

National Audit of Dementia
Care in General Hospitals 2016-2017
Local report appendices for:
Cumberland Infirmary
North Cumbria University Hospitals NHS Trust
July 2017

Commissioned by:

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	Yes
		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	In development	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	No	No
	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	No
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	No

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	No
	4b	Complaints – analysed by age (y/n)	52.3% 104/199	Yes	No
	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	No
	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	No
4.11 [2]	5	There are champions for dementia at:			
	5a	Directorate level (y/n)	81.9% 163/199	Yes	No
	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	No	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	No	No
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	No	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	No	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:		ELM B		New question for Round 3
	Ward 2:		WILLOW A		
	Ward 3:		MAPLE A		
	Number of patients checked:		-	10	New question for Round 3
	Range		0-40	-	-
	Median		10	-	-
	Number of these patients where the information was present:		-	4	New question for Round 3
	Percentage of patients where the information was present:		-	40%	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	-		
23	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	No	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	N/A	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	No	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	No

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)	1.8% (1)
66 - 80	24.3% (2445)	22.8% (13)
81 - 100	73% (7332)	73.7% (42)
101 - 108	0.4% (39)	1.8% (1)
Unknown	0.1% (10)	0% (0)

Age	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	34 - 108	62 - 108
Mean	84	84.5
Median	85	84

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	40.1% (4029)	40.4% (23)
Female	59.9% (6018)	59.6% (34)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	82.1% (8250)	98.2% (56)
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)	1.8% (1)
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)	98.2% (56)
Welsh	0.6% (61)	0% (0)
Other European language	1% (96)	1.8% (1)
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)	17.5% (10)
Fall	13.3% (1332)	5.3% (3)
Urinary/ renal	9% (901)	14% (8)
Hip dislocation/ hip fracture	7.5% (754)	14% (8)
Sepsis	6.3% (633)	3.5% (2)
Delirium/ confusion	6% (604)	0% (0)
Gastrointestinal	5.9% (595)	5.3% (3)
Cardiac/ vascular	5.1% (517)	10.5% (6)
Stroke	3.8% (380)	7% (4)
Neurological	3.6% (364)	7% (4)
Skin lacerations/ lesions	2% (204)	3.5% (2)
Impaired consciousness	2% (198)	0% (0)
Dementia**	1.9% (195)	1.8% (1)
Other	1.9% (192)	0% (0)
Unable to cope/ frailty	1.6% (160)	0% (0)
Dehydration	1.4% (143)	0% (0)
Haematology	1.1% (115)	3.5% (2)
Endocrine/ metabolic	1.1% (112)	1.8% (1)
Other fractures	1% (96)	1.8% (1)
Cancer	0.9% (94)	1.8% (1)
Surgical/ non-surgical procedure	0.9% (86)	0% (0)
Pain/ swelling	0.8% (85)	0% (0)
Hepatology	0.8% (84)	0% (0)
Oral/ visual/ auditory	0.4% (45)	0% (0)
Rheumatic	0.4% (45)	0% (0)
Psychiatric	0.4% (42)	1.8% (1)
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)	47.4% (27)
General Medical	23.5% (2359)	15.8% (9)
Other Medical	9.9% (999)	1.8% (1)
Orthopaedics	8.9% (892)	14% (8)
Surgical	6.8% (681)	5.3% (3)
Stroke	4.5% (456)	8.8% (5)
Cardiac	2.5% (248)	3.5% (2)
Other	1.4% (136)	1.8% (1)
Nephrology	0.5% (52)	1.8% (1)
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)	3.5% (2)
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)	5.5% (3)
Received end of life care in hospital/ was on an end of life care plan	13% (1302)	8.8% (5)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
2 - 10 days	45.3% (4553)	38.6% (22)
11 – 20 days	25.5% (2559)	22.8% (13)
21 – 30 days	11.3% (1132)	7% (4)
31 – 40 days	6.7% (671)	17.5% (10)
41 – 50 days	4.2% (418)	7% (4)
51 – 60 days	2.3% (230)	0% (0)
61 – 70 days	1.7% (168)	1.8% (1)
71 – 80 days	1% (102)	1.8% (1)
81 – 90 days	0.6% (62)	0% (0)
More than 90 days	1.5% (152)	3.5% (2)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	2-775	4-139
Median (days)	12	16

