

DEMENTIA
NATIONAL AUDIT OF
DEMENTIA



**National Audit of Dementia
Care in General Hospitals 2016-2017**

Local report appendices for:

Barnsley Hospital

Barnsley Hospital NHS Foundation Trust

July 2017

Commissioned by:



HQIP

Healthcare Quality
Improvement Partnership

Many thanks to Hwyl for permission to use the cover artwork. Hwyl is an art project run by Dementia Matters in Powys (DMiP) and Arts Alive Wales based at the Brecon War Memorial Hospital. The project focuses on working with elderly patients on hospital wards, with their families, carers, the ward staff and artists on a weekly basis.

With thanks to Rhiannon Davies (DMiP) and Tessa Waite (Arts Alive Wales).

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Introduction to the appendices

This is the appendices for your local report. Your local report is in a separate document. The appendices present data from Round 3 of the National Audit of Dementia, both at a national level and for your hospital. Data for your hospital in Round 2 is also shown where applicable. When comparing Round 2 data with Round 3 data, please be aware that differences in sample sizes and slight wording changes to some questions, can affect results in both rounds. Therefore, conclusions made from comparing the data should be with caution. Hospitals with less than five returns for the carer or staff questionnaires have not received any data and returns of 5 to 9 questionnaires have not received demographic information. The table below shows how the data tables in the appendices are laid out and what information you can find in each cell.

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
Standard reference and type. Standards document can be found on the audit website .	Question number. Orange items in the casenote audit appendix show low inter-rater reliability.	Question wording as in tool.	The national audit refers to all hospitals from England and Wales that participated in the Round 3 audit.	Data for your hospital from Round 3.	If the same question or a similar question was asked in Round 2, we have provided your Round 2 response for comparison. The carer and staff questionnaires are new tools and therefore this column has been excluded in these appendices.
			We have provided the percentage 'yes' response (unless otherwise indicated) and the numerator/denominator. The denominator will change throughout the appendices, depending on whether questions were routed (not asked in some instances), 'N/A' responses were chosen (these have been excluded from the analyses), or where staff and carers did not respond.		

For the organisational checklist, data from 199 hospitals are included in the national audit column (all the registered participants).

195 hospitals participated in the casenote audit, returning 10047 casenotes and this is shown in the national audit column. The national audit column for the casenote audit also shows the median and the inter quartile range for each question (where applicable). Question items which were found to have lower agreement in the inter-rater reliability analysis (see audit [website](#)) have been coloured orange.

196 hospitals returned carer questionnaires. Data from all questionnaires (4664) is presented in the carer questionnaire data tables in Appendix E.

198 hospitals returned staff questionnaires. Data from all questionnaires (14416) is presented in Appendix G. For some questionnaire items, the data for the two most positive answers have been combined, as well as being presented separately. This is provided both at a national level and for your hospital.

Appendix A: Organisational checklist data

Governance and delivery of care

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
4.1 [2]	1	A care pathway or bundle for patients with dementia is in place:			
		Yes	60.8% 121/199	Yes	In development
		In development	26.1% 52/199		
4.2 [2]	1a	<i>(If Q1=Yes or In development)</i> A senior clinician is responsible for implementation and/ or review of the care pathway: (y/n)	97.1% 168/173	Yes	Yes
4.1 [2]	1b	<i>(If Q1=Yes or In development)</i> The dementia care pathway/ bundle is integrated within or linked to the following care pathways:			
		Delirium			
		Yes	65.9% 114/173	No	New question for Round 3
		Pathway in development	26.6% 46/173		
		Stroke			
		Yes	32.9% 57/173	Yes	New question for Round 3
		Pathway in development	21.4% 37/173		
		Fractured neck of femur			
		Yes	43.6% 75/172	Yes	New question for Round 3
		Pathway in development	24.4% 42/172		
4.7 [2]	2	The Executive Board regularly reviews information collected on:			
	2a	Re-admissions, in which patients with dementia can be identified in the total number of patients re-admitted (y/n)	31.7% 63/199	Yes	Yes
	2b	Delayed discharge/ transfers, in which patients with dementia can be identified in the total number of patients with delayed discharge/ transfers (y/n)	31.7% 63/199	Yes	Yes
4.4 [2]	3	The Executive Board regularly reviews the number of in-hospital falls and the breakdown of the immediate causes, in which patients with dementia can be identified (y/n)	60.3% 120/199	Yes	Yes

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
4.5 [2]	4	The Executive Board regularly receives feedback from the following:			
	4a	Clinical Leads for older people and people with dementia including Modern Matrons/ Nurse Consultant (y/n)	84.9% 169/199	Yes	Yes
	4b	Complaints – analysed by age (y/n)	52.3% 104/199	Yes	Yes
	4c	Patient Advice and Liaison Services (PALS) – in relation to the services for older people and people with dementia (y/n/na (hospitals in Wales))	58.6% 106/181	Yes	Yes
	4d	Patient/ public forums or local Healthwatch – in relation to services for older people and people with dementia (y/n)	67.3% 134/199	Yes	Yes
4.11 [2]	5	There are champions for dementia at:			
	5a	Directorate level (y/n)	81.9% 163/199	Yes	Yes
	5b	Ward level (y/n)	93.5% 186/199	Yes	Yes
N4a [3]	6	Dementia specialist nurses are employed in line with Royal College of Nursing guidance (there is at least one full time dementia specialist nurse for every 300 admissions of people with dementia per year): (y/n)	This question is not reported on as feedback showed hospitals found it difficult to interpret.		
N4b [3]	7	Has a strategy or plan for carer engagement been produced (e.g. using Triangle of Care self-assessment tool)? (y/n)	76.9% 153/199	Yes	New question for Round 3
	8	<i>(If Q7=Yes)</i> Is implementation of the strategy or plan scheduled for review?			
		Yes, more than once a year	41.2% 63/153	Yes, more than once a year	New question for Round 3
		Yes, once a year	34.6% 53/153		
Yes, less than once a year	20.3% 31/153				

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
N4c [3]	9	A Dementia Working Group is in place and reviews the quality of services provided in the hospital: (y/n)	93.5% 186/199	Yes	New question for Round 3	
	9a	<i>(If Q9=Yes)</i> The group meets:				
		Annually	0.5% 1/186	Monthly	New question for Round 3	
		Bi-annually	0.5% 1/186			
		Quarterly	30.1% 56/186			
		Six-weekly	4.3% 8/186			
		Monthly	33.3% 62/186			
		Bi-monthly	29% 54/186			
		Weekly	0.5% 1/186			
		Unknown	1.6% 3/186			
	9b	<i>(If Q9=Yes)</i> The group includes:				
		Healthcare professionals	100% 186/186	√	New question for Round 3	
		Organisations e.g. Alzheimer's Society	64% 119/186	√		
Carer/ service user representation	66.1% 123/186	-				
N7a [3]	10	Ward staffing levels (nurses, midwives and care staff) are made available for the public to view on a monthly basis: (y/n)	88.4% 176/199	Yes	New question for Round 3	
	11	An evidence-based tool is used for establishing ward staffing levels: (y/n)	99% 197/199	Yes	New question for Round 3	
3.7 [1]	12	Protected mealtimes are established in all wards that admit adults with known or suspected dementia: (y/n)	98% 195/199	Yes	Yes	
	12a	<i>(If Q12=Yes)</i> Wards' adherence to protected mealtimes is reviewed and monitored: (y/n)	88.7% 173/195	Yes	Yes	
3.8 [1]	13	The hospital has in place a scheme/ programme which allows identified carers of people with dementia to visit at any time including at mealtimes (e.g. Carer's Passport): (y/n)	88.9% 177/199	Yes	New question for Round 3	

