

Dysphagia in people with Parkinson's Disease: Reviewer Assessment Form

A. Reviewer details

1a. A1a. Reviewer details

1b. A1b. Date of reviewer meeting

2. A2. Site ID

B. Patient details

1. B1. Age at time of admission

2. B2. Sex

Male

Female

3. B3. Based on the case notes, using the most recent baseline measure, what was the Hoehn and Yahr Score?

Please see definitions

Stage 1

Stage 2

Stage 3

Stage 4

Stage 5

Unknown

Unable to answer

4. B4. Based on the case notes, at the time of the last clinical assessment, what was the Unified Parkinson's Disease Rating Scale (UPDRS-MDS) Score?

Please see definitions

Unknown

Value should be no more than 199

5. B5. Based on the case notes, at the time of admission, what stage of care was the patient in?

Please see definitions

Diagnosis

Maintenance

Complex

Endstage

Unknown

1a. C1a. Was the patient referred for this admission to hospital?

- Yes No

1b. If answered "Yes" to [1a] then:

C1b. Who made this referral?

- GP referral Advanced Nurse Practitioner referral
 Community based referral Referred from outpatient clinic
 Unable to answer

If not listed above, please specify here...

1c. If answered "Yes" to [1a] then:

C1c. In your opinion, was there an adequate referral letter?

- Yes
 No
 Unable to answer
 NA - Referral letter not included in the case notes

1d. If answered "Yes" to [1a] and "No" to [1c] then:

C1d. What was missing?

- The medical case history
 Comorbidities
 Current medications
 Assessment of the PD
 Level of risk in the community
 Swallowing assessment
 Details of any action plan for care in the community
 Details of any advance decision planning
 Unknown

Please specify any additional options here...

2. C2. Was dysphagia present in this patient on arrival?

- Yes No Unable to answer

3a. C3a. Is there evidence in the case notes that the patient presented with information relating to their present level of dysphagia on arrival?

- Yes No
 Unable to answer NA - Dysphagia not present on arrival

3b. If answered "Yes" to [3a] then:

C3b. In your opinion, was the subsequent initial management on arrival correct?

- Yes No Unable to answer

**3c. If answered "Yes" to [3a] and "No" to [3b] then:
C3c. Please expand on your answer**

4. C4. Is there evidence in the case notes that the patient presented with information relating to their present drug dosage and mode of administration?

- Yes No Unable to answer

In the case notes relating to the initial assessment, is there evidence of the following areas being assessed?

5a. C5a. How the patient was managing at home?

- Yes No Unable to answer

5b. C5b. Whether the patient had difficulty with speech?

- Yes No Unable to answer

5c. C5c. Whether the patient had difficulty with controlling saliva?

- Yes No Unable to answer

5d. C5d. Medication history and compliance?

- Yes No Unable to answer

5e. C5e. Any side effects associated with medications?

- Yes No Unable to answer

5f. C5f. Cognition?

- Yes No Unable to answer

5g. C5g. The presence of dysphagia

- Yes No Unable to answer

6. C6. Is there any evidence in the case notes that the patient's family or carers provided information on admission regarding the patient's medical history?

- Yes No Unable to answer

7a. C7a At initial assessment, in your opinion, was there a delay in recognising dysphagia?

- Yes No
 Unable to answer NA - Dysphagia not present on arrival

**7b. If answered "Yes" to [7a] then:
C7b. Did this affect outcome?**

- Yes No Unable to answer

**7c. If answered "Yes" to [7a] and "Yes" to [7b] then:
C7c. Please expand on your answer**

8. C8. Was a swallowing screening undertaken within 4 hours of arrival?

- Yes No Unable to answer

9a. C9a. In your opinion, was the initial assessment satisfactory?

- Yes No Unable to answer

**9b. If answered "No" to [9a] then:
C9b. Please expand on your answer**

10a.C10a. Is there any evidence in the case notes that the patient was under the review of a Parkinson's disease service in the community?

- Yes No Unable to answer

**10b.If answered "Yes" to [10a] then:
C10b. Is there any evidence of MDT involvement in the care of the patient in the community?**

- Yes No Unable to answer

11a.C11a. Is there a record in the case notes of a nutritional screening undertaken on arrival?

