

Reducing Delays in Prescribing and Administration of Parkinson's Disease (PD) Medication –

The impact of awareness raising, understanding professionals' and patients' perspectives and system change

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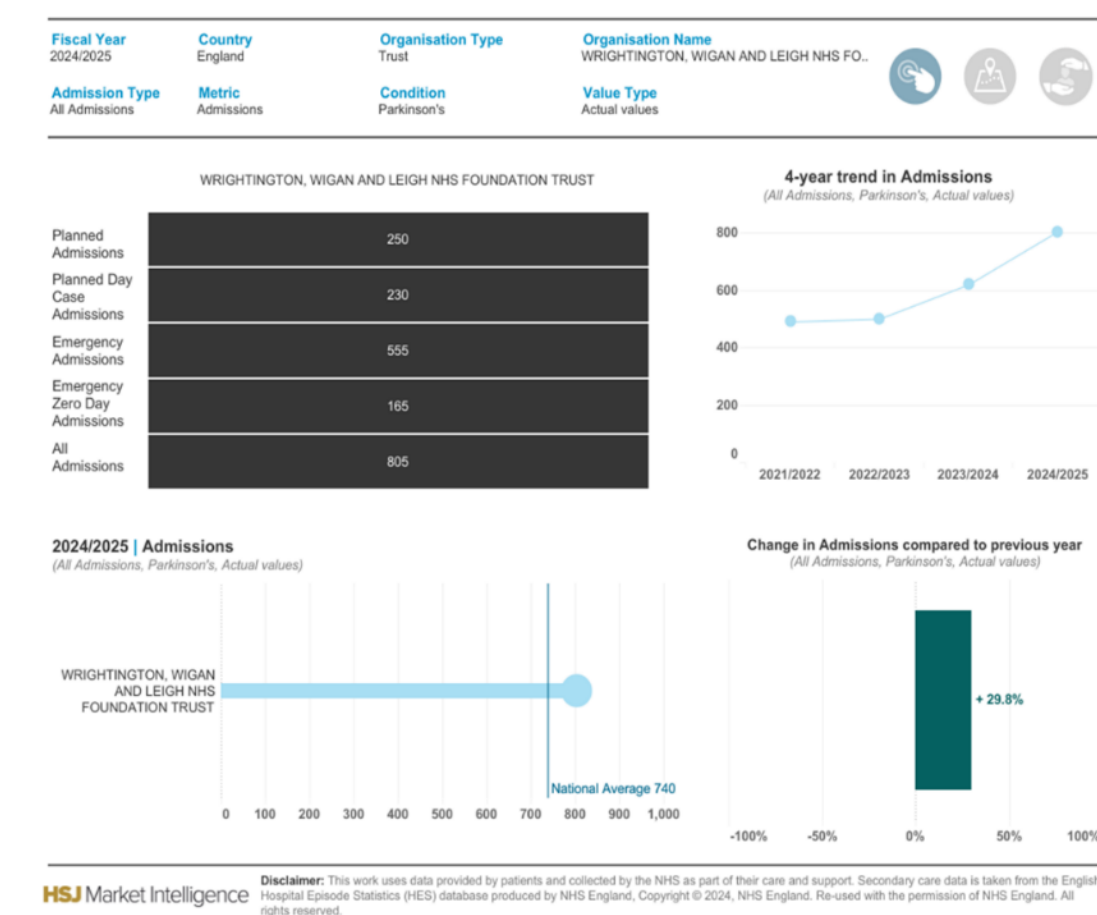


Introduction

Royal College of Emergency Medicine and NHS England define reduction of delays and omissions of critical medication as important strategic objectives.

Data from Parkinson's UK indicate that only 37% of doses of PD medication are delivered on time during hospital stays.

Number of inpatient admissions for patients with Parkinson's Disease (PD) continues to increase year on year. Data from Parkinson's UK shows that in 2024/2025 there were 805 admissions at Wrightington, Wigan and Leigh NHS Teaching Trust an increase of 29.8% from 2023/2024.



The aim of this QI project was to evaluate data from previous 2.5 years and assess effectiveness of our improvement work with reference to PD medication.