Discharge and transfer monitoring

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
N5a [3]	14	Instances where less than 24 hours notice of discharge has been given to carers or family are compiled and reported to the Executive Board:			
		Yes, within the past 6 months	4% 8/199	No	New question for Round 3
		Yes, within the last year	1.5% 3/199		
N3c [3]	15	Instances of night time bed moves (i.e. between the evening meal and breakfast the next morning) are noted and reported at Executive Board level: (y/n)	38.2% 76/199	Yes	New question for Round 3

Use of personal information documents

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.14 [1]	16	There is a formal system (pro-forma or template) in place in the hospital for gathering information pertinent to caring for a person with dementia: (y/n)	98.5% 196/199	Yes	Yes
	17a	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes personal details, preferences and routines: (y/n)	100% 196/196	Yes	Yes
	17b	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes reminders or support with personal care: (y/n)	98.5% 193/196	Yes	Yes
	17c	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes recurring factors that may cause or exacerbate distress: (y/n)	100% 196/196	Yes	Yes
	17d	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes support or actions that can calm the person if they are agitated: (y/n)	99% 194/196	Yes	Yes
1.15 [3]	17e	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes life details which aid communication: (y/n)	99.5% 195/196	Yes	Yes
1.14 [1]	18	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes how the person with dementia communicates with others/ understands communication: (y/n)	99.5% 195/196	Yes	New question for Round 3

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.14 [1]	19	(If Q16=Yes) The form prompts staff to approach carers or relatives to collate necessary information: (y/n)	93.4% 183/196	Yes	Yes
20	Documenting use of personal information in practice: Hospitals selected three wards (not mental health wards) which had the highest admissions of people with dementia. 10 patients in these wards were checked to see if the personal information document was present. Included were patients with dementia who needed a personal information document such as "This is Me" (any patients with dementia who did not require a personal information document were excluded).				
	Ward 1:		19/20		New question for Round 3
	Ward 2:		23		
	Ward 3:		33		
	Number of patients checked:		-	10	New question for Round 3
	Range		0-40	-	-
	Median		10	-	-
	Number of these patients where the information was present:		-	6	New question for Round 3
	Percentage of patients where the information was present:		-	60%	New question for Round 3
	Range		0-100%	-	-
	Mean		49%	-	-
Median		50%	-	-	

Recognition of dementia

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
9.3 [1]	21	There is a system in place across the hospital that ensures that all staff in the ward or care area are aware of the person's dementia or condition and how it affects them: (y/n)	90.5% 180/199	Yes	Yes

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
9.3 [1]	21a	<i>(If Q21=Yes)</i> Please say what this is:			
		A visual indicator, symbol or marker	91.1% 164/180	√	A visual indicator, symbol or marker
		Alert sheet or electronic flag	23.9% 43/180	√	
		A box to highlight or alert dementia condition in the notes or care plan	33.9% 61/180	√	
		Other	18.9% 34/180	-	
	There is a system in place across the hospital that ensures that staff from other areas are aware of the person's dementia or condition whenever the person accesses other treatment areas: (y/n)	70.4% 140/199	Yes	Yes	
	22a	<i>(If Q22=Yes)</i> Please say what this is:			
		A visual indicator, symbol or marker	87.1% 122/140	√	A visual indicator, symbol or marker
		Alert sheet or electronic flag	18.6% 26/140	√	
		A box to highlight or alert dementia condition in the notes or care plan	20.7% 29/140	√	
Other		17.9% 25/140	-		
The dementia lead or dementia working group collates feedback from carers on the written and verbal information provided to them: (y/n)	81.9% 163/199	Yes	New question for Round 3		

Training, learning and development

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
7.2 [2]	24	There is a training and knowledge framework or strategy that identifies necessary skill development in working with and caring for people with dementia: (y/n)	95.5% 190/199	Yes	Yes

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
7.4 [2]	25	The following questions are about training that is provided to acute healthcare staff who are involved in the care of people with dementia (or suspected dementia):			
		Dementia awareness training:			
		Doctors			
		Mandatory	46.2% 92/199	-	√
		Provided on induction	63.3% 126/199	-	-
		Provided in the last 12 months	58.8% 117/199	√	-
		Not provided in the last 12 months	8.5% 17/199	-	-
		Nurses			
		Mandatory	51.8% 103/199	-	√
		Provided on induction	74.4% 148/199	-	-
		Provided in the last 12 months	68.3% 136/199	√	-
		Not provided in the last 12 months	1% 2/199	-	-
		Healthcare assistants			
		Mandatory	51.8% 103/199	-	√
		Provided on induction	71.4% 142/199	-	-
		Provided in the last 12 months	68.3% 136/199	√	-
		Not provided in the last 12 months	1% 2/199	-	-
		Other allied healthcare professionals, e.g. physiotherapists, dieticians			
		Mandatory	47.7% 95/199	-	√
		Provided on induction	64.8% 129/199	-	-
		Provided in the last 12 months	67.8% 135/199	√	-
		Not provided in the last 12 months	3.5% 7/199	-	-

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
7.4 [2]	25	Support staff in the hospital, e.g. housekeepers, porters, receptionists			
		Mandatory	41.2% 82/199	-	√
		Provided on induction	57.8% 115/199	-	-
		Provided in the last 12 months	63.8% 127/199	√	-
		Not provided in the last 12 months	11.1% 22/199	-	-
7.11 [3]	26	Involvement of people with dementia and carers and use of their experiences is included in the training for ward staff: (y/n)	82.4% 164/199	Yes	Yes
7.5 [3]	27	What format is used to deliver basic dementia awareness training?			
		eLearning module	72.9% 145/199	√	New question for Round 3
		Workshop or study day	91% 181/199	√	
		Higher education module	22.6% 45/199	-	
		Other	29.1% 58/199	√	

7.5 [3]	28	Hospitals were asked to provide figures on the number of staff trained in dementia awareness. Only 34 hospitals could provide this for at least one of the years specified. Therefore, there is no data on training figures.
N7b [3]	29	What is the total number of adult beds excluding maternity and mental health beds in your hospital at 31 March 2016? This information was to compare with question 28 so is therefore not included.

Specific resources supporting people with dementia

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
6.2 [2]	30	The hospital has access to intermediate care services, which will admit people with dementia: (y/n)	93% 185/199	Yes	Yes
6.3 [3]	30a	<i>(If Q30=Yes)</i> Access to intermediate care services allows people with dementia to be admitted to intermediate care directly and avoid unnecessary hospital admission: (y/n)	84.3% 156/185	Yes	Yes
7.1 [2]	31	There is a named dignity lead to provide guidance, advice and consultation to staff: (y/n)	70.4% 140/199	Yes	Yes
6.4 [2]	32	There is a named person/ identified team who takes overall responsibility for complex needs discharge and this includes people with dementia: (y/n)	95.5% 190/199	Yes	Yes
6.5 [2]	33a	<i>(If Q32=Yes)</i> This person/ team has training in ongoing needs of people with dementia: (y/n)	92.6% 176/190	Yes	Yes
6.6 [3]	33b	<i>(If Q32=Yes)</i> This person/ team has experience of working with people with dementia and their carers: (y/n)	98.4% 187/190	Yes	Yes
6.7 [2]	34	There is a social worker or other designated person or team responsible for working with people with dementia and their carers, and providing advice and support, or directing to appropriate organisations or agencies: (y/n)	75.9% 151/199	Yes	Yes