- Yes No Unable to answer

**11b.If answered "Yes" to [11a] then:
C11b. In your opinion, was this adequate?**

- Yes No Unable to answer

**11c. If answered "No" to [11b] then:
C11c. Please expand on your answer**

12a. C12a. Was a MUST score calculated on arrival?

Please see definitions

- Yes No Unable to answer

12b. If answered "Yes" to [12a] then:

C12b. In your opinion, was the correct score calculated?

- Yes No Unable to answer

12c. If answered "Yes" to [12a] then:

C12c. In your opinion, was the correct action to be taken identified as a result of MUST screening?

- Yes No Unable to answer

13a. C13a. Was the patient referred to SLT following a swallowing screen on arrival?

- Yes No NA Unable to answer

13b. If answered "No" to [13a] then:

C13b. Should they have been?

- Yes No Unable to answer

13c. If answered "Yes" to [13b] then:

C13c. Please expand on your answer

14. C14. Based on the case notes, what was the patient's level of function as assessed using the Rockwood Frailty Score on arrival?

Please see definitions

- | | | |
|---|--|---|
| <input type="radio"/> 1. Very fit | <input type="radio"/> 2. Well | <input type="radio"/> 3. Managing well |
| <input type="radio"/> 4. Vulnerable | <input type="radio"/> 5. Mildly frail | <input type="radio"/> 6. Moderately frail |
| <input type="radio"/> 7. Severely frail | <input type="radio"/> 8. Very severely frail | <input type="radio"/> 9. Terminally ill |
| <input type="radio"/> Unknown | <input type="radio"/> Not documented | |

15a.C15a. Was a pain assessment undertaken on arrival?

Yes

No

Unable to answer

NA

15b.If answered "Yes" to [15a] then:

C15b. In your opinion, was this adequate?

Yes

No

Unable to answer

15c.If answered "No" to [15b] then:

C15c. Please expand on your answer

D. Admission to the ward

1a. D1a. In your opinion, was the patient admitted under the correct specialty?

Yes

No

Unable to answer

1b. If answered "No" to [1a] then:

D1b. Please expand on your answer

2a. D2a. In your opinion, was the patient admitted to the appropriate ward?

Yes

No

Unable to answer

2b. If answered "No" to [2a] then:

D2b. Please expand on your answer

3a. D3a. In your opinion, was the patient assessed by the appropriate seniority clinician (ST3+) on admission?

Yes

No

Unable to answer

3b. If answered "No" to [3a] then:

D3b. Please expand on your answer

E. Assessment of swallowing

1a. E1a. Was a formal assessment of swallowing undertaken during this admission?

- Yes No Unable to answer

1b. If answered "Yes" to [1a] then:

E1b. In your opinion, was an adequate history recorded?

- Yes No Unable to answer

1c. If answered "Yes" to [1a] then:

E1c. Were any formal tests/ investigations undertaken?

- Yes No Unable to answer

1d. If answered "Yes" to [1c] then:

E1d. Were the tests/investigations appropriate?

- Yes No Unable to answer

1e. If answered "No" to [1d] then:

E1e. What should have been undertaken?

1f. If answered "Yes" to [1c] then:

E1f. Was this undertaken by an appropriately trained individual?

- Yes No Unable to answer

1g. If answered "No" to [1f] then:

E1g. Please expand on your answer

1h. If answered "No" to [1a] then:

E1h. If a formal assessment of swallowing was not undertaken, should one have been?

- Yes No Unable to answer

2a. E2a. In your opinion, was the presence of dysphagia assessed adequately during this admission?

- Yes No Unable to answer NA

**2b. If answered "No" to [2a] then:
E2b. Please expand on your answer**

3. E3. At any point during this admission, was dysphagia documented as a symptom?

Yes No Unable to answer

Dysphagia documented as a symptom

4a. If answered "Yes" to [3] then:

E4a. In your opinion, was there a delay in recognising dysphagia?

Yes No Unable to answer

4b. If answered "Yes" to [3] and "Yes" to [4a] then:

E4b. Please expand on your answer

4c. If answered "Yes" to [3] and "Yes" to [4a] then:

E4c. In your opinion, did this affect outcome?