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)	73.7% (42)	45.5% (25)
Respite care	0.8% (80)	1.6% (136)	0% (0)	0% (0)
Rehabilitation	0.4% (37)	2.4% (207)	0% (0)	0% (0)
Psychiatric ward	0.5% (48)	0.7% (62)	1.8% (1)	0% (0)
Carer's home	2.1% (212)	2.1% (181)	7% (4)	1.8% (1)
Intermediate care	0.3% (27)	2% (172)	0% (0)	0% (0)
Residential care	16.9% (1701)	17.7% (1551)	3.5% (2)	10.9% (6)
Nursing home	19.7% (1981)	28.7% (2511)	14 (8)	18.2% (10)
Palliative care	0% (5)	0.6% (54)	0 (0)	1.8% (1)
Transfer from another hospital	1.4% (145)	3.9% (343)	0% (0)	21.8% (12)
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)	63.6% (35)
Own/ carer's home to nursing/ residential care	11.1% (972)	10.9% (6)

*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% 56/56	86.8% 33/38	
	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% 57/57	94.9% 37/39	
	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%)	89.5% 51/57	70.3% 26/37
		Other action taken	4% 352/8822 (2%, 0-5%)	7% 4/57	New answer options for Round 3	
	Yes or other action taken	89.9% 7932/2288 (93%, 85-98%)	96.5% 55/57			
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% 57/57	100% 39/39	
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%)	100% 57/57	76.9% 30/39	
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% 57/57	66.7% 26/39	

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%)	7.1% 4/56	80.6% 29/36
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	42.8% 3977/9294 (44%, 26-58%)	92.9% 52/56	New answer options for Round 3
		Yes, other	1.7% 161/9294 (0%, 0-2%)	0% 0/56	
		Yes (all options)	89.8% 8350/9294 (92%, 85-96%)	100% 56/56	

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%)	94.3% 50/53	58.3% 21/36
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%)	63.2% 36/57	53.8% 21/39
		Yes, but there was no indication that delirium may be present	18.5% 1863/10047 (15%, 6-25%)	24.6% 14/57	30.8% 12/39
		Yes (both options)	44.5% 4466/10047 (42%, 27-60%)	87.7% 50/57	84.6% 33/39
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%)	36.1% 13/36	100% 21/21

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%)	24.6% 14/57	53.8% 21/39
	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%)	42.9% 6/14	38.1% 8/21
		Unknown*	33.1% 1865/5626 (14%, 0-44%)	28.6% 4/14	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%)	28.6% 4/14	New question for Round 3
		Unknown*	34.1% 1916/5616 (16%, 3-48%)	28.6% 4/14	
	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%)	42.9% 6/14	57.1% 12/21
		Unknown*	29.9% 1685/5631 (13%, 0-37%)	28.6% 4/14	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%)	35.7% 5/14	33.3% 7/21
		Unknown*	37.8% 2110/5583 (20%, 5-50%)	28.6% 4/14	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%)	28.6% 4/14	28.6% 6/21
		Unknown*	39.1% 2167/5539 (20%, 7-52%)	28.6% 4/14	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%)	42.9% 6/14	33.3% 7/21
		Unknown*	35.3% 1977/5598 (17%, 3-46%)	28.6% 4/14	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%)	41% 16/39	30% 6/20
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	3.3% 189/5690	8.7% 2/23	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% 0/23	
		Not routine/ not standard practice	5.8% 331/5690	0% 0/23	
		Not documented/ unknown reason	78.1% 4444/5690	91.3% 21/23	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	10.8% 616/5690	0% 0/23		
	24	At the point of discharge the cause of cognitive impairment was summarised and recorded: (y/n)	69.1% 5067/7329 (72%, 57-84%)	92.3% 36/39	60% 12/20
	25	Have there been any symptoms of delirium? (y/n)	32.3% 2367/7329 (33%, 22-41%)	64.1% 25/39	60% 12/20
	25a	<i>(If Q25=Yes)</i> Have the symptoms of delirium been summarised for discharge? (y/n)	47.9% 1133/2367 (45%, 33-64%)	76% 19/25	91.7% 11/12
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%)	30.8% 12/39	30% 6/20	
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%)	41.7% 5/12	50% 3/6	