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
N3b [2]	35	The hospital can provide finger foods for people with dementia (please select one option only):			New question for Round 3
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery (finger food) on every day	65.3% 130/199	√	
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery on four to six days per week or more	1% 2/199	-	
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery on two or three days per week or more	0% 0/199	-	
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery on only one day per week	0% 0/199	-	
		Finger food consists of sandwiches/wraps only	33.7% 67/199	-	
		Patients who may be unable to use cutlery will never be admitted to the hospital	0% 0/199	-	
3.11 [2]	36	The hospital can provide 24 hour food services for people with dementia (please select one option only):			New question for Round 3
		In addition to the main meals, other food, for example toast, sandwiches, cereals, soup, and lighter hot dish(es) are available 24 hours a day	50.8% 101/199	√	
		In addition to the main meals, other food, for example toast, sandwiches, cereals, soup are available, but less than 24 hours a day	10.6% 21/199	-	
		Simple food supplies for example bread, cereal, yoghurt and biscuits are available 24 hours a day	32.2% 64/199	-	
		Only snacks (biscuits, cake) are available 24 hours a day	3% 6/199	-	
Food is not available 24 hours a day	3.5% 7/199	-			
6.10 [2]	37	There is access to advocacy services with experience and training in working with people with dementia: (y/n)	95% 189/199	Yes	Yes

Environment

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den		
6.11 [3]	Opportunities for social interaction for patients with dementia are available (e.g. to eat/ socialise away from their bed area with other patients):					
	38	On all adult wards	15.1% 30/199	√	New question for Round 3	
		On care of the elderly wards	38.7% 77/199	-		
		Other	30.2% 60/199	-		
		No	16.1% 32/199	-		
N8a [3]	The physical environment within the hospital has been reviewed using an appropriate tool (e.g. King's Fund Enhancing the Healing Environment) to establish whether it is "dementia-friendly":					
	39	Throughout the hospital	42.7% 85/199	-	New question for Round 3	
		All adult wards/ areas	13.6% 27/199	-		
		All care of the elderly wards/ areas	18.1% 36/199	-		
		Designated dementia wards only	3% 6/199	-		
		Other	13.1% 26/199	√		
		No	9.5% 19/199	-		
	40	<i>(If Q39=Yes)</i> Environmental changes based on the review are:				
			Completed	15% 27/180	-	New question for Round 3
			Underway	56.7% 102/180	-	
			Planned but not yet underway	10% 18/180	√	
			Planned but funding has not been identified	15.6% 28/180	-	
			Plans are not in place	2.8% 5/180	-	

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
N8a [3]	<i>(If Q39=Yes)</i> Service users/ carers/ lay volunteers have been part of the team reviewing the environment:				
	41	Throughout the hospital	36.7% 66/180	-	New question for Round 3
		All adult wards/ areas	9.4% 17/180	-	
		All care of the elderly wards/ areas	13.3% 24/180	-	
		Designated dementia wards only	5% 9/180	-	
		Other	13.3% 24/180	√	
		They have not been part of the team	22.2% 40/180	-	
	<i>(If Q39=Yes)</i> There are plans to further review the changes implemented:				
	42	Yes, we are already undertaking/ have already done this	49.4% 89/180	√	New question for Round 3
		Yes, once the work is completed	40% 72/180	-	
		No plans are in place	10.6% 19/180	-	

Appendix B: Patient demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
34 - 65	2.2% (221)	1.7% (1)
66 - 80	24.3% (2445)	19% (11)
81 - 100	73% (7332)	79.3% (46)
101 - 108	0.4% (39)	0% (0)
Unknown	0.1% (10)	0% (0)

Age	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	34 - 108	61 - 96
Mean	84	84.8
Median	85	85

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	40.1% (4029)	39.7% (23)
Female	59.9% (6018)	60.3% (35)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	82.1% (8250)	100% (58)
Black/ Black British	1.2% (123)	0% (0)
Asian/ Asian British	1.9% (193)	0% (0)
Chinese	0.1% (10)	0% (0)
Mixed	0.1% (11)	0% (0)
Not documented	2.1% (210)	0% (0)
Other	12.4% (1250)	0% (0)

First language	National audit Round 3: % (N)	Your hospital Round 3: % (N)
English	77.4% (7778)	100% (58)
Welsh	0.6% (61)	0% (0)
Other European language	1% (96)	0% (0)
Asian language	1.4% (144)	0% (0)
Not documented	19% (1909)	0% (0)
Other	0.6% (59)	0% (0)

Primary diagnosis/ cause of admission*	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Respiratory	19.9% (1998)	15.5% (9)
Fall	13.3% (1332)	17.2% (10)
Urinary/ renal	9% (901)	5.2% (3)
Hip dislocation/ hip fracture	7.5% (754)	5.2% (3)
Sepsis	6.3% (633)	5.2% (3)
Delirium/ confusion	6% (604)	6.9% (4)
Gastrointestinal	5.9% (595)	6.9% (4)
Cardiac/ vascular	5.1% (517)	12.1% (7)
Stroke	3.8% (380)	3.4% (2)
Neurological	3.6% (364)	1.7% (1)
Skin lacerations/ lesions	2% (204)	1.7% (1)
Impaired consciousness	2% (198)	5.2% (3)
Dementia**	1.9% (195)	0% (0)
Other	1.9% (192)	3.4% (2)
Unable to cope/ frailty	1.6% (160)	0% (0)
Dehydration	1.4% (143)	3.4% (2)
Haematology	1.1% (115)	0% (0)
Endocrine/ metabolic	1.1% (112)	0% (0)
Other fractures	1% (96)	0% (0)
Cancer	0.9% (94)	1.7% (1)
Surgical/ non-surgical procedure	0.9% (86)	0% (0)
Pain/ swelling	0.8% (85)	3.4% (2)
Hepatology	0.8% (84)	1.7% (1)
Oral/ visual/ auditory	0.4% (45)	0% (0)
Rheumatic	0.4% (45)	0% (0)
Psychiatric	0.4% (42)	0% (0)
Adverse reaction to medication/ allergy/ overdose	0.3% (28)	0% (0)
Injury/ trauma	0.2% (24)	0% (0)
Not documented/ unknown	0.2% (21)	0% (0)

*Primary cause of admission was taken as the first reason entered on the casenote audit.

**Out of 195 noted with Dementia as cause of admission, 142 of these had dementia as the only cause of admission.

Speciality of the ward patients spent the longest time in	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Care of the Elderly/ Complex Care	41.1% (4125)	53.4% (31)
General Medical	23.5% (2359)	17.2% (10)
Other Medical	9.9% (999)	13.8% (8)
Orthopaedics	8.9% (892)	6.9% (4)
Surgical	6.8% (681)	1.7% (1)
Stroke	4.5% (456)	1.7% (1)
Cardiac	2.5% (248)	3.4% (2)
Other	1.4% (136)	1.7% (1)
Nephrology	0.5% (52)	0% (0)
Obstetrics/ Gynaecology	0.4% (41)	0% (0)
Critical Care	0.2% (23)	0% (0)
Oncology	0.2% (22)	0% (0)
Unknown	0.1% (13)	0% (0)

Patients who:	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Died in hospital	12.8% (1285)	0% (0)
Self-discharged from hospital	0.1% (12)	0% (0)
Were marked 'fast track discharge'/ 'discharge to assess'/ 'transfer to assess'/ expedited with family agreement for recorded reasons	5.5% (482)	10.3% (6)
Received end of life care in hospital/ was on an end of life care plan	13% (1302)	12.1% (7)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
2 - 10 days	45.3% (4553)	62.1% (36)
11 – 20 days	25.5% (2559)	22.4% (13)
21 – 30 days	11.3% (1132)	10.3% (6)
31 – 40 days	6.7% (671)	5.2% (3)
41 – 50 days	4.2% (418)	0% (0)
51 – 60 days	2.3% (230)	0% (0)
61 – 70 days	1.7% (168)	0% (0)
71 – 80 days	1% (102)	0% (0)
81 – 90 days	0.6% (62)	0% (0)
More than 90 days	1.5% (152)	0% (0)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	2-775	2-38
Median (days)	12	8