Yes No Unable to answer

4d. If answered "Yes" to [3] and "Yes" to [4a] and "Yes" to [4c] then:

E4d. Please expand on your answer

5a. If answered "Yes" to [3] then:

E5a. In your opinion, was dysphagia managed appropriately throughout this admission?

Yes No Unable to answer

**5b. If answered "Yes" to [3] and "No" to [5a] then:
E5b. Please expand on your answer**

**5c. If answered "Yes" to [3] and "No" to [5a] then:
E5c. In your opinion, should other therapy have been considered?**

Yes No Unable to answer

**5d. If answered "Yes" to [3] and "No" to [5a] and "Yes" to [5c] then:
E5d. Please expand on your answer**

Dysphagia not documented as a symptom

**6a. If answered "No" to [3] then:
E6a. Is there evidence in the case notes that a diagnosis of dysphagia was missed?**

Yes No Unable to answer

**6b. If answered "No" to [3] and "Yes" to [6a] then:
E6b. Please give further details**

Following admission

1a. F1a. Was the patient referred to SLT following admission?

- Yes No NA Unable to answer

1b. If answered "No" to [1a] then:

F1b. Should they have been?

- Yes No Unable to answer

1c. If answered "Yes" to [1b] and "No" to [1a] then:

F1c. Please expand on your answer

1d. If answered "Yes" to [1a] then:

F1d. In your opinion, was there a delay in referral to SLT?

- Yes No Unable to answer NA

1e. If answered "Yes" to [1a] then:

F1e. In your opinion, was there a delay in SLT assessment?

- Yes No Unable to answer NA

1f. If answered "Yes" to [1e] then:

F1f. Please expand on your answer.

1g. F1g. In your opinion, was SLT decision making appropriate?

- Yes No Unable to answer NA

**1h. If answered "No" to [1g] then:
F1h. Please expand on your answer**

2a. F2a. Was the patient referred to dietetics following admission?

- Yes No Unable to answer NA

**2b. If answered "No" to [2a] then:
F2b. Should they have been?**

- Yes No Unable to answer

**2c. If answered "No" to [2a] and "Yes" to [2b] then:
F2c. Please expand on your answer.**

2d. If answered "Yes" to [2a] then:

F2d. In your opinion, was there a delay in referral to dietetics?

- Yes No Unable to answer NA

2e. F2e. In your opinion, was there a delay in dietetic assessment?

- Yes No Unable to answer NA

2f. If answered "Yes" to [2e] then:

F2f. Please expand on your answer

2g. F2g. In your opinion, was dietitian decision making appropriate?

- Yes No Unable to answer NA

**2h. If answered "No" to [2g] then:
F2h. Please expand on your answer.**

3a. F3a. Was the patient referred to the nutrition team?

Yes No Unable to answer NA

**3b. If answered "No" to [3a] then:
F3b. Should they have been?**

Yes No Unable to answer

**3c. If answered "No" to [3a] and "Yes" to [3b] then:
F3c. Please expand on your answer.**

3d. If answered "Yes" to [3a] then:

F3d. In your opinion, was there a delay in referral to the nutrition team following admission?

Yes No Unable to answer NA

3e. F3e. In your opinion, was there a delay in the nutrition team's assessment?

Yes No Unable to answer NA

3f. If answered "Yes" to [3e] then:

F3f. Please expand on your answer..

3g. F3g. In your opinion, was the nutrition team's decision making appropriate?

Yes No Unable to answer NA

**3h. If answered "No" to [3g] then:
F3h. Please expand on your answer**

4a. F4a. Was the patient referred to OT following admission?

Yes No NA Unable to answer

**4b. If answered "No" to [4a] then:
F4b. Should they have been?**

Yes No Unable to answer

**4c. If answered "No" to [4a] and "Yes" to [4b] then:
F4c. Please expand on your answer.**

4d. If answered "Yes" to [4a] then:

F4d. In your opinion, was there a delay in referral to OT?

Yes No Unable to answer NA

4e. F4e. In your opinion, was there a delay in OT assessment?

Yes No Unable to answer NA

4f. If answered "Yes" to [4e] then:

F4f. Please expand on your answer

4g. F4g. In your opinion, was OT decision making appropriate?