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%)	100% 12/12	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%)	33.3% 4/12	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%)	25% 1/4	
		The patient lacked requisite capacity and evidence of a best interests decision has been recorded	69.9% 811/1161 (75%, 50-90%)	75% 3/4	
		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%)	66.7% 8/12	
	27a (iii)	The patients consent was requested and this is recorded	29.1% 142/488 (25%, 0-50%)	25% 2/8	
		There is no record of the patients consent*	70.9% 346/488 (75%, 50-100%)	75% 6/8	
	27a (ii & iii)	Consent or best interests (responses options combined)	66.2% 1091/1649 (67%, 50-86%)	50% 6/12	
		No consent or best interests (response options combined)	33.8% 558/1649 (33%, 14-50%)	50% 6/12	

*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%)	100% 39/39	73.7% 14/19
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%)	34.5% 10/29	55.6% 10/18
	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%)	94.9% 37/39	75% 15/20
	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%)	79.5% 31/39	85% 17/20
	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%)	97.4% 38/39	75% 15/20
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%)	100% 39/39	90% 18/20
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%)	69.2% 27/39	50% 10/20
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%)	100% 39/39	100% 20/20
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% 39/39	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%)	33.3% 1/3	54.5% 6/11
	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	63.9% 23/36	11.1% 1/9
		Patient awaiting assessment	9.1% 190/2088	11.1% 4/36	22.2% 2/9
		Patient awaiting history/ results	6.1% 127/2088	16.7% 6/36	11.1% 1/9
		Patient awaiting surgery	9.6% 200/2088	8.3% 3/36	22.2% 2/9
		Patient presenting confusion	5.7% 120/2088	0% 0/36	11.1% 1/9
		Patient on end of life plan	0% 1/2088	0% 0/36	-
		Patient being transferred to another hospital	0.1% 2/2088	0% 0/36	0% 0/9
		Patient unresponsive	0.3% 6/2088	0% 0/36	0% 0/9
		Patient being discharged to nursing/ residential care	6.5% 136/2088	0% 0/36	0% 0/9
		Not recorded	-	-	22.2% 2/9
Other	0% 0/2088	0% 0/36	0% 0/9		

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	30.8% 12/39	40% 8/20
		24 hours	12.2% 897/7329	23.1% 9/39	0% 0/20
		25 - 48 hours	14.7% 1075/7329	0% 0/39	5% 1/20
		More than 48 hours	27.1% 1985/7329	38.5% 15/39	0% 0/20
		No notice at all	0.5% 35/7329	0% 0/39	5% 1/20
		Not documented	24.2% 1770/7329	5.1% 2/39	50% 10/20
		No carer, family, friend/ could not contact	1.8% 132/7329	0% 0/39	0% 0/20
		Patient specified information withheld	0% 3/7329	0% 0/39	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	75% 6/8

Appendix D: Carer demographics

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

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

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

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	33.5% (1558)	-% (-)
Family member	55.9% (2597)	-% (-)
Friend	4.4% (203)	-% (-)
Professional carer (health or social care)	5.4% (249)	-% (-)
Other	0.9% (41)	-% (-)

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

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	-% -/-
		43.3% 1980/4578	-% -/-
		10.2% 468/4578	-% -/-
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	-% -/-
		36.4% 1672/4592	-% -/-
		9.4% 431/4592	-% -/-
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	-% -/-
		34.2% 1515/4433	-% -/-
		10.4% 462/4433	-% -/-
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		76% 3471/4569	-% -/-
		20.8% 952/4569	-% -/-
		3.2% 146/4569	-% -/-

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	-% -/-
		Yes, to some extent	40.4% 1843/4566	-% -/-
		No	17.8% 815/4566	-% -/-
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	-% -/-
		Yes, to some extent	36.4% 1637/4497	-% -/-
		No	16.1% 722/4497	-% -/-
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	-% -/-
		Yes, to some extent	34.5% 1563/4524	-% -/-
		No	20.1% 908/4524	-% -/-