Place of residence before/ after admission	National audit Round 3: % (N)		Your hospital Round 3: % (N)	
	Before	After*	Before	After*
Own home	57.7% (5793)	40.2% (3519)	48.3% (28)	34.5% (20)
Respite care	0.8% (80)	1.6% (136)	1.7% (1)	1.7% (1)
Rehabilitation	0.4% (37)	2.4% (207)	0% (0)	5.2% (3)
Psychiatric ward	0.5% (48)	0.7% (62)	0% (0)	0% (0)
Carer's home	2.1% (212)	2.1% (181)	3.4% (2)	3.4% (2)
Intermediate care	0.3% (27)	2% (172)	0% (0)	1.7% (1)
Residential care	16.9% (1701)	17.7% (1551)	10.3% (6)	8.6% (5)
Nursing home	19.7% (1981)	28.7% (2511)	36.2 (21)	43.1% (25)
Palliative care	0% (5)	0.6% (54)	0 (0)	0% (0)
Transfer from another hospital	1.4% (145)	3.9% (343)	0% (0)	1.7% (1)
Long stay care	0.2% (18)	0.3% (26)	0% (0)	0% (0)

Change in residence*	National audit Round 3: % (N)	Your hospital Round 3: % (N)
No change	73.4% (6428)	79.3% (46)
Own/ carer's home to nursing/ residential care	11.1% (972)	8.6% (5)

*These figures exclude patients who died while in hospital.

Appendix C: Casenote audit data

Assessment

Multidisciplinary assessment

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
1.9 [1]	14	An assessment of mobility was performed by a healthcare professional: (y/n/could not be assessed for recorded reasons)	93.8% 8558/9126 (96%, 91-98%)	100% 58/58	94.9% 37/39	
	15	An assessment of nutritional status was performed by a healthcare professional: (y/n/could not be assessed for recorded reasons)	89.8% 8832/9837 (93%, 86-96%)	100% 58/58	97.5% 39/40	
	15a	(If Q15=Yes) The assessment of nutritional status includes recording of BMI (Body Mass Index) or weight:				
			Yes, there is a recording of the patient's BMI or weight	85.9% 7580/8822 (89%, 79-96%)	65.5% 38/58	10.5% 4/38
		Other action taken	4% 352/8822 (2%, 0-5%)	12.1% 7/58	New answer options for Round 3	
	Yes or other action taken	89.9% 7932/2288 (93%, 85-98%)	77.6% 45/58			
1.10 [1]	16	Has a formal pressure ulcer risk assessment been carried out and score recorded? (y/n)	95.5% 9590/10044 (98%, 94-100%)	100% 58/58	95% 38/40	
1.12 [1]	17	As part of the multidisciplinary assessment has the patient been asked about any continence needs? (y/n/could not be assessed for recorded reasons)	88% 8572/9744 (92%, 85-97%)	94.8% 55/58	100% 39/39	
1.11 [1]	18	As part of the multidisciplinary assessment has the patient been assessed for the presence of any pain? (y/n/could not be assessed for recorded reasons)	83.2% 8185/9840 (90%, 77-98%)	100% 58/58	100% 36/36	

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.13 [1]	19	Has an assessment of functioning been carried out?			
		Yes, a standardised assessment has taken place	45.3% 4212/9294 (45%, 23-66%)	24.1% 14/58	9.1% 3/33
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	42.8% 3977/9294 (44%, 26-58%)	58.6% 34/58	New answer options for Round 3
		Yes, other	1.7% 161/9294 (0%, 0-2%)	5.2% 3/58	
		Yes (all options)	89.8% 8350/9294 (92%, 85-96%)	87.9% 51/58	

Mental state assessment

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.3 [2]	20	Has a standardised mental status test been carried out? (y/n/could not be assessed for recorded reasons)	54% 4684/8682 (55%, 38-72%)	15.6% 5/32	73.5% 25/34
1.4 [2]	21	Has an assessment been carried out for recent changes or fluctuation in behaviour that may indicate the presence of delirium?			
		Yes, and there were indications that delirium may be present	25.9% 2603/10047 (24%, 14-36%)	5.2% 3/58	20% 8/40
		Yes, but there was no indication that delirium may be present	18.5% 1863/10047 (15%, 6-25%)	0% 0/58	32.5% 13/40
		Yes (both options)	44.5% 4466/10047 (42%, 27-60%)	5.2% 3/58	52.5% 21/40
1.5 [2]	21a	(If Q21=Yes) Has the patient been clinically assessed for delirium by a healthcare professional? (y/n)	85.3% 2220/2603 (90%, 78-100%)	100% 3/3	87.5% 7/8

Information about the person with dementia

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
1.14 [1]	22	Does the care assessment contain a section dedicated to collecting information from the carer, next of kin or a person who knows the patient well? (y/n)	57.2% 5727/10010 (58%, 31-85%)	87.9% 51/58	57.5% 23/40
	22a	<i>(If Q22=Yes)</i> Has information been collected about the patient regarding personal details, preferences and routines?			
		Yes	47.4% 2669/5626 (53%, 30-77%)	39.2% 20/51	94.7% 18/19
		Unknown*	33.1% 1865/5626 (14%, 0-44%)	39.2% 20/51	New answer option for Round 3
	22b	<i>(If Q22=Yes)</i> Has information been collected about the patient's food and drink preferences?			
		Yes	44.1% 2476/5616 (50%, 29-71%)	62.7% 32/51	New question for Round 3
		Unknown*	34.1% 1916/5616 (16%, 3-48%)	23.5% 12/51	
	22c	<i>(If Q22=Yes)</i> Has information been collected about the patient regarding reminders or support with personal care?			
		Yes	55.3% 3116/5631 (64%, 42-80%)	68.6% 35/51	100% 18/18
		Unknown*	29.9% 1685/5631 (13%, 0-37%)	25.5% 13/51	New answer option for Round 3
	22d	<i>(If Q22=Yes)</i> Has information been collected about the patient regarding recurring factors that may cause or exacerbate distress?			
		Yes	32.6% 1818/5583 (35%, 18-56%)	9.8% 5/51	89.5% 17/19
		Unknown*	37.8% 2110/5583 (20%, 5-50%)	49% 25/51	New answer option for Round 3

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.14 [1]	22e	(If Q22=Yes) Has information been collected about the patient regarding support or actions that can calm the person if they are agitated?			
		Yes	28.2% 1564/5539 (26%, 13-50%)	3.9% 2/51	82.4% 14/17
		Unknown*	39.1% 2167/5539 (20%, 7-52%)	52.9% 27/51	New answer option for Round 3
1.15 [3]	22f	(If Q22=Yes) Has information been collected about the patient regarding life details which aid communication?			
		Yes	43.1% 2413/5598 (50%, 25-70%)	54.9% 28/51	94.4% 17/18
		Unknown*	35.3% 1977/5598 (17%, 3-46%)	27.5% 14/51	New answer option for Round 3

*Unknown response options refer to situations in which the information is usually recorded in a document which accompanies the patient (e.g. "This is Me" or patient passport) and no copy is available in the notes.