Yes No Unable to answer NA

**4h. If answered "No" to [4g] then:
F4h. Please expand on your answer**

5a. F5a. Was the patient referred to physiotherapy following admission?

Yes No NA Unable to answer

**5b. If answered "No" to [5a] then:
F5b. Should they have been?**

Yes No Unable to answer

**5c. If answered "No" to [5a] and "Yes" to [5b] then:
F5c. Please expand on your answer.**

5d. If answered "Yes" to [5a] then:

F5d. In your opinion, was there a delay in referral to physiotherapy?

Yes No Unable to answer NA

5e. F5e. In your opinion, was there a delay in physiotherapy assessment?

Yes No Unable to answer NA

5f. If answered "Yes" to [5e] then:

F5f. Please expand on your answer.

5g. F5g. In your opinion, was physiotherapy decision making appropriate?

Yes No Unable to answer NA

**5h. If answered "No" to [5g] then:
F5h. Please expand on your answer**

6a. F6a. Was the patient referred to the Parkinson's Disease team during this admission?

Yes No NA Unable to answer

**6b. If answered "No" to [6a] then:
F6b. Should they have been?**

Yes No Unable to answer

**6c. If answered "No" to [6a] and "Yes" to [6b] then:
F6c. Please expand on your answer**

6d. If answered "Yes" to [6a] then:

F6d. In your opinion, was there a delay in referral to the PD team?

Yes No Unable to answer NA

6e. F6e. In your opinion, was there a delay in the PD team's assessment?

Yes No Unable to answer NA

6f. If answered "Yes" to [6e] then:

F6f. Please expand on your answer.

6g. F6g. In your opinion, was the PD team's decision making appropriate?

Yes No Unable to answer NA

**6h. If answered "No" to [6g] then:
F6h. Please expand on your answer.**

7a. F7a. In your opinion, was the referral process between specialties adequate during this admission?

- Yes No Unable to answer

**7b. If answered "No" to [7a] then:
F7b. Please give reason(s) for your answer**

8a. F8a. In your opinion, was the ongoing review and decision making appropriate?

- Yes No Unable to answer

**8b. If answered "Yes" to [8a] then:
F8b. Did it take into account any advance directive or advance care plan?**

- Yes No NA Unable to answer

**8c. If answered "No" to [8a] then:
F8c. Did this impact on outcome?**

- Yes No Unable to answer

**8d. If answered "No" to [8a] then:
F8d. Please give further details**

9a. F9a. Is a management plan documented in the case notes?

- Yes No Unable to answer

**9b. If answered "Yes" to [9a] then:
F9b. In your opinion, was this appropriate?**

- Yes No Unable to answer

**9c. If answered "Yes" to [9a] then:
F9c. Was this followed?**

- Yes No Unable to answer
-

10a.F10a. Was a critical care opinion sought at any stage of the admission to aid decision making?

- Yes No Unable to answer

**10b.If answered "No" to [10a] then:
F10b. In your opinion should a critical care opinion have been sought?**

- Yes No Unable to answer
-

11. F11. Is there evidence in the case notes that the patient's family or carers were involved in the delivery of care of the patient on the ward?

- Yes No Unable to answer
-

12a.F12a. In your opinion, was there adequate shared decision making between the patient and professionals?

- Yes No Unable to answer

12b.F12b. Was the patient's capacity assessed?

- Yes No Unable to answer

**12c.If answered "No" to [12b] then:
F12c. Was this because the patient lacked capacity?**

- Yes No Unable to answer

**12d.If answered "No" to [12b] then:
F12d. Please expand on your answer**

12e.F12e. In your opinion, was there adequate shared decision making between the patient's family and professionals?

- Yes No Unable to answer
-

13a.F13a. In your opinion, was an appropriate MDT discussion undertaken during this patient's admission?

- Yes No Unable to answer NA

**13b.If answered "No" to [13a] then:
F13b. In your opinion, did the lack of an MDT discussion affect outcome?**

- Yes No Unable to answer

**13c. If answered "Yes" to [13b] then:
F13c. Please expand on your answer**

**13d. If answered "Yes" to [13a] then:
F13d. As a result of MDT discussions were any goals set/ specific goals identified?**

- Yes No Unable to answer

**13e. If answered "No" to [13d] then:
F13e. Should there have been?**

- Yes No Unable to answer

14a. F14a. Was the patient identified as being frail during the admission?

