

Parkinson's

First name:

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Surname:

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Company:

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Date:

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Please complete the above, in the blocks provided, as clearly as possible.

Completing the details in full will ensure that your certificate bears the correct spelling and date.

The date should be the day you finish & must be written in the DD/MM/YYYY format.

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N.B: We are aware that official practice is to use the terms “service users” or “people using this service” to describe those receiving care. We prefer the term “client” and use it throughout our training package.

Key:



worksheet



important



example

Learning outcomes.

- **Recognise signs and symptoms associated with Parkinsons.**
- **Identify possible causes.**
- **Know what support and help is available.**
- **Develop an understanding of what living with Parkinsons is like.**
- **Develop an understanding of how to care for someone with Parkinsons.**

Fundamental standards.

The fundamental standards are the standards by which CQC will inspect social care. The standards are based on the regulations from the Care Act 2014 and CQC have changed the focus for the purposes of inspection.

The fundamental standards are those standards that no care setting must fall below.

The standards are based on five areas as follows:

- | | |
|--------------------|---|
| Safe. | People are protected from abuse and avoidable harm. |
| Effective. | People's care, treatment and support show quality of life and promote good outcomes, and providers should show evidence to prove it. |
| Caring. | Care should be person centred involving dignity and respect, and compassion. |
| Responsive. | Following correct working procedures as agreed by your workplace and as set out in the client's care plan. |
| Well led. | Management leadership and governance should ensure all of the above happens. Staff training should be recognised and openness and fairness be apparent. |

These areas are known as key lines of enquiry or KLOES. Each KLOE has a set of criteria which CQC use to check whether the fundamental standards are being met.

The fundamental standards are as follows:

- Person centred care.** Ensuring that those receiving the care are at the centre of all decisions.
- Dignity and respect.** Providing the client with dignity and respect in all aspects of their care.
- Need for consent.** Asking the client's permission before carrying out tasks that affect them.
- Safe care and treatment.** Following correct working procedures as agreed by your workplace and the client's care plan.
- Safeguarding service users from abuse.** Following agreed working and safeguarding procedures and being aware of signs and symptoms.
- Meeting nutritional needs.** Being aware of dietary needs, working with the care plan, ensuring clients have the right equipment and conditions to eat.
- Cleanliness, safety and suitability of premises and equipment.** Carrying out required checks of premises and equipment, implementing cleaning rotas and carrying out safety checks.
- Receiving and acting on complaints.** Having a complaints policy and procedure in place that is accessible to all and act in accordance with the policy when dealing with complaints.
- Good governance.** Ensuring that all aspects of the workplace is overseen and policies and procedures are implemented and monitored regularly.
- Staffing.** Fit and proper persons employed.
Fit and proper person requirement for Directors is followed.
- Duty of candour.** Relevant information must be volunteered to all persons who have or may have been harmed by the provision of services, whether or not the information has been requested and whether or not a complaint or a report about that provision has been made.

Our Redcrier manuals will provide your staff with training to support attainment of the fundamental standards.

Introduction.

Parkinson's is the second most common age related neuro degenerative disorder. It is estimated that more than 10 million people worldwide are living with Parkinson's. In the UK 1 in every 500 people has Parkinson's, this is an estimated 127,000 people. It is also estimated that only 4% are diagnosed before the age of 50.

Those with Parkinson's usually have the same average life expectancy as those who don't have it, but in the later stages they are more susceptible to life threatening complications. It is also known that 75% of people with Parkinson's also have dementia.

Parkinson's causes problems in the brain and gets progressively worse over time. There is currently no cure, but there are medications and therapies available that can help to manage the condition.

This manual will help you to understand what Parkinson's is, what it is like to live with it and how this impacts on the care you provide. We also hope that you will see that as with all conditions, each person with Parkinson's is an individual and their experience of the condition will be unique to them.

Unit One

Parkinsons: what it is and possible causes.

Parkinsons is a neuro degenerative disease. This means it primarily affect the neurons in the human brain. Neurons are the building blocks of the nervous system which includes the brain and spinal cord. When these building blocks start to die, the brain and spinal cord can't work in the same way as they used to.

The neurons or nerve cells in the brain produce a chemical called dopamine which acts as a messenger between parts of the brain and the nervous system that control and co-ordinate body movements. It is essential for smooth movement. When the cells die or become damaged, less dopamine is produced and cause lessening of control and co-ordination of body movements, so they become slow and less controllable.

80% of brain cells in the part of the brain called the Substantia Nigra need to die before Parkinsons begins to develop.

In 1817 James Parkinson wrote an essay on the shaking palsy, he named it paralysis agitans. He described the tremors occurring at rest, abnormal posture and walking, diminished muscle strength and the progression of the condition over time. Over the years the term Paralysis agitans was used for many similar conditions and so in 1865 William Sanders proposed that the condition be renamed as Parkinsons disease after James Parkinson. Today it is often referred to as just Parkinsons

Parkinsonism.

Parkinsons comes under the umbrella of Parkinsonism. Parkinsonism describes the main symptoms of tremors, muscle rigidity and slowness of movement which are characteristic of Parkinsons.

Parkinsons is the most common type of parkinsonism and there is no specific cause, but there are other rarer conditions with similar symptoms where the cause is known. One condition is drug induced Parkinsonism, caused by taking certain medications and often improves when the medication is stopped. There are also other progressive Parkinsonism conditions that are caused by a type of protein called Tau which is normally broken down by the body but in these cases isn't. The build up of protein causes brain cells to die or become damaged. A third type of Parkinsonism is Cerebrovascular which is caused by a series of small strokes which cause parts of the brain to die.



Parkinsons dementia.

Parkinsons dementia is an impairment in thinking and reasoning and is associated with Parkinsons. It affects mental functions including memory and the ability to pay attention, make reasoned judgements and planning steps to complete tasks. Muffled speech, delusions and hallucinations are common symptoms. Parkinsons has similarities with Dementia with Lewey bodies and Alzheimers.

What causes Parkinsons.

As yet the cause is unknown, it is known that Parkinsons can run in families as a result of a faulty gene, but this is rare. It is known that reduction in dopamine causes nerve cells to die, but it is unknown why this happens. A lot of research has been conducted to explore whether environmental factors such as pesticides or herbicides used in farming may contribute, but this is currently inconclusive. Research to identify causes and therefore develop new treatments is ongoing and it is thought we are getting nearer to finding a treatment to reverse symptoms such as tremors or even develop new drugs that can protect nerve cells from damage.

What are the three main symptoms of Parkinsons?

Parkinson's

Parkinson's is slow and progressive and currently there is no cure however if it is managed, there is some evidence to show that the symptoms can be controlled significantly in some cases.

A person with Parkinson's will have symptoms they need to work with and there are treatments and therapies to help and support them in this. Life expectancy is unlikely to change because a person has Parkinson's.

Imagine you had to explain to someone what Parkinson's is in simple terms. Write down what you would say.

Diagnosis.

Because there is no known cause of Parkinson's, diagnosis is usually based on symptoms, medical history and a detailed physical examination. Specialists involved may include a neurologist and a geriatrician. The individual may also be given the medication Levodopa. If the symptoms are greatly reduced or disappear this is the confirmation that the individual has Parkinson's.