Discharge

Assessment before discharge

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
5.3 [2]	23	At the point of discharge the patient's level of cognitive impairment, using a standardised assessment, was summarised and recorded: (y/n)	22.4% 1639/7329 (17%, 9-30%)	21.4% 9/42	32.1% 9/28
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	3.3% 189/5690	0% 0/33	New question for Round 3
		Patient has advanced dementia (i.e. patient's advanced dementia makes the assessment not appropriate)	1.9% 110/5690	0% 0/33	
		Not routine/ not standard practice	5.8% 331/5690	0% 0/33	
		Not documented/ unknown reason	78.1% 4444/5690	87.9% 29/33	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	10.8% 616/5690	12.1% 4/33		
	24	At the point of discharge the cause of cognitive impairment was summarised and recorded: (y/n)	69.1% 5067/7329 (72%, 57-84%)	78.6% 33/42	89.3% 25/28
	25	Have there been any symptoms of delirium? (y/n)	32.3% 2367/7329 (33%, 22-41%)	9.5% 4/42	21.4% 6/28
	25a	<i>(If Q25=Yes)</i> Have the symptoms of delirium been summarised for discharge? (y/n)	47.9% 1133/2367 (45%, 33-64%)	50% 2/4	66.7% 4/6
26	Have there been any persistent behavioural and psychiatric symptoms of dementia (wandering, aggression, shouting) during this admission? (y/n)	19.4% 1425/7329 (19%, 13-26%)	4.8% 2/42	10.7% 3/28	
26a	<i>(If Q26=Yes)</i> Have the symptoms of behavioural and psychiatric symptoms of dementia been summarised for discharge? (y/n)	44.5% 635/1426 (40%, 23-60%)	50% 1/2	66.7% 2/3	

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
5.3 [2]	27	Is there a recorded referral to a social worker for assessment of housing and care needs due to a proposed change in residence?	65.5% 1649/2519 (71%, 53-89%)	50% 4/8	New question for Round 3
	27a (i)	<i>(If Q27=Yes):</i> There are documented concerns about the patient's capacity to consent to the referral:	70.4% 1161/1649 (75%, 50-89%)	100% 4/4	New question for Round 3
	27a (ii)	The patient had capacity on assessment and their consent is documented	11.9% 138/1161 (0%, 0-20%)	50% 2/4	
		The patient lacked requisite capacity and evidence of a best interests decision has been recorded	69.9% 811/1161 (75%, 50-90%)	50% 2/4	
		There is no record of either consent or best interest decision making*	18.3% 212/1161 (14%, 0-33%)	0% 0/4	
	27a (i)	There are no documented concerns about the patient's capacity to consent to the referral:	29.6% 488/1649 (25%, 11-50%)	0% 0/4	
	27a (iii)	The patients consent was requested and this is recorded	29.1% 142/488 (25%, 0-50%)	0% 0/0	
		There is no record of the patients consent*	70.9% 346/488 (75%, 50-100%)	0% 0/0	
	27a (ii & iii)	Consent or best interests (responses options combined)	66.2% 1091/1649 (67%, 50-86%)	100% 4/4	
		No consent or best interests (response options combined)	33.8% 558/1649 (33%, 14-50%)	0% 0/4	

*Please note that these figures include 1.9% of casenotes where it was specified that the capacity assessment information is kept with social worker notes, which are unavailable to the auditor.

Discharge coordination and multi-disciplinary team input

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
6.4 [2]	28	Did a named person/ identified team co-ordinate the discharge plan? (y/n/na)	82% 5807/7083 (89%, 72-96%)	90.2% 37/41	60.7% 17/28
5.4 [1]	29a	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with the person with dementia? (y/n/na)	53.9% 3327/6169 (55%, 38-72%)	54.8% 23/42	76.9% 20/26
	29b	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with the person's carer/ relative? (y/n/na)	80.7% 5597/6935 (82%, 71-91%)	73.8% 31/42	92.3% 24/26
	29c	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with the consultant responsible for the patient's care? (y/n)	75.1% 5501/7329 (81%, 63-91%)	90.5% 38/42	100% 28/28
	29d	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with other members of the multidisciplinary team? (y/n)	81.5% 5971/7329 (85%, 76-93%)	81% 34/42	92.9% 26/28
5.6 [1]	30	Has a single plan/ summary for discharge with clear updated information been produced? (y/n)	85.1% 6234/7329 (92%, 77-97%)	97.6% 41/42	100% 28/28
5.7 [2]	31	Are any support needs that have been identified documented in the discharge plan/ summary? (y/n/na)	60.2% 4211/6995 (61%, 44-79%)	95.2% 40/42	96.3% 26/27
5.8 [1]	32	Has the patient and/ or carer received a copy of the plan/ summary? (y/n/na)	80.6% 5621/6975 (94%, 72-100%)	95.2% 40/42	96.4% 27/28
N5b [2]	33	Was a copy of the discharge plan/ summary sent to the GP/ primary care team on the day of discharge? (y/n/na)	93.6% 6701/7156 (98%, 93-100%)	100% 41/41	New question for Round 3

Discharge planning

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
5.1 [2]	34	Was discharge planning initiated within 24 hours of admission? (y/n/na)	47.4% 2483/5242 (48%, 27-67%)	34.8% 8/23	17.6% 3/17
	34a	<i>(If Q34=N/A)</i> Please select the recorded reason why discharge planning could not be initiated within 24 hours:			
		Patient acutely unwell	62.5% 1306/2088	42.1% 8/19	72.7% 8/11
		Patient awaiting assessment	9.1% 190/2088	31.6% 6/19	0% 0/11
		Patient awaiting history/ results	6.1% 127/2088	5.3% 1/19	0% 0/11
		Patient awaiting surgery	9.6% 200/2088	15.8% 3/19	0% 0/11
		Patient presenting confusion	5.7% 120/2088	5.3% 1/19	0% 0/11
		Patient on end of life plan	0% 1/2088	0% 0/19	-
		Patient being transferred to another hospital	0.1% 2/2088	0% 0/19	0% 0/11
		Patient unresponsive	0.3% 6/2088	0% 0/19	0% 0/11
		Patient being discharged to nursing/ residential care	6.5% 136/2088	0% 0/19	0% 0/11
		Not recorded	-	-	27.3% 3/11
		Other	0% 0/2088	0% 0/19	0% 0/11

Support for carers and family

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
5.10 [2]	35	Carers or family have received notice of discharge and this is documented:			
		Less than 24 hours	19.5% 1432/7329	69% 29/42	50% 14/28
		24 hours	12.2% 897/7329	4.8% 2/42	10.7% 3/28
		25 - 48 hours	14.7% 1075/7329	4.8% 2/42	7.1% 2/28
		More than 48 hours	27.1% 1985/7329	7.1% 3/42	7.1% 2/28
		No notice at all	0.5% 35/7329	0% 0/42	0% 0/28
		Not documented	24.2% 1770/7329	14.3% 6/42	25% 7/28
		No carer, family, friend/ could not contact	1.8% 132/7329	0% 0/42	0% 0/28
		Patient specified information withheld	0% 3/7329	0% 0/42	New answer option for Round 3
5.5 [2]	36	An assessment of the carer's current needs has taken place in advance of discharge: (y/n/na)	67.3% 2605/3868 (70%, 50-88%)	88.2% 15/17	78.9% 15/19