- Yes No Unable to answer

14b. F14b. Is there evidence in the case notes that a formal frailty assessment was undertaken during the admission?

- Yes No Unable to answer

**14c. If answered "Yes" to [14b] then:
F14c. In your opinion, was this satisfactory?**

- Yes No Unable to answer

**14d. If answered "No" to [14c] then:
F14d. Please expand on your answer**

15a. F15a. Is there a statement in the case notes detailing the patient's resuscitation status?

- Yes No Unable to answer

**15b. If answered "Yes" to [15a] then:
F15b. What was the patient's resuscitation status?**

- For Resuscitation Do Not Attempt Resuscitation

16a. F16a. Is there evidence in the case notes that a pain assessment was undertaken following admission?

- Yes No Unable to answer

**16b.If answered "Yes" to [16a] then:
F16b. In your opinion, was this adequate?**

- Yes No Unable to answer

**16c.If answered "No" to [16b] then:
F16c. Please expand on your answer?**

17. F17. Is there evidence in the case notes that a MUST score was recorded on a weekly basis?

Please see definitions

- Yes No Unable to answer
 NA - Admission < 1 week

18a.F18a. In your opinion, was the ongoing nutritional assessment of the patient acted on appropriately?

- Yes No Unknown

**18b.If answered "No" to [18a] then:
F18b. Please expand on your answer**

19a.F19a. Is there evidence in the case notes, that during the admission the patient required help with eating and drinking?

- Yes No Unable to answer NA

**19b.If answered "Yes" to [19a] then:
F19b. Is there evidence in the case notes that someone was available to assist with this?**

- Yes No Unable to answer

20a.F20a. Is there evidence in the case notes, that during the admission the patient's oral hygiene was managed?

- Yes No Unable to answer

**20b.If answered "Yes" to [20a] then:
F20b. In your opinion, was this managed appropriately?**

- Yes No Unable to answer

21a.F21a. Is there any evidence in the case notes that the patient was made nil by mouth following admission?

- Yes No Unable to answer

21b.If answered "Yes" to [21a] then:

F21b. Is there documented evidence in the case notes as to why the patient was made nil by mouth?

- Yes No Unable to answer

21c.If answered "Yes" to [21a] and "Yes" to [21b] then:

F21c. Why was the patient made NBM?

- Dysphagia related issue Unable to answer

Please specify any additional options here...

21d.If answered "Yes" to [21a] then:

F21d. In your opinion, was this appropriate?

- Yes No Unable to answer

21e.If answered "Yes" to [21a] then:

F21e. In your opinion, was medication managed appropriately?

- Yes No Unable to answer
-

22a.F22a. Was an NG tube inserted during this admission for feeding/ nutrition/ hydration?

- Yes No Unable to answer

22b.If answered "Yes" to [22a] then:

F22b. In your opinion, was there any delay in the NG tube being inserted?

- Yes No Unable to answer

22c.If answered "Yes" to [22a] then:

F22c. In your opinion, was medication managed appropriately?

- Yes No Unable to answer
-

23a.F23a. Was an NJ tube inserted during this admission for feeding/ nutrition/ hydration?

- Yes No Unable to answer

23b.If answered "Yes" to [23a] then:

F23b. In your opinion, was there any delay in the NJ tube being inserted?

- Yes No Unable to answer

23c.If answered "Yes" to [23a] then:

F23c. In your opinion, was medication managed appropriately?

- Yes No Unable to answer
-

24a.F24a. Was a gastrostomy tube inserted during this admission for feeding/ nutrition/ hydration?

- Yes No Unable to answer

24b.If answered "Yes" to [24a] then:

F24b. In your opinion, was there any delay in the gastrostomy tube being inserted?

- Yes No Unable to answer

24c.If answered "Yes" to [24a] then:

F24c. In your opinion, was medication managed appropriately?

- Yes No Unable to answer
-

25. F25. Based on the case notes, is there any evidence of advance planning regarding feeding modalities?

- Yes No Unable to answer NA
-

26a.F26a. In your opinion, was the overall management on the ward adequate?

