Case study: Parkinson's Disease exercise group

What is this case study about?

This case study is about the Bolton NHS Foundation Trust's 8-week Parkinson's Disease exercise programme and connected pilot, prescribing physical activity in the local community on completion of the programme.

What does the approach aim to do?

- Improving access to activity shortly after a Parkinson's diagnosis, to set up or embed good habits early on and to support people through the progression of the condition.
- Support service-users to transition into exercise in their local communities from the 8-week NHS programme, in order to continue being active.



How does the approach work?

The 8-week group is an exercise-led programme based in healthcare facilities, funded as part of the NHS services. It includes circuit sessions paired with advice sessions. The first and last sessions focus on outcomes and measures, whilst the middle six weeks focus on exercise.

When patients approach the end of the 8-week programme, they are 'prescribed' further activity in the local community. Local activities are generally subsidised, and come at a small cost to the patients. The 'prescribing' team has a further check-in with the individual six weeks later to understand how they are progressing.



"The cost is small, and as the patients see the benefit of the programme, they don't consider the cost to be a barrier. If there was more funding in the community though, that would enable further offering."

What makes this approach work?

People: The commitment of staff and willingness of patients has a significant impact. The team is reaching out to people and going beyond organisational boundaries to work collaboratively across the NHS and other organisations.





Group activities: Seeing a group of patients together (rather than individually) helps create a smoother process and reduce overall therapist hours.

Condition: Piloting the initiative with Parkinson's patients has made it easier to test the 'prescription' model, as there is more control within the system and a level of similarity and shared advice among individuals.

Impact of physical activity: There is strong evidence of the positive impact of physical activity on healthcare outcomes of patients with Parkinson's Disease, so there is motivation within the system and patients. For example, the NHS is working towards increasing the availability of supportive therapies for Parkinson's patients¹.

Environment: Healthcare facilities are suitable to the initial programme, however community facilities are better suited to ongoing activity, as they are often more accessible and cater to individual schedules and medication timing.

Who is involved?

Healthcare professionals run the classes, providing individual advice and education. They are also engaging with community activity providers to enable the prescription approach. For example, they are working with Parkinson's organisations who lead activities in local communities, where referrals had been sporadic in the past.



"We've had a lot of positive feedback from the participants who attended and what we're working to do is find ways of, once patients have done the exercise group with us continuing that exercise in the community."

Opportunities for scaling up

- Leveraging existing structures: This approach presents strong possibilities for scaling up
 or sharing best-practice across different regions and NHS trusts, as it largely operates
 within existing systems and national organisations. For example, patients have access
 to Parkinson's Disease Specialist Nurses, and similar 6-8 week programmes are
 available in other NHS trusts (like the PD Warriors programme in Bristol).
- <u>Parkinson's UK</u> is a respected national organisation and has a <u>directory of local support</u> and <u>activities</u>, making it easier for healthcare professionals to 'prescribe' activities locally). It also offers <u>grants for activity providers</u>.





¹ Parkinson's disease | NHS inform

A similar approach could also be taken in supporting patients with other long-term conditions, which have similar 6-8 week programmes. For example, North East London NHS Foundation Trust's Expert Patient Programme Self-Management Course is open to people with asthma, chronic fatigue, COPD, depression, diabetes, heart disease, MS, HIV, ME, and on-going back pain.

Top ideas for inspiration

- Establish a referral system that provides an overlap between the 8-week programme and community activity, to avoid a stop-start experience.
- Avoid using the term 'prescription' in similar referral initiatives, as its specific use within the system has presented challenges.