Appendix D: Carer demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
18 – 24 years	1% (48)	4.3% (1)
25 – 34 years	2.9% (133)	4.3% (1)
35 – 44 years	5.6% (259)	0% (0)
45 – 54 years	16.2% (749)	13% (3)
55 – 64 years	25.8% (1193)	34.8% (8)
65 – 74 years	20.8% (960)	17.4% (4)
75 – 84 years	19.1% (885)	17.4% (4)
85 years or over	7.4% (343)	8.7% (2)
Prefer not to say	1.2% (56)	0% (0)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	30.6% (1413)	29.2% (7)
Female	68.1% (3150)	70.8% (17)
Other	0.1% (4)	0% (0)
Prefer not to say	1.2% (57)	0% (0)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	88.4% (4079)	100% (24)
Black/ Black British	3% (140)	0% (0)
Asian/ Asian British	3.3% (152)	0% (0)
Mixed	1% (44)	0% (0)
Chinese	0.2% (9)	0% (0)
Other	1.4% (64)	0% (0)
Prefer not to say	2.7% (124)	0% (0)

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	33.5% (1558)	45.8% (11)
Family member	55.9% (2597)	41.7% (10)
Friend	4.4% (203)	0% (0)
Professional carer (health or social care)	5.4% (249)	8.3% (2)
Other	0.9% (41)	4.2% (1)

One of main carers for patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Yes	77.8% (3356)	79.2% (19)

Appendix E: Carer questionnaire data

Patient care

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den
9.3 [1]	1	Do you feel that hospital staff were well informed and understood the needs of the person you look after?	
		46.5% 2130/4578	58.3% 14/24
		43.3% 1980/4578	37.5% 9/24
		10.2% 468/4578	4.2% 1/24
7.4 [2]	2	Do you feel confident that hospital staff delivered high quality care that was appropriate to the needs of the person you look after?	
		54.2% 2489/4592	70.8% 17/24
		36.4% 1672/4592	20.8% 5/24
		9.4% 431/4592	8.3% 2/24
1.14 [1]	3	Was the person you look after given enough help with personal care from hospital staff? <i>For example, eating, drinking, washing and using the toilet.</i>	
		55.4% 2456/4433	73.9% 17/23
		34.2% 1515/4433	17.4% 4/23
		10.4% 462/4433	8.7% 2/23
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		76% 3471/4569	82.6% 19/23
		20.8% 952/4569	17.4% 4/23
		3.2% 146/4569	0% 0/23

Communication

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den
9.7 [2]	5	Were you (or the patient, where appropriate) kept clearly informed about their care and progress during the hospital stay? <i>For example, about plans for treatment and discharge.</i>		
		Yes, definitely	41.8% 1908/4566	62.5% 15/24
		Yes, to some extent	40.4% 1843/4566	29.2% 7/24
		No	17.8% 815/4566	8.3% 2/24
9.11 [2]	6	Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care?		
		Yes, definitely	47.5% 2138/4497	75% 18/24
		Yes, to some extent	36.4% 1637/4497	20.8% 5/24
		No	16.1% 722/4497	4.2% 1/24
1.14 [1]	7	Did hospital staff ask you about the needs of the person you look after to help plan their care?		
		Yes, definitely	45.4% 2053/4524	70.8% 17/24
		Yes, to some extent	34.5% 1563/4524	20.8% 5/24
		No	20.1% 908/4524	8.3% 2/24

Overall

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
	8	Overall, how would you rate the care received by the person you look after during the hospital stay?		
		Excellent	34.5% 1602/4645	58.3% 14/24
		Very good	33.9% 1575/4645	25% 6/24
		Good	17% 790/4645	4.2% 1/24
		Fair	9.6% 446/4645	8.3% 2/24
		Poor	5% 232/4645	4.2% 1/24
	9	How likely would you be to recommend the service to friends and family if they needed similar care or treatment?		
		Extremely likely	42.5% 1933/4544	58.3% 14/24
		Likely	34.1% 1551/4544	25% 6/24
		Neither likely nor unlikely	14.3% 648/4544	12.5% 3/24
		Unlikely	4.8% 220/4544	0% 0/24
		Extremely unlikely	4.2% 192/4544	4.2% 1/24

Support for the carer

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
	10	Overall, how satisfied are you with the support you have received from this hospital to help you in your role as a carer?		
		Very satisfied	50.3% 2204/4379	54.5% 12/22
		Somewhat satisfied	34% 1487/4379	36.4% 8/22
		Somewhat dissatisfied	9.9% 434/4379	9.1% 2/22
		Very dissatisfied	5.8% 254/4379	0% 0/22

Appendix F: Staff demographics

% of patients encounter in role who have dementia/ possible dementia	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 25%	31.9% (4559)	46.3% (56)
26 - 50%	25.6% (3651)	28.9% (35)
51 - 75%	24.4% (3489)	18.2% (22)
More than 75%	18.1% (2588)	6.6% (8)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	15.7% (2260)	5.7% (7)
Female	83.2% (11954)	94.3% (115)
Other	0.2% (34)	0% (0)
Prefer not to say	0.8% (113)	0% (0)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	79.9% (11467)	98.4% (120)
Black/ Black British	4.1% (594)	0% (0)
Asian/ Asian British	8% (1150)	0.8% (1)
Mixed	1.3% (183)	0% (0)
Chinese	0.5% (73)	0% (0)
Other	4.5% (646)	0.8% (1)
Prefer not to say	1.7% (241)	0% (0)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	29.9% (4300)	34.2% (41)
Registered nurse (Band 7 or above)	12.7% (1831)	9.2% (11)
Healthcare assistant	23.1% (3324)	26.7% (32)
Doctor	11.5% (1645)	0% (0)
Allied healthcare professional	11.9% (1713)	14.2% (17)
Therapy assistant/ allied healthcare professional assistant	2.6% (367)	6.7% (8)
Student	2.3% (332)	3.3% (4)
Ward based administrators	4% (571)	2.5% (3)
Other/ unknown	1.9% (279)	3.3% (4)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	13% (1866)	13.2% (16)
30 hours or more	87% (12458)	86.8% (105)

Time worked in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Less than 6 months	8% (1148)	3.3% (4)
6 - 11 months	9.5% (1364)	5% (6)
1 - 2 years	15.6% (2242)	14% (17)
3 - 5 years	16.4% (2350)	16.5% (20)
6 - 10 years	15.9% (2283)	17.4% (21)
11 - 15 years	12.1% (1739)	14% (17)
More than 15 years	22.4% (3205)	29.8% (36)

Appendix G: Staff questionnaire data

Specialist services for dementia

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % (Yes, always and Yes, most of the time responses combined)	Your hospital Round 3: % Num/Den	Your hospital Round 3: % (Yes, always and Yes, most of the time responses combined)		
4.11 [2]	1	Do you feel supported by specialist services for dementia in your hospital? <i>E.g. dementia specialist team, mental health liaison, dementia champions.</i>					
	1a	During office hours <i>i.e. Monday-Fri, 9am-5pm</i>					
		Yes, always	28.7% 4026/14024	61.6% 8640/14024	44.6% 54/121	85.1% 103/121	
		Yes, most of the time	32.9% 4614/14024		40.5% 49/121		
		Yes, sometimes	26.8% 3760/14024	-	13.2% 16/121	-	
		No	11.6% 1624/14024	-	1.7% 2/121	-	
		1b	Out of office hours				
			Yes, always	7.8% 874/11207	23.5% 2637/11207	12.9% 12/93	26.9% 25/93
			Yes, most of the time	15.7% 1763/11207		14% 13/93	
	Yes, sometimes		27.9% 3129/11207	-	40.9% 38/93	-	
	No	48.6% 5441/11207	-	32.3% 30/93	-		

