

The Royal Free Neurological Rehabilitation Centre

Working Across Service Boundaries: Facilitating Timely Access to Respiratory Management for People with Motor Neurone Disease (MND)

June 2017

Royal Free London 
NHS Foundation Trust

Background and Aims

- Respiratory function significantly predicts both **survival and quality of life** in people with MND
- Early referral to specialist respiratory services at the onset of symptoms is vital to facilitate decisions regarding respiratory management
- The lack of an **easy to use** and **accurate** measure to identify the early signs of respiratory impairment was identified as an area for improvement
- A community based MND respiratory assessment was developed aiming to:
 - Improve **early identification** of patients with respiratory impairments
 - Improve **referral pathway** between community and sleep and ventilation services at the Royal Free Hospital

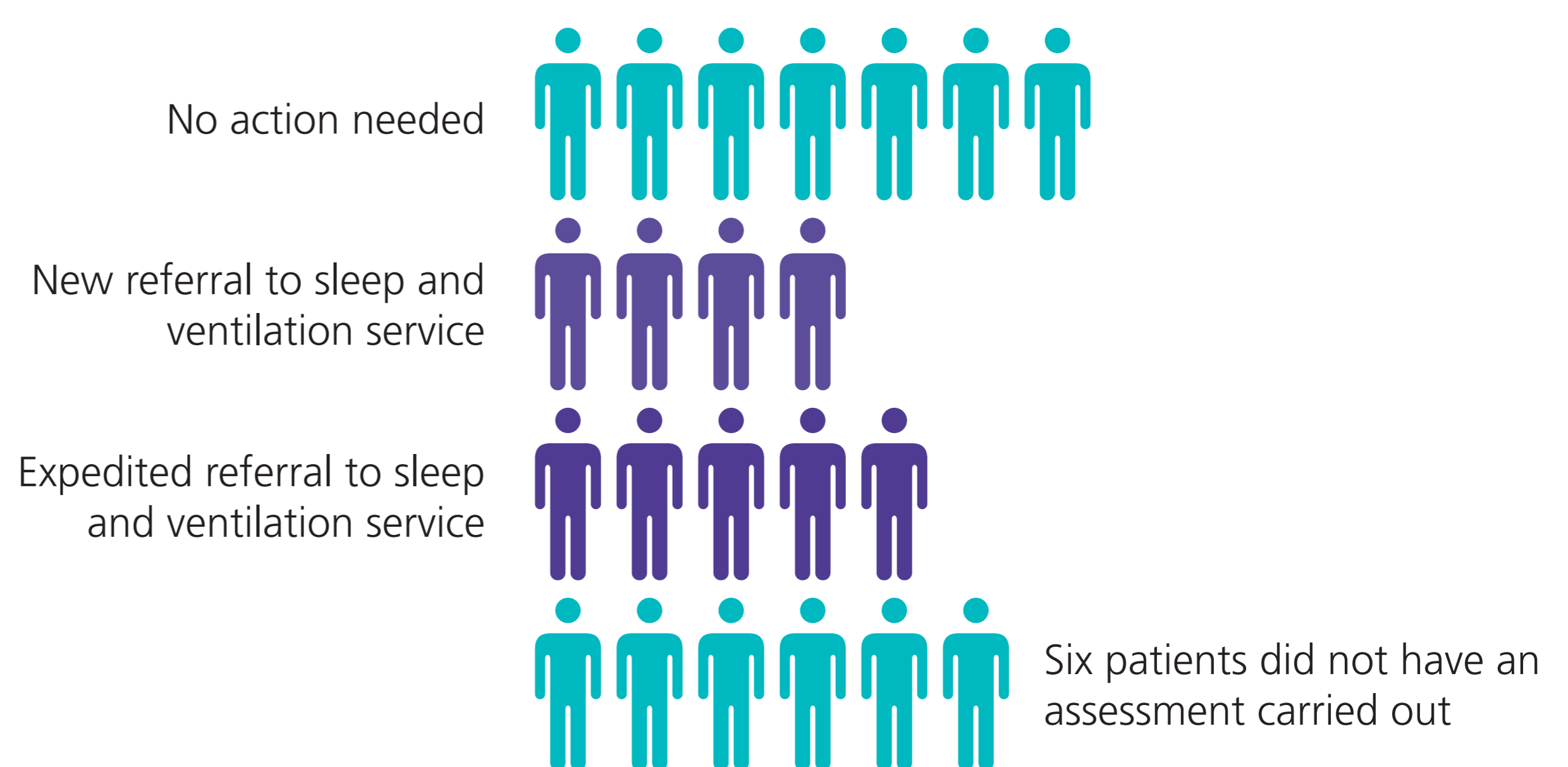
Methods

- Review of NICE MND guidelines (2016) in collaboration with local sleep and ventilation service
- Peak cough flow (PCF) and pulse oximetry identified as best measures to use within a community setting
- Paper work developed to support the pathway
- Teaching provided to community MDT
- Patients encouraged to self-monitor cough strength at home

Results

Assessment resulted in...

Between March 2016 and March 2017 the team supported **22 individuals** with MND



13% of assessments were carried out by **speech and language therapists**

56% of clients assessed had a **new** or **expedited** appointment with the sleep and ventilation service arranged

87% of assessments were carried out by **physiotherapists**

Outcomes

The new assessment and referral pathway has been successful at identifying patients with a changing respiratory status. This has resulted in **earlier referrals** to the sleep and ventilation service or enabled **appointments to be expedited**. The results highlighted the majority of respiratory assessment was carried out by physiotherapist and not all of the patients known to the team had their PCF assessed.

Areas for improvement

Further work is required by the team to promote patient self-monitoring of symptoms and on-going refresher training will be provided to the MDT to increase use of the assessment tool among other disciplines.

References

NICE (2016) Motor Neurone Disease: Assessment and Management; NICE Clinical Guidelines NG42, available from: [HYPERLINK "http://www.nice.org.uk/NG42"](http://www.nice.org.uk/NG42) www.nice.org.uk/NG42

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To provide feedback or for more information please contact the team on 0203 758 2465 or email:

Claudia Canova (physiotherapist) claudia.canova@nhs.net

Malgorzata Krzyszkowska (physiotherapist) malgorzata.krzyszkowska@nhs.net

Stephanie Mansell (Consultant Respiratory Physiotherapist) stephanie.mansell1@nhs.net