inpatient with things such as mobilising and their medication regime etc?

The Carers policy is discussed as part of the adult safeguarding training which is role specific for all adult in-patient staff.

Q3. What systems and protocols are in place for ward staff to work with carers supporting the person with Parkinson's in hospital to ensure flexibility when the need arises? The Carers policy allows for this flexibility.

## Practical resources

Q1. Is the Trust aware of the practical resources available from Parkinson's UK to support Parkinson's patients getting their medication on time (e.g. laminate bedside clocks, washbags) and how to access these resources?

An in-patient Parkinson's Disease guideline is in place to assist with some of the issues. Leaflets are available in outpatient's departments and some inpatient areas.

## Q2. Does the Trust make use of these practical resources?

These are used in outpatient departments and some inpatient areas. There is an ongoing QIP to roll these practical resources out across the Trust.

## Patient safety incidents

Q1. Are incidents of a) missed Parkinson's medication doses and b) delays to the administration of doses of Parkinson's medication reported as patient safety incidents through local reporting arrangements?

The Trust has a medication safety group who review all medication incident reports (via the Trust's incident reporting system, Datix) and particularly any of the critical medications.

Q2. a) How many Parkinson's patient safety incidents relating to medication were recorded in your Trust in the last reporting period?

Q3. How many complaints has the Trust received about missed or delayed administration of Parkinson's medication in a) 2017/2018 and b) 2018/2019 to date?

I can confirm on behalf of the Trust and in accordance with S.1 (1) of the Freedom of Information Act 2000 (FOIA) that we do not collate the information that you have requested. Whilst the Trust records incidents relating to medication, this is not specific to Parkinson's patients.