Methods

- Utilising hospital electronic reporting system, information was obtained on prescribing and administering of PD medication in 2023 and 2024 which was analysed and shared with Emergency Department and Medical Teams.
- Data on prescribing was obtained for Co-Careldopa and Co-Beneldopa from 01.01.2023 – 31.10.2025
- Questionnaires were sent to nurses, doctors and patients to obtain their perspectives
- Electronic system was updated to include "is the patient on time critical medication (TCM)" question on ED Triage document from 01.07.2025 and analysis of its effect was completed with regards to prescribing of PD medication

Interventions completed

In-depth review of data completed and presented to Emergency Department (ED) and Medical Audit teams including July 23, Nov 23 and June 24. Following on from this action was agreed to build "Time Critical Medication (TCM)" question on ED Triage and ensure that PD patients are identified for a timely medicines reconciliation and prescribing of regular treatments.

Analysis was completed through reviewing clinical informatics records, with a focus on omissions and delays of co-careldopa and co-beneldopa. Our data showed that patients waited for a significant amount of time from presenting to first prescription (average 287mins in 2023 and 301 in 2024) and that significant percentage faced delays in administration of medication (range 34% to 51% not given within 30mins of prescribed time). Education sessions were delivered to nursing and medical teams.

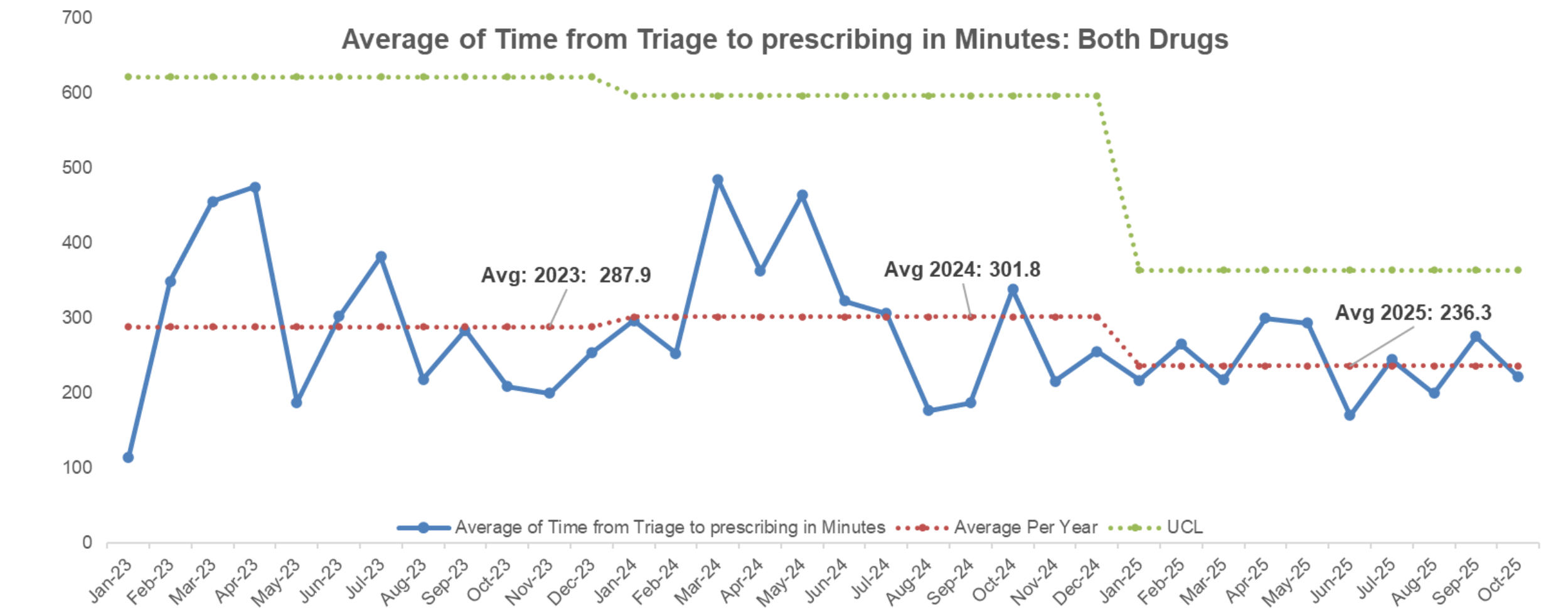
Interventions completed cont...

