

**A care package was put together to provide the necessary support that was required, however levels of distress still ensued when the patient was not able to talk directly to her daughter and granddaughter**

## ABSTRACT

The patient was first diagnosed with dementia and Parkinson's in 2007. Early years saw her being able more or less, carry out normal routine with the support of her partner, daughter and granddaughter. As years passed her social life became more and more difficult and in 2014 her partner passed away.

Isolation became a major issue for this patient and now she was prone to hallucinations that were distressing. Medication helped, but these episodes and frequent falls, resulted in fractures and broken bones and resulted in her daughter having to give up work to provide the necessary support that was needed. This support was 24 hour and divided between the family operating throughout the day and night.

## SUMMARY

The patient became isolated and lost contact with her close family in Ireland. Her immediate family had less quality time together due to their constant need for 1:1 support 24/7

Technology was introduced as part of her care package which provided a valuable tool for the carers, allowing them to record notes and journals around the day to day care. It created an opportunity to link up with family members and also her GP for routine checks using Skype option. Having this technology to support the care plan has allowed the daughter to return to work.

Other significant improvements have been that she has had less falls, no hospital admissions due to falls.

There have been less occasions to contact me by the family since the technology has been introduced, where historically, I had been receiving SOS calls in between Clinic appointments.

Overall it appears she is much more engaged and has more social interaction and she is not isolated. The improvement in her demeanour meant that she recently travelled to Ireland with her daughter to meet other family members.

Obviously we cannot cure LBD, but to be able to manage symptoms, behaviour and agitation is the key to improving and enhancing the quality of care for patients and their families.

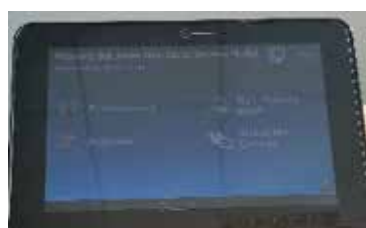
Zoe Ridewood - Parkinson's Nurse Specialist in Neurology at Bradford Royal Infirmary has been supporting this patient and her family since 2011 and has introduced one of the Improvement Network devices known as 'RITA' (Reminiscence Interactive Therapy and Activities



Patient



Patient's Family



GP



Parkinson's Disease  
Nurse Specialist

**This technology has significantly contributed to this patient's overall calmness and has reduced the need for some of her medication.**

The technology has been efficient in facilitating routine appointments via skype for the patient's other medical needs.

In conclusion the technology has really helped to improve the quality of life for this person, allowing her to maintain an element of independence. It is helping her to retain her social life and engage with family and friends around the world. It forms a very important part of her care plan, offering day to day support and pulling everything together for all those involved in her care. The stimulation that it has provided through its plethora of offerings has contributed to her stimulation, her improved sleep/awake pattern and calmness that it has brought around her hallucinations.

Zoe Ridewood - Parkinson's Nurse Specialist in Neurology -  
Bradford Royal Infirmary

**Head Office**  
Suite B1 1st Floor  
GB Liners House  
Stuart Road  
Altrincham  
Cheshire WA14 5GJ

**Southern Office**  
88 Wood Street  
10th Floor  
London  
EC2V 7RS

**Midlands Office**  
2nd Floor  
Quayside Tower  
252-260 Broad Street  
Birmingham  
B1 2HF

**Scotland Office**  
10 Lochside Place  
Edinburgh  
EH12 9RG

**Ireland Office**  
Pembroke House  
28-32 Upper Pembroke Street  
Dublin  
D02 EK84

[www.myimprovementnetwork.com](http://www.myimprovementnetwork.com)  
T: 0800 103 2900