

National Audit of Dementia
Care in General Hospitals 2016-2017

Local report appendices for:

Macclesfield District General Hospital

East Cheshire NHS 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	In development	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	Yes	New question for Round 3
		Pathway in development	26.6% 46/173		
		Stroke			
		Yes	32.9% 57/173	No	New question for Round 3
		Pathway in development	21.4% 37/173		
		Fractured neck of femur			
		Yes	43.6% 75/172	No	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	No	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	No	Yes
	4b	Complaints – analysed by age (y/n)	52.3% 104/199	No	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	No	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	Yes
	5b	Ward level (y/n)	93.5% 186/199	Yes	No
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:		Ward 5		New question for Round 3
	Ward 2:		Ward 9		
	Ward 3:		Ward 7		
	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]	<i>(If Q21=Yes)</i> Please say what this is:				
	21a	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	-	
	22	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	No
	<i>(If Q22=Yes)</i> Please say what this is:				
	22a	A visual indicator, symbol or marker	87.1% 122/140	-	N/A
		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	√		
9.13 [2]	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	No	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	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	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)	0% (0)
66 - 80	24.3% (2445)	30% (15)
81 - 100	73% (7332)	70% (35)
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	67 - 96
Mean	84	83.9
Median	85	85.5

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	40.1% (4029)	22% (11)
Female	59.9% (6018)	78% (39)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	82.1% (8250)	100% (50)
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% (50)
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)	30% (15)
Fall	13.3% (1332)	16% (8)
Urinary/ renal	9% (901)	4% (2)
Hip dislocation/ hip fracture	7.5% (754)	6% (3)
Sepsis	6.3% (633)	2% (1)
Delirium/ confusion	6% (604)	6% (3)
Gastrointestinal	5.9% (595)	4% (2)
Cardiac/ vascular	5.1% (517)	0% (0)
Stroke	3.8% (380)	2% (1)
Neurological	3.6% (364)	6% (3)
Skin lacerations/ lesions	2% (204)	2% (1)
Impaired consciousness	2% (198)	4% (2)
Dementia**	1.9% (195)	0% (0)
Other	1.9% (192)	0% (0)
Unable to cope/ frailty	1.6% (160)	2% (1)
Dehydration	1.4% (143)	2% (1)
Haematology	1.1% (115)	2% (1)
Endocrine/ metabolic	1.1% (112)	2% (1)
Other fractures	1% (96)	4% (2)
Cancer	0.9% (94)	2% (1)
Surgical/ non-surgical procedure	0.9% (86)	0% (0)
Pain/ swelling	0.8% (85)	0% (0)
Hepatology	0.8% (84)	2% (1)
Oral/ visual/ auditory	0.4% (45)	0% (0)
Rheumatic	0.4% (45)	2% (1)
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)	30% (15)
General Medical	23.5% (2359)	0% (0)
Other Medical	9.9% (999)	34% (17)
Orthopaedics	8.9% (892)	12% (6)
Surgical	6.8% (681)	14% (7)
Stroke	4.5% (456)	6% (3)
Cardiac	2.5% (248)	4% (2)
Other	1.4% (136)	0% (0)
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)	18% (9)
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)	4.9% (2)
Received end of life care in hospital/ was on an end of life care plan	13% (1302)	12% (6)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
2 - 10 days	45.3% (4553)	48% (24)
11 – 20 days	25.5% (2559)	28% (14)
21 – 30 days	11.3% (1132)	10% (5)
31 – 40 days	6.7% (671)	2% (1)
41 – 50 days	4.2% (418)	4% (2)
51 – 60 days	2.3% (230)	6% (3)
61 – 70 days	1.7% (168)	2% (1)
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	3-66
Median (days)	12	11

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)	36% (18)	17.1% (7)
Respite care	0.8% (80)	1.6% (136)	0% (0)	2.4% (1)
Rehabilitation	0.4% (37)	2.4% (207)	0% (0)	0% (0)
Psychiatric ward	0.5% (48)	0.7% (62)	2% (1)	0% (0)
Carer's home	2.1% (212)	2.1% (181)	6% (3)	4.9% (2)
Intermediate care	0.3% (27)	2% (172)	0% (0)	4.9% (2)
Residential care	16.9% (1701)	17.7% (1551)	30% (15)	29.3% (12)
Nursing home	19.7% (1981)	28.7% (2511)	20 (10)	41.5% (17)
Palliative care	0% (5)	0.6% (54)	0 (0)	0% (0)
Transfer from another hospital	1.4% (145)	3.9% (343)	6% (3)	0% (0)
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)	63.4% (26)
Own/ carer's home to nursing/ residential care	11.1% (972)	14.6% (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%)	97.3% 36/37	100% 33/33	
	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%)	82% 41/50	92.5% 37/40	
	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%)	97.6% 40/41	91.4% 32/35
		Other action taken	4% 352/8822 (2%, 0-5%)	2.4% 1/41	New answer options for Round 3	
	Yes or other action taken	89.9% 7932/2288 (93%, 85-98%)	100% 41/41			
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%)	94% 47/50	100% 40/40	
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%)	90% 45/50	92.3% 36/39	
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%)	90% 45/50	80% 32/40	