Analysis of PD specialist input notes was completed which showed majority of patients received a review (range 90-94%). The clinical informatics system in our Trust does not allow identification of patients by clinical diagnosis hence the list depends on PD medication being prescribed. In addition, electronic referral system was introduced for parent teams to access specialist advice.

Nursing and junior doctors completed electronic questionnaires to establish what challenges were present in management of PD medication. Education sessions were delivered in response and highlighting of PD patients on handovers agreed to ensure nurses are aware to administer medication on time. Feedback on patient experience with regards to PD medication was obtained via postal questionnaires which showed an improvement in meds given in ED in comparison to data from 2021.

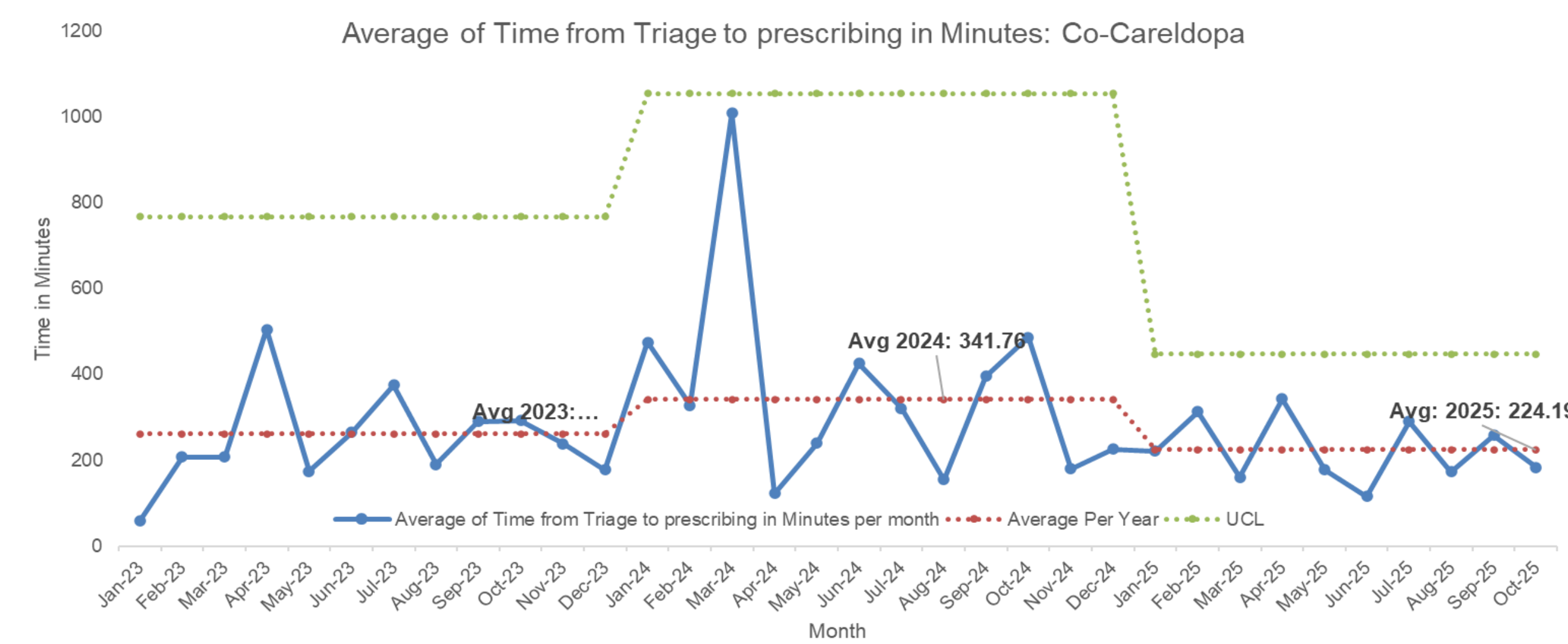
Results cont...