- Yes No Unable to answer

**26b.If answered "No" to [26a] then:
F26b. Please expand on your answer**

27a.F27a. In your opinion, were there any aspects of the patient's PD that were not managed appropriately?

- Yes No Unable to answer

**27b.If answered "Yes" to [27a] then:
F27b. Please expand on your answer**

28. F28. Please give any additional comments regarding nutrition for this patient during this admission?

G. Dietary modifications

1. G1. In your opinion, did this patient require a modified texture diet whilst an inpatient?

- Yes No Unable to answer

2a. G2a. Is there evidence in the case notes that a modified texture diet was advised?

- Yes - by SLT Yes - by someone else No
 NA Unable to answer

**2b. If answered "Yes - by SLT" or "Yes - by someone else" to [2a] then:
G2b. Is there evidence in the case notes that this was provided?**

- Yes No Unable to answer

**2c. If answered "Yes - by SLT" or "Yes - by someone else" to [2a] and "Yes" to [2b] then:
G2c. Is there any evidence in the case notes that dietary instructions were followed?**

- Yes No Unable to answer

3. G3. In your opinion, did this patient require thickener whilst an inpatient?

- Yes No Unable to answer

4a. G4a. Is there evidence in the case notes that a thickener was advised for addition to fluids?

- Yes - by SLT Yes - by someone else No
 NA Unable to answer

**4b. If answered "Yes - by SLT" or "Yes - by someone else" to [4a] then:
G4b. Is there evidence in the case notes that catering/housekeeping staff were advised of the need for thickener in fluids?**

- Yes No Unable to answer

**4c. If answered "Yes - by SLT" or "Yes - by someone else" to [4a] then:
G4c. Is there evidence in the case notes that thickener advice was communicated to pharmacy?**

- Yes No Unable to answer

**4d. If answered "Yes - by SLT" or "Yes - by someone else" to [4a] then:
G4d. Is there evidence in the case notes that thickener was provided?**

- Yes No Unable to answer

**4e. If answered "Yes" to [4d] then:
G4e. Is there evidence in the case notes that medication was modified appropriately?**

- Yes No Unable to answer

5a. G5a. Is there evidence in the case notes that thickener was prescribed on discharge?

- Yes No NA Unable to answer

**5b. If answered "Yes" to [5a] then:
G5b. Is there evidence in the case notes that the GP was informed that thickener had been prescribed?**

- Yes No Unable to answer

1. H1a Was a drug chart included in this set of case notes?

- Yes No

2a. H2a. On arrival, was a medication history obtained?

- Yes No Unable to answer

**2b. If answered "Yes" to [2a] then:
H2b. How was this ascertained?**

- GP letter Family member/ Carer Blister pack
 Unknown

Please specify any additional options here...

2c. If answered "Yes" to [2a] then:

H2c. Is there evidence in the case notes that this was verified by a pharmacist?

- Yes No Unable to answer

3a. H3a. Is there evidence in the case notes that medicine management was appropriately undertaken?

- Yes No Unable to answer

3b. If answered "No" to [3a] then:

H3b. In your opinion, did this affect outcome?

- Yes No Unable to answer

3c. If answered "No" to [3a] and "Yes" to [3b] then:

H3c. Please expand on your answer

4. H4. Is there evidence in the case notes that the mode of provision of medication was considered if dysphagia was determined?

- Yes No Unable to answer NA

5a. H5a. In your opinion, was there any delay in the administration of medications following admission?

- Yes No Unable to answer

**5b. If answered "Yes" to [5a] then:
H5b. Was this due to?**

- | | |
|--|---|
| <input type="checkbox"/> Non-availability in the ED | <input type="checkbox"/> Non-availability in the pharmacy |
| <input type="checkbox"/> Not available on the ward | <input type="checkbox"/> Patient unable to swallow |
| <input type="checkbox"/> Patient NBM | <input type="checkbox"/> Pharmacy closed |
| <input type="checkbox"/> Out of hours pharmacy on-call unavailable | <input type="checkbox"/> Unable to answer |

Please specify any additional options here...

6a. H6a. Is there evidence in the case notes that the patient's Parkinson's medication was altered during this admission?