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	-% -/-
		Very good	33.9% 1575/4645	-% -/-
		Good	17% 790/4645	-% -/-
		Fair	9.6% 446/4645	-% -/-
		Poor	5% 232/4645	-% -/-
	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	-% -/-
		Likely	34.1% 1551/4544	-% -/-
		Neither likely nor unlikely	14.3% 648/4544	-% -/-
		Unlikely	4.8% 220/4544	-% -/-
		Extremely unlikely	4.2% 192/4544	-% -/-

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	-% -/-
		Somewhat satisfied	34% 1487/4379	-% -/-
		Somewhat dissatisfied	9.9% 434/4379	-% -/-
		Very dissatisfied	5.8% 254/4379	-% -/-

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)	38.4% (43)
26 - 50%	25.6% (3651)	17% (19)
51 - 75%	24.4% (3489)	27.7% (31)
More than 75%	18.1% (2588)	17% (19)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	15.7% (2260)	17% (19)
Female	83.2% (11954)	81.3% (91)
Other	0.2% (34)	0% (0)
Prefer not to say	0.8% (113)	1.8% (2)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	79.9% (11467)	92% (103)
Black/ Black British	4.1% (594)	0.9% (1)
Asian/ Asian British	8% (1150)	2.7% (3)
Mixed	1.3% (183)	0% (0)
Chinese	0.5% (73)	0.9% (1)
Other	4.5% (646)	1.8% (2)
Prefer not to say	1.7% (241)	1.8% (2)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	29.9% (4300)	21.4% (24)
Registered nurse (Band 7 or above)	12.7% (1831)	18.8% (21)
Healthcare assistant	23.1% (3324)	14.3% (16)
Doctor	11.5% (1645)	19.6% (22)
Allied healthcare professional	11.9% (1713)	16.1% (18)
Therapy assistant/ allied healthcare professional assistant	2.6% (367)	4.5% (5)
Student	2.3% (332)	2.7% (3)
Ward based administrators	4% (571)	0.9% (1)
Other/ unknown	1.9% (279)	1.8% (2)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	13% (1866)	17.9% (20)
30 hours or more	87% (12458)	82.1% (92)

Time worked in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Less than 6 months	8% (1148)	8% (9)
6 - 11 months	9.5% (1364)	2.7% (3)
1 - 2 years	15.6% (2242)	21.4% (24)
3 - 5 years	16.4% (2350)	11.6% (13)
6 - 10 years	15.9% (2283)	14.3% (16)
11 - 15 years	12.1% (1739)	14.3% (16)
More than 15 years	22.4% (3205)	27.7% (31)

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	18.4% 19/103	39.8% 41/103
		Yes, most of the time	32.9% 4614/14024		21.4% 22/103	
		Yes, sometimes	26.8% 3760/14024	-	41.7% 43/103	-
		No	11.6% 1624/14024	-	18.4% 19/103	-
	1b	Out of office hours				
		Yes, always	7.8% 874/11207	23.5% 2637/11207	4.8% 4/84	8.3% 7/84
		Yes, most of the time	15.7% 1763/11207		3.6% 3/84	
		Yes, sometimes	27.9% 3129/11207	-	33.3% 28/84	-
No		48.6% 5441/11207	-	58.3% 49/84	-	

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]	2	What form did your dementia training at this hospital take? <i>Please tick all that apply:</i>	
		42.8% 5653/13205	79.6% 82/103
		53.2% 7030/13205	7.8% 8/103
		5.4% 713/13205	4.9% 5/103
		7.7% 1018/13205	26.2% 27/103
		7.3% 961/13205	4.9% 5/103
		17.3% 2278/13205	12.6% 13/103
	2a	Following your training at this hospital, do you feel better prepared to provide care/ support to people with dementia?	
		42.2% 4502/10670	21.6% 19/88
		50.5% 5390/10670	63.6% 56/88
	7.3% 778/10670	14.8% 13/88	