Results average time from triage to prescribing in minutes Co-Careldopa and Co-Beneldopa 2023 - 2025

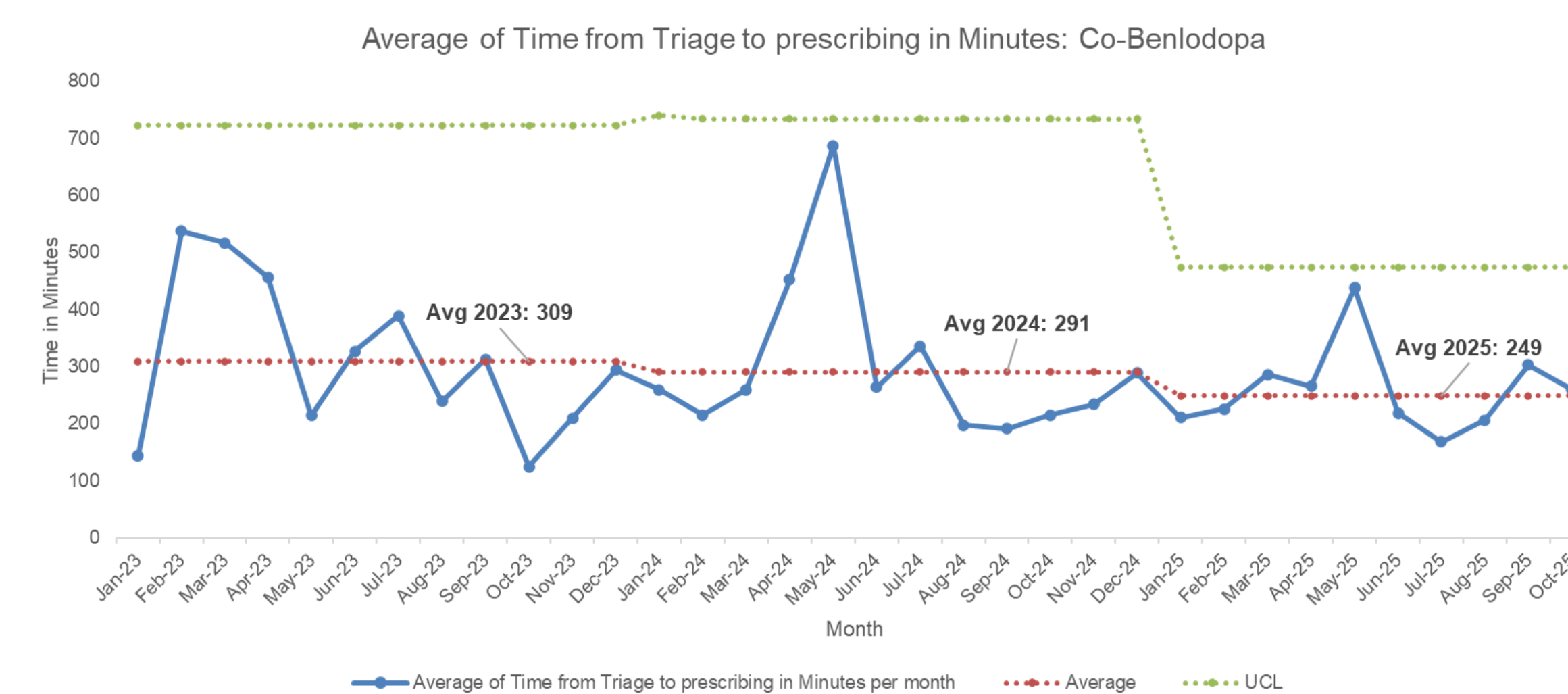


Results

Results average time from triage to prescribing Co-Careldopa 2023 - 2025



Results average time from triage to prescribing Beneldopa 2023 - 2025



Conclusion

Through combination of education, audit, empowerment and system redesign, we have reduced the average mean time from first presentation to first prescription being created from 287minutes in 2023 to 236 minutes in 2025, a decrease of nearly one hour.

Estimated impact of delays and omissions of Parkinson's Medication for Wrightington, Wigan and Leigh NHS Trust is £350,000 for the financial year 2025/2026.

We need to continue this work and report via dashboard on performance in order to continue reducing harm and cost incurred due to omissions and delays of PD medication.

We should fully implement Parkinson's UK 10 recommendations on TCM

	Total Visits	Avg: 2023	Avg: 2024	Avg:2025	Difference in 2023 and 2025
Both Drugs	374	287	301	236	-51
Co-Careldopa	165	261	341	224	-37
Co-Beneldopa	221	309	290	248	-61

	Total Visits	Median 2023	Median 2024	Median 2025	Difference in 2023 and 2025
Both Drugs	374	196	187	184	-12
Co-Careldopa	165	217	196	179	-38
Co-Beneldopa	221	259	186	187	-72