- Yes No Unable to answer

**6b. If answered "Yes" to [6a] then:
H6b. In your opinion, was this appropriate?**

- Yes No Unable to answer

**6c. If answered "Yes" to [6a] and "No" to [6b] then:
H6c. Please expand on your answer**

7a. H7a. Is there evidence in the case notes that the patient was prescribed a Rotigotine patch whilst in hospital?

- Yes No Unable to answer

**7b. If answered "Yes" to [7a] then:
H7b. In your opinion, was this clinically appropriate?**

- Yes No Unable to answer

**7c. If answered "Yes" to [7a] then:
H7c. Is there evidence in the case notes that there was a clear plan to review this prior to discharge?**

- Yes No Unable to answer NA

8. H8. Please give any other comments regarding this patient's medication management during this admission?

I. Risk feeding

1a. I1a. Is there documentation in the case notes, that at any point during the admission risk feeding was considered?

- Yes No Unable to answer NA

1b. I1b. Was an SLT involved in the discussion around risk feeding?

- Yes No Unable to answer NA

1c. If answered "Yes" to [1a] then:

I1c. Was risk feeding undertaken?

- Yes No Unable to answer

1d. If answered "Yes" to [1a] and "Yes" to [1c] then:

I1d. Is there evidence in the case notes that this was discussed with the family?

- Yes No Unable to answer

1e. If answered "Yes" to [1a] and "Yes" to [1c] then:

I1e. Is there evidence in the case notes that this was discussed with the patient?

- Yes No Unable to answer

1f. If answered "Yes" to [1c] and "Yes" to [1a] then:

I1f. Is there evidence in the case notes that a mental capacity assessment was undertaken prior to risk feeding?

- Yes No Unable to answer

2a. If answered "Yes" to [1c] then:

I2a. In your opinion, was risk feeding undertaken appropriately?

- Yes No Unable to answer

2b. If answered "Yes" to [1c] and "No" to [2a] then:

I2b. Why not? Please give reason(s) for your answer

1a. J1a. Was the patient dying and not a candidate for active treatment?

- Yes No Unable to answer

1b. If answered "Yes" to [1a] then:

J1b. In your opinion, was end of life care satisfactory?

- Yes No NA Unable to answer

1c. If answered "No" to [1b] then:

J1c. Please expand on your answer

2a. J2. Was there any advance care planning discussed within the last year?

- Yes No Unable to answer NA

2b. J2a. In your opinion, was there the opportunity to commence discussion regarding advance care planning prior to this hospital admission?

- Yes No Unable to answer NA

2c. J2c. Please expand on your answer

1. K1. What was the outcome of this admission?

- Discharged alive Died Unable to answer
-

IF THE PATIENT DIED:

2a. If answered "Died" to [1] then:

K2a. In your opinion, was the death avoidable?

- Yes No Unable to answer

2b. If answered "Died" to [1] and "Yes" to [2a] then:

K2b. Please expand on your answer

IF DISCHARGED ALIVE:

3a. If answered "Discharged alive" to [1] then:

K3a. Was a frailty assessment undertaken at discharge?

- Yes No Unable to answer

3b. If answered "Discharged alive" to [1] and "Yes" to [3a] then:

K3b. Was this:

- A formal score Clinical assessment Unable to answer
-

4. If answered "Discharged alive" to [1] then:

K4. Was a nutritional assessment undertaken on discharge?

- Yes No Unable to answer
-

5a. If answered "Discharged alive" to [1] then:

K5a. Was there evidence of adequate discharge planning?

- Yes No Unable to answer

5b. If answered "No" to [5a] then:

K5b. Please expand on your answer

6a. If answered "Discharged alive" to [1] then:

K6a. Is there any evidence in the case notes that the patient's level of swallowing/ aspiration risk in the community were considered prior to discharge?

- Yes No Unable to answer NA

6b. If answered "Yes" to [6a] then:

K6b. Was an action plan put into place?

- Yes No Unable to answer

6c. If answered "Yes" to [6b] then:

K6c. In your opinion, was this adequate?

- Yes No Unable to answer

7. If answered "Discharged alive" to [1] then:

K7. Is there evidence in the case notes of where the patient was referred to in the community on discharge?

- Yes No Unable to answer

8a. If answered "Discharged alive" to [1] then:

K8a. Is the discharge summary available in the case notes?

