

MAPPING PARKINSON'S DISEASE: POLICY BRIEF ON ACCESS TO HEALTH & SOCIAL CARE PROFESSIONALS

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1. BACKGROUND

The prevalence of Parkinson's disease (PD) will double between 2015 and 2040. There has not been enough investment in PD healthcare services in Ireland. Under-staffing is a problem across all disciplines (NAI, 2021). A key problem is the poor levels of access to health and social care professionals, but especially those with expertise in the assessment and management of PD.

These professions include Physiotherapy, Occupational Therapy, Speech & Language Therapy, Dietician, Psychology, Social Work, etc.

2. METHODS

We have data on clinical therapy access, and patient experiences of same through:

1. National Survey of people with PD (N=1504)
2. PD Service Mapping (N=14)
3. Interviews with people with PD (N=25)

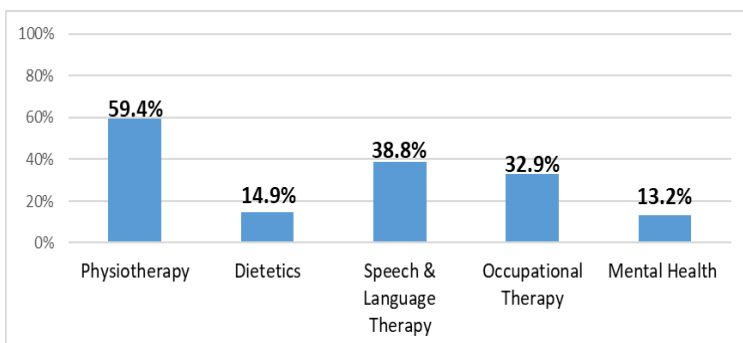
3. KEY FINDINGS

Service Mapping:

There are just 14 specialist PD outpatient clinics nationally, for a population of approximately 12,000 people with PD.

Just 21% of people with PD reported having had any access to a PD nurse specialist since diagnosis, violating NICE Guidance. PD nurses play a key role in coordinating patient care, including facilitating access to the range of clinical therapies.

As can be seen in the figure below, patient-reported (N=1504) access to the range of clinical therapies is universally poor, but especially so in relation to **dietetics** and **mental health services**.



4. ACTIONS REQUIRED

Specialist PD services are under-provided, and where they are provided, are under-resourced.

All specialist clinics should be resourced to provide timely access to the range of clinical therapy disciplines, as appropriate to PD patients' needs.

Increased provision of all clinical therapies is urgently needed.

Dietetics and **mental health services** require the most resourcing currently.

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