Information and communication

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)	
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	9.9% 11/111	42.3% 47/111
		Yes, most of the time	38.5% 5525/14345		32.4% 36/111	
		Yes, sometimes	33% 4734/14345	-	49.5% 55/111	-
		No	7.1% 1014/14345	-	8.1% 9/111	-
	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	16.5% 17/103	53.4% 55/103
		Yes, most of the time	40.9% 5454/13329		36.9% 38/103	
		Yes, sometimes	30.6% 4074/13329	-	43.7% 45/103	-
		No	1.9% 252/13329	-	2.9% 3/103	-
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	25.9% 29/112	50.9% 57/112
		Yes, most of the time	33.2% 4759/14333		25% 28/112	
		Yes, sometimes	27.3% 3913/14333	-	35.7% 40/112	-
	No	10.6% 1516/14333	-	13.4% 15/112	-	

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	48.4% 46/95
		Occasionally	37.2% 4636/12457	37.9% 36/95
		Almost Never	9.7% 1210/12457	11.6% 11/95
		Never	3.3% 408/12457	2.1% 2/95

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	19.1% 17/89	53.9% 48/89
		Yes, most of the time	27.3% 3271/11978		34.8% 31/89	
		Yes, sometimes	16.1% 1927/11978	-	38.2% 34/89	-
		No	5.4% 649/11978	-	7.9% 7/89	-
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	20.2% 19/94	63.8% 60/94
		Yes, most of the time	50.1% 6149/12263		43.6% 41/94	
		Yes, sometimes	19.2% 2357/12263	-	29.8% 28/94	-
		No	4.7% 576/12263	-	6.4% 6/94	-

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	35% 21/60	71.7% 43/60
		Yes, most of the time	47.6% 4352/9148		36.7% 22/60	
		Yes, sometimes	18.7% 1708/9148	-	20% 12/60	-
		No	3.3% 303/9148	-	8.3% 5/60	-
	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	5% 3/60	18.3% 11/60
		Yes, most of the time	27.5% 2516/9143		13.3% 8/60	
		Yes, sometimes	42.5% 3887/9143	-	48.3% 29/60	-
		No	19.3% 1763/9143	-	33.3% 20/60	-
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	6.7% 4/60	30% 18/60
		Yes, most of the time	32.5% 2942/9047		23.3% 14/60	
		Yes, sometimes	27.7% 2506/9047	-	31.7% 19/60	-
	No	23.5% 2125/9047	-	38.3% 23/60	-	

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)	
3.7 [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	28.6% 16/56	66.1% 37/56
		Yes, most of the time	39.3% 3456/8788		37.5% 21/56	
		Yes, sometimes	16.8% 1476/8788	-	19.6% 11/56	-
		No	15.6% 1368/8788	-	14.3% 8/56	-
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	47.3% 26/55	72.7% 40/55
		Yes, most of the time	27.2% 2398/8822		25.5% 14/55	
		Yes, sometimes	22.5% 1983/8822	-	14.5% 8/55	-
		No	12.3% 1085/8822	-	12.7% 7/55	-
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	52.5% 31/59	81.4% 48/59
		Yes, most of the time	28.7% 2615/9119		28.8% 17/59	
		Yes, sometimes	20.7% 1886/9119	-	16.9% 10/59	-
		No	6.1% 558/9119	-	1.7% 1/59	-
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	45.8% 27/59	71.2% 42/59
		Yes, most of the time	33.4% 3039/9090		25.4% 15/59	
		Yes, sometimes	15.5% 1408/9090	-	25.4% 15/59	-
		No	4.9% 444/9090	-	3.4% 2/59	-

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 Cumberland Infirmary are provided.

