

Time critical medication on time, every time: Ten recommendations for your hospital

- 1) Parkinson's medication is time critical medication. Time critical medications must be given within 30 minutes of when they are due, highlighted as a risk to patient safety and added to every hospital risk register. Compliance must be audited and any dose over 30 minutes reported as an adverse event.
[2023 Every Minute Counts report](#)
[NICE quality statement](#)
- 2) All staff are made aware of the importance of time critical medication for people with Parkinson's. Make this 4 minute video [Time Matters : It's Critical](#) mandatory viewing for all staff.
- 3) Hospitals identify which staff are to undertake further Parkinson's medication training. Recommended online training courses are available via the Parkinson's Excellence Network's Learning Hub:
 - a) [Parkinson's UK 15 minute Educational Video for ward staff](#)
 - b) [Parkinson's UK Medication Educational Module produced by Lancashire Teaching Hospitals](#)
 - c) [Parkinson's medication for staff who don't administer medications](#)
- 4) Hospitals develop, maintain and update a self-administration policy for people with Parkinson's who can administer their own medication. The policy should be reviewed regularly. Read the Parkinson's UK self administration [guide for hospital staff](#). See [NHS Guidance](#) and the [Welsh Medicines Advice Service](#).
- 5) Hospitals identify all people with Parkinson's on time critical medication when they arrive in the Emergency Department (ED) or through an elective or emergency admissions unit. Find out about the [Royal College of Emergency Medicine Time Critical Medications Quality Improvement project](#).
- 6) EDs and admission units develop and update an agreed list of time critical Parkinson's medication and make this visible when patients arrive so they feel empowered to tell staff about the importance of their time critical medication. Download the [Parkinson's UK poster](#). For elective admissions, people with Parkinson's will have prepared themselves. [Parkinson's UK Guidance](#).
- 7) Hospitals have a designated pharmacist responsible for ordering and stocking time critical Parkinson's medication in the ED and on appropriate admission units and wards to ensure they are always available.

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- 8) Where appropriate, the prescribing of a patient's time critical medication should reflect their normal daily schedule and should continue throughout the admission period. Hospital systems, including [electronic prescribing](#) where available, should be maximised to support this.
- 9) Ensure that hospitals have a Standard Operating Procedure / guideline for all time critical medication, including for those people with Parkinson's who are nil by mouth (NBM) or require a nasogastric (NG) tube. This should signpost to one of the [NBM medication calculators](#).
- 10) Ensure hospitals devise and implement a system so that staff can administer all time critical Parkinson's medications outside of normal medication rounds if self-administration is not appropriate. See a [successful example from Leeds Hospitals](#) and [resources available from Parkinson's UK](#).

These recommendations have been developed by the Healthcare Professionals with Parkinson's group in collaboration with the Parkinson's Excellence Network to support health professionals in implementing time critical medications management.

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Further resources are available at
www.parkinsons.org.uk/time-critical-medication-resources