Dementia care training

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
7.4 [2]	What form did your dementia training at this hospital take? <i>Please tick all that apply:</i>			
	2	eLearning	42.8% 5653/13205	17.8% 21/118
		Workshop/ study day	53.2% 7030/13205	72.9% 86/118
		Higher education module	5.4% 713/13205	4.2% 5/118
		Workbook	7.7% 1018/13205	22.9% 27/118
		Other	7.3% 961/13205	2.5% 3/118
		I have not received any dementia training at this hospital	17.3% 2278/13205	12.7% 15/118
	2a	Following your training at this hospital, do you feel better prepared to provide care/ support to people with dementia?		
		Yes, much better prepared	42.2% 4502/10670	66.7% 68/102
		Yes, somewhat better prepared	50.5% 5390/10670	31.4% 32/102
		No	7.3% 778/10670	2% 2/102

Information and communication

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	Your hospital Round 3: % Num/Den	Your hospital Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	
9.3 [1]	3	In your current role, do you think that personal information is available to you to help you care for/ support people with dementia? <i>E.g. their likes/ dislikes, preferred name, past job.</i>				
		Yes, always	21.4% 3072/14345	59.9% 8597/14345	31.1% 38/122	73.8% 90/122
		Yes, most of the time	38.5% 5525/14345		42.6% 52/122	
		Yes, sometimes	33% 4734/14345	-	23.8% 29/122	-
		No	7.1% 1014/14345	-	2.5% 3/122	-
	3a	Do you have the opportunity to use this information to help you care for/ support people with dementia?				
		Yes, always	26.6% 3549/13329	67.5% 9003/13329	31.9% 38/119	79.8% 95/119
		Yes, most of the time	40.9% 5454/13329		47.9% 57/119	
		Yes, sometimes	30.6% 4074/13329	-	20.2% 24/119	-
		No	1.9% 252/13329	-	0% 0/119	-
7.4 [2]	4	In your current role, do you feel encouraged to accommodate the individual needs and preferences of people with dementia? <i>E.g. taking time to speak and interact at the pace of the person with dementia, permitting them to walk around the ward.</i>				
		Yes, always	28.9% 4145/14333	62.1% 8904/14333	30.3% 37/122	71.3% 87/122
		Yes, most of the time	33.2% 4759/14333		41% 50/122	
		Yes, sometimes	27.3% 3913/14333	-	22.1% 27/122	-
	No	10.6% 1516/14333	-	6.6% 8/122	-	

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
7.12 [1]	6	As a team, how often do you talk about the way you care for/ support people with complex needs (including dementia)?		
		Frequently	49.8% 6203/12457	35.4% 34/96
		Occasionally	37.2% 4636/12457	54.2% 52/96
		Almost Never	9.7% 1210/12457	8.3% 8/96
		Never	3.3% 408/12457	2.1% 2/96

Patient care and nutrition

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % (Yes, always and Yes, most of the time responses combined)	Your hospital Round 3: % Num/Den	Your hospital Round 3: % (Yes, always and Yes, most of the time responses combined)	
3.8 [1]	7	Can carers of people with dementia visit at any time on the ward(s) you work on? <i>i.e. visits are not limited to normal visiting hours and may include mealtimes.</i>				
		Yes, always	51.2% 6131/11978	78.5% 9402/11978	61.5% 56/91	92.3% 84/91
		Yes, most of the time	27.3% 3271/11978		30.8% 28/91	
		Yes, sometimes	16.1% 1927/11978	-	7.7% 7/91	-
		No	5.4% 649/11978	-	0% 0/91	-
7.18 [1]	8	Do you think that the people with dementia you care for/ support, have their nutritional needs met while on the ward(s) you work on?				
		Yes, always	25.9% 3181/12263	76.1% 9330/12263	17.2% 16/93	69.9% 65/93
		Yes, most of the time	50.1% 6149/12263		52.7% 49/93	
		Yes, sometimes	19.2% 2357/12263	-	28% 26/93	-
		No	4.7% 576/12263	-	2.2% 2/93	-

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % (Yes, always and Yes, most of the time responses combined)	Your hospital Round 3: % Num/Den	Your hospital Round 3: % (Yes, always and Yes, most of the time responses combined)	
4.9 [2]	9	Do you think the ward(s) you work on is able to respond to the individual needs of people with dementia as they arise? <i>E.g. pain relief, personal care, toileting, mobility assistance.</i>				
		Yes, always	30.4% 2785/9148	78% 7137/9148	29.1% 23/79	77.2% 61/79
		Yes, most of the time	47.6% 4352/9148		48.1% 38/79	
		Yes, sometimes	18.7% 1708/9148	-	19% 15/79	-
		No	3.3% 303/9148	-	3.8% 3/79	-
	10	Is additional staffing support provided if dependency needs on the ward(s) you work on increase?				
		Yes, always	10.7% 977/9143	38.2% 3493/9143	3.8% 3/78	28.2% 22/78
		Yes, most of the time	27.5% 2516/9143		24.4% 19/78	
		Yes, sometimes	42.5% 3887/9143	-	41% 32/78	-
		No	19.3% 1763/9143	-	30.8% 24/78	-
N3c [3]	11	Are night time bed moves for people with dementia avoided where possible on the ward(s) you work on? <i>By night time bed moves, we mean bed moves between the evening meal and breakfast the next morning.</i>				
		Yes, always	16.3% 1474/9047	48.8% 4416/9047	10.4% 8/77	44.2% 34/77
		Yes, most of the time	32.5% 2942/9047		33.8% 26/77	
		Yes, sometimes	27.7% 2506/9047	-	27.3% 21/77	-
	No	23.5% 2125/9047	-	28.6% 22/77	-	

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	Your hospital Round 3: % Num/Den	Your hospital Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	
3.7 [1]	12	In the last week (except in emergency situations), were patient mealtimes kept free of any clinical activity on the ward(s) you work on?				
		Yes, always	28.3% 2488/8788	67.6% 5944/8788	13% 10/77	61% 47/77
		Yes, most of the time	39.3% 3456/8788		48.1% 37/77	
		Yes, sometimes	16.8% 1476/8788	-	23.4% 18/77	-
		No	15.6% 1368/8788	-	15.6% 12/77	-
N3b [2]	13	Can you access finger food (i.e. food which can be eaten without a knife/ fork/ spoon) for people with dementia as an alternative to main meals?				
		Yes, always	38% 3356/8822	65.2% 5754/8822	46.2% 36/78	87.2% 68/78
		Yes, most of the time	27.2% 2398/8822		41% 32/78	
		Yes, sometimes	22.5% 1983/8822	-	12.8% 10/78	-
		No	12.3% 1085/8822	-	0% 0/78	-
3.11 [2]	14	Can you access snacks for people with dementia in between meals?				
		Yes, always	44.5% 4060/9119	73.2% 6675/9119	49.4% 39/79	87.3% 69/79
		Yes, most of the time	28.7% 2615/9119		38% 30/79	
		Yes, sometimes	20.7% 1886/9119	-	12.7% 10/79	-
		No	6.1% 558/9119	-	0% 0/79	-
N3a [2]	15	Are the nutrition and hydration needs of people with dementia communicated at handovers/ safety briefings?				
		Yes, always	46.2% 4199/9090	79.6% 7238/9090	40.5% 32/79	79.7% 63/79
		Yes, most of the time	33.4% 3039/9090		39.2% 31/79	
		Yes, sometimes	15.5% 1408/9090	-	16.5% 13/79	-
		No	4.9% 444/9090	-	3.8% 3/79	-

Appendix H: Staff suggestions for your hospital

The staff questionnaire included a question asking staff to make one suggestion on how their hospital could improve care and support provided to people with dementia. Below, all suggestions from staff at Barnsley Hospital are provided.