- Yes No Unable to answer

8b. If answered "Discharged alive" to [1] and "Yes" to [8a] then:

K8b. What information is provided in the discharge summary?

- | | |
|--|---|
| <input type="checkbox"/> Implemented interventions | <input type="checkbox"/> Treatment period and frequencies |
| <input type="checkbox"/> Measuring tools results | |
| <input type="checkbox"/> The effects of treatment and expected prognosis | |
| <input type="checkbox"/> The administration of medication | <input type="checkbox"/> An advance care plan |
| <input type="checkbox"/> Dietary recommendations | <input type="checkbox"/> Changes in drug sensitivity/ intolerance |
| <input type="checkbox"/> Change in dependency of care | <input type="checkbox"/> Risk feeding information |
| <input type="checkbox"/> Unable to answer | |

Please specify any additional options here...

8c. If answered "Discharged alive" to [1] and "Yes" to [8a] then:

K8c. In your opinion, was the discharge summary adequate?

- Yes No Unable to answer

8d. If answered "No" to [8c] and "Discharged alive" to [1] then:

K8d. Please give reason(s) for your answer

9. If answered "Discharged alive" to [1] then:

K9. Is there evidence in the case notes of communication with those responsible for the care of the patient in the community at discharge?

- Yes No Unable to answer

10. If answered "Discharged alive" to [1] then:

K10. Is there evidence in the case notes that the patient was discharged with a:

- NHS Continuing care package Social care package Neither
 Unable to answer

If not listed above, please specify here...

L. Overall dysphagia care during this admission

1a. L1a. Following your review of the case notes, at any point during this admission did the patient have dysphagia?

- Yes
- No - Dysphagia not present during this admission
- Unable to answer

1b. If answered "Yes" to [1a] then:

L1b. During this admission, in your opinion, was there any delay in recognising dysphagia?

- Yes
- No
- Unable to answer

1c. If answered "Yes" to [1b] then:

L1c. Did this affect outcome?

- Yes
- No
- Unable to answer

1d. If answered "Yes" to [1c] then:

L1d. Please expand on your answer

1e. If answered "Yes" to [1a] then:

L1e. Please grade the overall dysphagia care the patient received during this admission

- Good
- Adequate
- Poor
- Unsatisfactory
- Dysphagia not recognised as a symptom
- Unable to answer

M. Overall assessment of care

Please use the grading system below to grade the overall care each patient received

GOOD PRACTICE: A standard that you would accept from yourself, your trainees and your institution

ROOM FOR IMPROVEMENT: Aspects of CLINICAL care that could have been better

ROOM FOR IMPROVEMENT: Aspects of ORGANISATIONAL care that could have been better

ROOM FOR IMPROVEMENT: Aspects of CLINICAL AND ORGANISATIONAL care that could have been better

LESS THAN SATISFACTORY: Several aspects of clinical and/or organisational care that were well below that you would accept from yourself, your trainees and your institution.

INSUFFICIENT DATA: Insufficient information submitted to NCEPOD to assess the quality of care

1a. M1a. Please grade the overall care the patient received:

- Good practice
- Room for improvement - Clinically
- Room for improvement - Organisationally
- Room for improvement - Clinically and Organisationally
- Less than satisfactory
- Insufficient data

1b. M1b. Please provide reasons for your grade

2a. M2a. Are there any issues from this case that you feel should be highlighted in the final report?

- Yes No

**2b. If answered "Yes" to [2a] then:
M2b. Please expand on your answer**

2c. M2c. Do you think we should consider this as a case study/ vignette in the report?

- Yes No

CAUSE FOR CONCERN

Occasionally NCEPOD will refer cases that have been identified as 'LESS THAN SATISFACTORY' when it is felt that further feedback to the Trust/ Health Board concerned is warranted. This is usually due to an area of concern to the hospital or clinician involved, and not for issues highlighted across the body of case notes.

This process has been agreed by the NCEPOD Steering Group and the GMC. The medical director of the Trust/ Health Board is written to by the Chief Executive of NCEPOD explaining our concerns. This process has been in operation for 10 years and the responses received have always been positive in that they feel we are dealing with the concerns in the most appropriate manner.

3. M3. Do you feel that this case should be considered for such action?

Yes

No