Registered Nurses (Band 5 or 6)
A larger specialist environment. More space/ diversional therapy. Patients need to do things to pass the time/ orientate/ stimulate.
By not moving patients with dementia from one ward to another during the evenings and at night.
Extra activities such as dance recall and therapy led groups need to be fully implemented.
Have more stimulating things on the ward to help keep occupied and something to do. Books radios, board games, jigsaws.
Improved dementia training for all staff.
Is the usual admission for planned surgery process always appropriately managed? E.g. staffing and environmental needs.
More in depth training. Offer dementia diploma to staff.
More staff as some patients require one to one care due to high falls risk and behavioural issues. No out of hours support from mental health services. Referrals to mental health teams should be picked up quicker.
More training, specialist nurses, daily activities, more staff.
More use of the Butterfly scheme. More support and learning activities with specialists for example, face-to-face workshops, a dementia day.
Patients with dementia have limited access to material which helps them to orientate themselves e.g. TV, newspapers. All wards need access to TV, radio. Environment is not consistent, get moved about, not allowing them to establish a routine. Infection control takes precedence over those with dementia so they get moved about. Family members that they live with need encouragement to support them in hospital. No facilities for allowing food to be heated on the ward to fit person's preference. Some wards have bulk trolleys which is better for those with dementia as they cannot remember what they ordered 24 hours ago. Facilities should be available for small bulk trolleys on wards with high level of inpatients with dementia. Need a cupboard with snacks, biscuits etc.
Patients with dementia shouldn't be moved at inappropriate times to inappropriate wards! They tend to be sent to elderly medical wards just because they have dementia and usually have complex discharge needs. Also, patients with dementia who also have other sensory impairments i.e. sight, find it very difficult to communicate with staff their needs and there isn't enough resources available to accommodate their needs i.e. sign language trained staff. The ones available through deaf vision are few and far, between them, patients wait a long time to be seen! Most patients with dementia die from it due to malnutrition and anorexia because they often refuse to eat! Further training and additional support is required to avoid this from happening.
Provide better support/ trainings for staff, especially the one dealing with dementia patients on daily basis.
Providing better way to approach them. Butterfly scheme. Making sure there is enough staff to handle patients with dementia properly.
Stop/ prevent moves of patients with dementia during the night. Also, prevent multiple moves on wards.
This could be done by giving our ward (dementia and delirium unit) more recognition as a speciality. We have never to my knowledge been given funds to train staff, and for equipment for our patients, our ward was recently refurbished in a dementia friendly style and we were so proud. Less than a year later, we were moved onto a space on the ward next door, to address staffing issues by amalgamating two wards. The

Registered Nurses (Band 5 or 6)

stroke unit now occupy our ward, and we are 'back to square one' in an area that is totally unsuitable for our patients once again. Staff on our ward feel we, and our dementia patients are NEVER treated fairly and always seem to be last to benefit, if ever.

To have dementia champions on the wards to enhance patient care.

We are open ward which back onto another ward so patients are not encouraged to walk around unsupervised as they could get lost and don't have enough staff to supervise doors at entrances to wards. An activities person would be beneficial as there is little for our patients to do during the day. We don't even have televisions or radios to stimulate patients to time, date etc.

Registered Nurses (Band 7 or above)

A purpose built and refurbished ward that was dementia friendly was created and the ward was then reallocated within months due to reconfiguration of services and staffing pressures. This fantastic ward environment for patients with dementia then became a general elderly care area. A real shame after all the hard work. A dementia support group may be a good idea?

Address staffing issues.

Better consideration should be given when dementia patients are moved from EAU (emergency assessment unit). Too many medical outliers with dementia are decanted to surgical ward, should be final destination ward to optimise patient care.

Better staffing. Patients often requires 1 to 1 care when agitated.

Clearer signage (only available on elderly care ward). Dedicated dementia ward with dementia trained staff. Open visiting, not only if providing personal care/feeding etc. Activities appropriate to need (music, photographs of home town etc.)

Dementia specialist nurses.

Give them some tasks to do, like ironing or folding clothes.

Implement John's campaign.

Increase staffing.

Launch of John's campaign planned which will formalise the agreement for carers to interact with care needs outside of visiting time.

More staff to assist with basic needs and wandering patients.

Raise the profile of the butterfly scheme.

Stop patient movement between wards, especially at night. Improve environment.

The hospital could actually give us the time and means in which to provide care for patients with dementia, which is certainly not the case for this neglected group of patients at the moment.

Healthcare Assistants

Different coloured plates - some people who suffer dementia struggle to see foods white in colour like pasta, cauliflower and potatoes.

Having more staff on duty.

Improve the environment to help re-orientate patients.

More 1 to 1 staffing for patients with dementia and more activities for patients with dementia.

More activities for patients. Games or groups for patients to be able to participate in.

More activities upon the ward, for example, TVs, word searches puzzles or quizzes, maybe bingo.

More information.

More staff to provide 1 to 1 care.

More training, more staff.

Ward layout is not really appropriate for dementia patients. The ward is too busy with people walking through to other wards. Staff receive very little in the way of specific dementia training. Most of my training has been on the job learning as you go on. Not enough stimulation on ward level for dementia patients. Menu could do with having more meals on that older people will be used to eating. Pasta is something that is new to older people and doesn't really go down well.