Registered Nurses (Band 5 or 6)
Access to more information.
Better history obtained from family/ carers to provide tailored care for each individual's dementia needs.
By the Trust seeing where most dementia patients on a day to day service are being nursed in wards, giving them more staff to help with their needs and not just between the times of 9am to 5pm.
Ensure packs to give to relatives are available and for staff to understand the importance of delivering them to patient and relatives.
Ensure patients are given the time and opportunity to express their personal needs at all times.
Extra staffing to better meet the needs of dementia patients, one on one nursing more likely to be given if that person is at falls risk, not for any other reason.
Further support and training. Leaflets and posters on ward areas re: dementia and available resources. Possible area for improvement on menus for dementia patients adding finger foods onto menus or separate menus for people with dementia with options to choose something they like.
Having adequate staff, less paper work, so that we can spend more time with all vulnerable patients.
I do believe things are getting better within the trust however, there is still a long way to go to ensure schemes such as the butterfly scheme are not only implemented for all eligible patients, but actually looked at by all members of staff and used to improve patient care.
I feel that a Dementia nurse team, who worked throughout the hospital visiting patients/ carers with dementia and supporting/ advising the ward nurses would be useful. I feel we need more time with patients in order to be able to meet these special needs.
I think improvements could be made to allocate 1-1 care to patients on the wards at certain times of the day i.e. mealtimes.
Improve staff awareness re meals/ snacks available and open visiting.
Increase staff numbers, not all staff have patience with certain patients.
It is not easy in a busy general hospital setting when surgery etc. is taking place every day, perhaps more social activity, games etc. could be provided.
It would be nice if we could gain access to twiddle mats at all times, for e.g. I worked this weekend and was unable to get one for a patient with dementia as they were locked away in an office. Also, sometimes patients with dementia are 'slept out' to other wards which disorientates them.
Key facts sheet enabling better communication between staff relatives and patient.
Make signage, clearer and use colour more e.g. with toilet seats.
More information in public areas to notify patients relatives that they can stay to support their relatives, and facilities e.g. rooms, meals for these people to use.
More staff on the night shift.
More untrained staff.
Not moving these patients from a ward, some patients these days are moved around several times during their stay (up to 4 times in as many days has been known). Provide extra staffing. I have known us to have 5

Registered Nurses (Band 5 or 6)

dementia patients on the ward at one time. Extra staff have been asked for, but can't remember any time when this has been honoured.

Provide 1:1 staff as and when they need it and allow staff to work regularly with patients who have dementia to create a bond/ familiarity.

Provide adequate training to ALL staff including bank staff.

Provide extra help as required and provided meals/ snacks on a 24/7 basis.

Provide more one to one support for patients with dementia instead of cohort nursing the majority of dementia patients who need closer supervision in the same room.

Providing more staff in order that staff have more time to dedicate to meeting the complex needs of patients. Encouraging relatives/ carers to help at mealtimes.

To provide radios on the ward for comfort for the patients. More information can and should be collected by all members of staff from the patient, their carers/ care homes and their families to try and promote independence and to find out the patient's norm and to enhance care. Further likes and dislikes should be collected by all members of staff to promote nutrition and hydration needs when the patient is admitted.

Training for staff on how to communicate in various ways including verbally and the use of non-verbal communication.

Use of comfort dolls, need to increase use of yellow crockery.

Registered Nurses (Band 7 or above)

Better compliance with "reach out to me" and carers cards.

Keep staffing levels optimal. Keeping bed stock adequate so that bed moves less likely.

More dementia nurses.

More information pre-admission to critical care so plans can be made. Discussions with family pre-admission to critical care, regarding expectations. Dementia patients struggle with tolerating organ support.

More staff.

More training, support and awareness especially for junior bank staff who provide the majority of care for patients with dementia.

We are currently looking at work patterns to support patients at high risk times.

Healthcare Assistants

Allow one member of staff on shift to stay with that patient instead of all different ones in a shift as sometimes we sit for an hour then someone else sits an hour and so on.

Better communication from care home staff on patient admission.

Bring [personal information document] more into outpatients.

Expand on ways to help feed patients at mealtimes e.g. volunteers.

For communication to be key.

Get more information about the patient, listen to the patient and document more for other people to see.

Getting the dementia specialist nurse more staff to assist.

Having more time to spend with these patients.

Healthcare Assistants

Help speed up discharges once medically fit for discharge as spending too much time in an acute hospital setting for longer than is necessary is unsettling for patients and family alike.

It is only my opinion but more staff especially auxiliaries need to be on the wards of the elderly to provide more individual care and ensure more activities are provided. Better training to be given to auxiliaries as it is generally down to them to provide the basic cares of patients. As far as I am concerned, a full course that is accredited should be completed throughout England as it is these patients who are failed by society in general as they cannot complain like the rest. Overall, I do feel that the trust is very proactive at providing the best possible care to patients who live with difficulties and endeavour to provide access to all resources for them and their relatives.

More information and more packs on the wards.

More staff on the ward so you have time to sit down and talk to patients.

More staff to offer more support to dementia patients.

More staff to take time with dementia patients or volunteers. Visitors should be allowed on ward at mealtimes to encourage dementia [patients] to eat.

More time with dementia patients so we can provide excellent care.

More training for all staff.

Not enough time and staff to care and give patients help and encouragement with issues relating to their dementia and the ward is a very busy area with all fields of medical care. Dementia patients that need extra understanding and time do not get the time needed to do the job properly, which is frustrating for all concerned relatives and staff. As I say, it's like trying to be in a million places at one time.

Not moving patients at night.

One simple answer - increase number of staff at ward levels.

Patience, treat as individuals.

Provide more activities for patients with dementia. Things to pass time and occupy them.

Staffing.....

There is only one nurse specialist for dementia, would benefit a team and HCA's to help give support/promote.

We need more staff so that time can be spent with dementia patients to make them feel comfortable and keep them safe.

Doctors

No comments from doctors for your hospital.

Allied Healthcare Professionals

All staff to be trained to understand dementia and learn how to communicate with the patients and care for them.

Dementia training is currently widely available in the hospital but to encourage all staff to undertake this, it should be mandatory for clinical staff.

Giving therapy a voice.

I think the services offered to dementia patients in Barnsley Hospital are exceptional and I cannot think of any way currently they could be improved.

Allied Healthcare Professionals

Liaise more with therapists who walk with these patients daily to plan in particular discharge and setting up home environment. Be more proactive in referring to memory clinic.

More staff on the wards to assist patients with dementia.

More training based in a classroom environment.

Spend more time doing recreational activities and stimulating patients, improve wellbeing and experience of hospital as can be very daunting.

Training - practical session on how to treat and deal with patients with difficult and challenging behaviour so the patients are always treated with dignity and respect.

Students

Allow more time for people to spend with people who have dementia. Make people more aware.

To ensure the butterfly scheme is upheld and documents are completed for every patient.

Therapy Assistants & Allied Healthcare Professional Assistants

More staff. Not enough staff for the amount of confused and dementia patients on the ward.

Need more support for dementia patients. Would like a dementia café.

Ward-based Administrators

By providing clear concise guidelines for staff dealing with people with dementia therefore ensuring that we are all working together to provide the best care and support possible for vulnerable people who may be afraid during their stay in hospital.

None - they are excellent.

One to one nursing/ organised activities for dementia patients.

Other / Unknown

Bridging the gap between staff and family and carers - more support.

Grassroots education of staff by ward and departmental management. Many schemes exist to improve the care of patients with dementia but getting ward staff to consistently implement these schemes is very difficult and this leads to a worse experience for some patients. This is about staff engagement wholesale rather than anything one specialist nurse can do alone.

More volunteers to help, often not enough time/ support to give the more severe patients the input they require.

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