Lessons learnt and outcomes delivered from participation in Parkinson's UK physiotherapy audits Fife Health



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Introduction

Parkinson's UK is the national charity for people with Parkinson's. Starting in 2011 they have led four audits of physiotherapy services across the United Kingdom.

Our older peoples physiotherapy department has a cohort of people with Parkinson's who are seen in out and day patient settings. We have participated in all four audits allowing us to track our improvement and service changes.

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Purpose

The physiotherapy section of the Parkinson's UK Audit aims to establish if physiotherapy services are providing quality services for people with Parkinson's, taking into account recommendations made in evidence-based guidelines.

As a participating service our aims are:

- To benchmark our service against the national results
- To utilise the results to establish areas requiring improvement
- To continually reassess changes building from each audit cycle

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Results

In all four audits our patient demographic has been similar to the national figures, allowing benchmarking with some degree of confidence to the overall results. In the audits that measured these outcomes:

- ✓ Our waiting times from referral to treatment were over a fortnight quicker than national averages
- ✓ We matched or exceeded national results with providing an intervention or goal plan
- ✓ We had 100% compliance with using relevant outcome measures

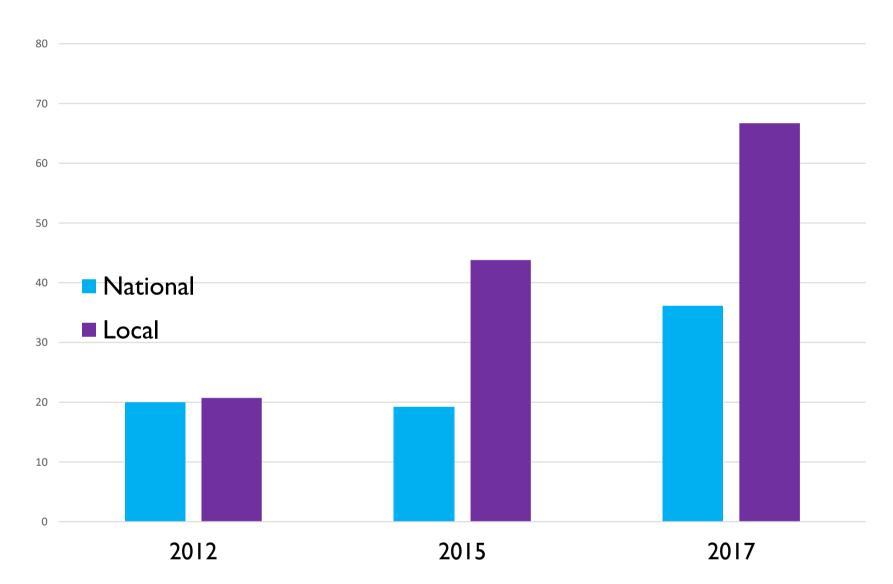


Figure 1: Changes in use of Berg Balance Scale on assessment

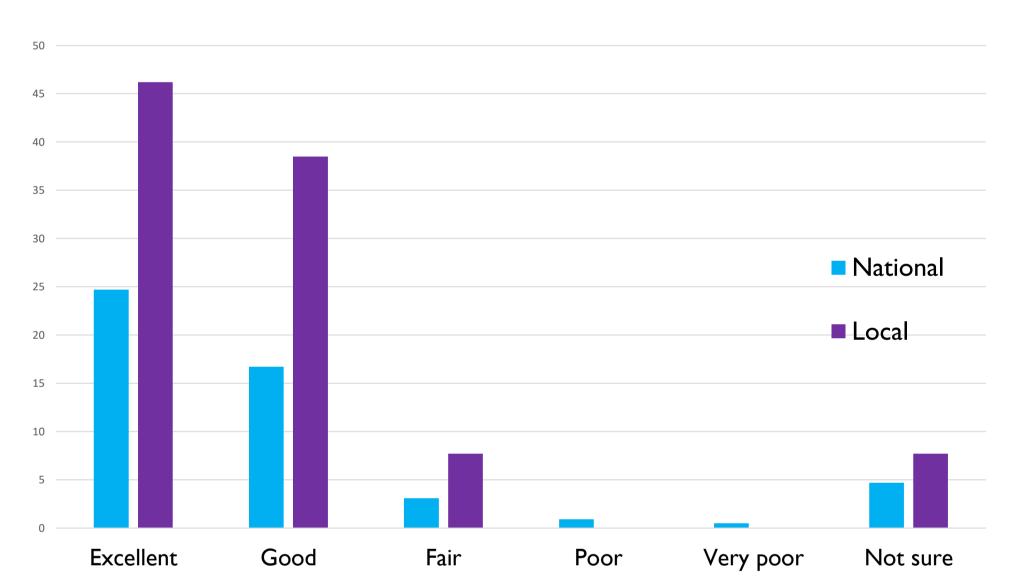


Figure 2: Ranking of the quality of the physiotherapy service in 2017

A patient reported experience measure (PREM) was first included in 2015.

Our team action planning following this resulted in the establishment of a multi disciplinary assessment clinic for those who were newly diagnosed.

In the 2017 PREM clear improvements were seen:

The ability to contact a physiotherapist: 33% -> 46%

The rating of the physiotherapy service as 'Excellent': 16% - 46%

Where responses have indicated an issue, such as being given enough information on diagnosis (from 41% to 38%), we are able to respond with ongoing action planning.

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Conclusion

Benchmarking against the national results has shown that the local service has both strengths and issues that have been addressed over each audit cycle.

We have used the results to develop services that are responsive to local needs and that meet relevant guideline requirements.

Implications

Taking part in nationally organised audits is an effective method of reviewing clinical practice and service outcomes.

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Acknowledgements

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PARKINSON'S UK CHANGE ATTITUDES. FIND A CURE. JOIN US.

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