Doctors

A lead for dementia would be a good start.

Arranging multidisciplinary team care so patients with dementia can get home to the environment they are comfortable in quicker.

Dementia leadership.

Firstly, by recognising people with dementia. Due to lack of nursing staff in my ward, I felt that people with dementia are not well looked after. Often, what they felt and what they thought, are not valued as much because of their underlying medical condition.

Gain access or have access to community systems already in place to support such individuals regarding immediate access to current prescriptions for unplanned hospital admissions.

Have more time and resources to complete proper assessments and to have ready access to community support/ care.

I do intraocular surgery on many patients with dementia under local anaesthesia. Many others assume that this cannot be done and give a general anaesthetic, which is stressful and confusing.

Improve patient flow so that these patients do not wait for days in an acute medical unit waiting for an elderly care bed, as their needs are often not going to be met in this environment through no fault of the staff who are already stretched and doing their best.

Increase the number of dementia specialist nurses.

Involve their carers more and make them a more visible part of the team. Inadequate staff to provide patients with sufficient food at drink often. We should encourage those close to the patient to be more involved. Why not get rid of strict visiting times?

Look after them as normal person.

More information leaflets to all clinical areas.

More widespread use of "this is me" document, more single rooms, better layout of ward - some are areas between one ward and another so patients cannot wander and get lost or agitated. Higher nursing staffing levels for more 1:1 care. More occupational therapy or volunteer input to improve quality of life e.g.

Doctors

activities to keep patients amused and stimulated. "This is me" document sometimes not filled in by relatives.

Not move them from one ward to another.

Recognising their prognosis when ordering investigations and only investigating when there is a real benefit to the patient and always trying to find the least invasive approach and at the same time, understanding the distress even simple tests may cause.

Training on surgical or medical governance away day.

Allied Healthcare Professionals

A practical guide/ checklist from professionals who deal specifically with patients with dementia as to how to get patients to stay still for their treatment would be helpful.

Better staffing to allow more one to one care.

Getting patients with dementia to appropriate wards as quickly as possible - less changing of wards.

Having rooms on the ward that are inviting and comfortable for patients with dementia.

Huge need for increased staffing to allow healthcare staff to offer a more personal and one on one nursing required for dementia patients.

Improvement in use of butterfly scheme. Increase in group work to stimulate patients on ward.

Mandatory training for staff who may come into contact patients with dementia.

Meal provision has been changed to bulk trolley with choice at point of service on main dementia care ward, which is different from general wards.

More ward staff, such as healthcare [assistants] and nurses to spend time learning about the patient's preferences from the patient and family. More staff to provide support with assisting patients at mealtimes to ensure the optimum nutrition. More support from social care establishments to refer patients to.

Morning staff huddle on the ward to disseminate which patients have specific needs for all team members, including AHPs who will come into contact with the patient during their stay on the ward and in the lab.

Spending more time with patients and finding out their likes/ dislikes, daily routine.

To not move patients from a dementia friendly specific ward to a ward without those considerations. For all staff to have more training for dementia patients as more patients appear to coming in to hospital to different wards who have dementia.

Students

Environment/ services available for example, a garden for dementia patients. Patients request to have a "change of scenery".

More support out of hours for patients with dementia. Moving patients throughout the night from ward to ward should not be allowed. I feel as if this agitates them more, making for an unsettled night for the patient.

Student nurses to have dementia training.

Therapy Assistants & Allied Healthcare Professional Assistants

I feel there are variations on each ward as to how our dementia patients are cared for. Not all patients have documentation highlighting their individual needs i.e. how best to handle them when they are distressed or strategies that help day to day.

Increase in staffing levels.

More staff training to give them a better understanding of what is like for a person living with dementia so that we can meet their needs better.

Stop moving patients as often who have dementia as this can cause setbacks in rehab.

Ward-based Administrators

More activities for the patients. Staff are always too busy doing the patient care etc. Someone should be designated to provide activities to help the patients.

Other / Unknown

Continue to provide opportunities for all staff to increase i) awareness and ii) access to training available for dementia i.e. introduction to dementia in mandatory training.

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