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%)	2.6% 1/38	19.4% 7/36
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	42.8% 3977/9294 (44%, 26-58%)	71.1% 27/38	New answer options for Round 3
		Yes, other	1.7% 161/9294 (0%, 0-2%)	7.9% 3/38	
		Yes (all options)	89.8% 8350/9294 (92%, 85-96%)	81.6% 31/38	

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%)	75% 21/28	47.1% 16/34
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%)	40% 20/50	47.5% 19/40
		Yes, but there was no indication that delirium may be present	18.5% 1863/10047 (15%, 6-25%)	24% 12/50	20% 8/40
		Yes (both options)	44.5% 4466/10047 (42%, 27-60%)	64% 32/50	67.5% 27/40
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% 20/20	100% 19/19

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%)	10% 5/50	2.5% 1/40
	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%)	80% 4/5	100% 1/1
		Unknown*	33.1% 1865/5626 (14%, 0-44%)	20% 1/5	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%)	80% 4/5	New question for Round 3
		Unknown*	34.1% 1916/5616 (16%, 3-48%)	20% 1/5	
	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%)	80% 4/5	100% 1/1
		Unknown*	29.9% 1685/5631 (13%, 0-37%)	20% 1/5	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%)	80% 4/5	100% 1/1
		Unknown*	37.8% 2110/5583 (20%, 5-50%)	20% 1/5	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%)	80% 4/5	0% 0/1
		Unknown*	39.1% 2167/5539 (20%, 7-52%)	20% 1/5	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%)	60% 3/5	100% 1/1
		Unknown*	35.3% 1977/5598 (17%, 3-46%)	20% 1/5	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%)	8.3% 3/36	13.3% 4/30
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	3.3% 189/5690	15.2% 5/33	New question for Round 3
		Patient has advanced dementia (i.e. patient's advanced dementia makes the assessment not appropriate)	1.9% 110/5690	15.2% 5/33	
		Not routine/ not standard practice	5.8% 331/5690	3% 1/33	
		Not documented/ unknown reason	78.1% 4444/5690	24.2% 8/33	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	10.8% 616/5690	42.4% 14/33		
	24	At the point of discharge the cause of cognitive impairment was summarised and recorded: (y/n)	69.1% 5067/7329 (72%, 57-84%)	94.4% 34/36	73.3% 22/30
	25	Have there been any symptoms of delirium? (y/n)	32.3% 2367/7329 (33%, 22-41%)	50% 18/36	50% 15/30
	25a	<i>(If Q25=Yes)</i> Have the symptoms of delirium been summarised for discharge? (y/n)	47.9% 1133/2367 (45%, 33-64%)	44.4% 8/18	40% 6/15
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%)	33.3% 12/36	23.3% 7/30	
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%)	8.3% 1/12	28.6% 2/7	

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% 10/10	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% 10/10	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%)	0% 0/10	
		The patient lacked requisite capacity and evidence of a best interests decision has been recorded	69.9% 811/1161 (75%, 50-90%)	40% 4/10	
		There is no record of either consent or best interest decision making*	18.3% 212/1161 (14%, 0-33%)	60% 6/10	
	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% 0/10	
	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%)	40% 4/10	
		No consent or best interests (response options combined)	33.8% 558/1649 (33%, 14-50%)	60% 6/10	

*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%)	38.9% 14/36	56.7% 17/30
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%)	50% 8/16	52.9% 9/17
	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%)	91.4% 32/35	82.8% 24/29
	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%)	36.1% 13/36	56.7% 17/30
	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%)	61.1% 22/36	60% 18/30
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%)	97.2% 35/36	96.7% 29/30
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%)	58.3% 21/36	63.3% 19/30
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% 36/36	93.3% 28/30
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% 36/36	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%)	90.5% 19/21	93.1% 27/29
	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	86.7% 13/15	0% 0/1
		Patient awaiting assessment	9.1% 190/2088	0% 0/15	0% 0/1
		Patient awaiting history/ results	6.1% 127/2088	6.7% 1/15	0% 0/1
		Patient awaiting surgery	9.6% 200/2088	6.7% 1/15	100% 1/1
		Patient presenting confusion	5.7% 120/2088	0% 0/15	0% 0/1
		Patient on end of life plan	0% 1/2088	0% 0/15	-
		Patient being transferred to another hospital	0.1% 2/2088	0% 0/15	0% 0/1
		Patient unresponsive	0.3% 6/2088	0% 0/15	0% 0/1
		Patient being discharged to nursing/ residential care	6.5% 136/2088	0% 0/15	0% 0/1
		Not recorded	-	-	0% 0/1
		Other	0% 0/2088	0% 0/15	0% 0/1

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	38.9% 14/36	36.7% 11/30
		24 hours	12.2% 897/7329	33.3% 12/36	26.7% 8/30
		25 - 48 hours	14.7% 1075/7329	11.1% 4/36	23.3% 7/30
		More than 48 hours	27.1% 1985/7329	16.7% 6/36	6.7% 2/30
		No notice at all	0.5% 35/7329	0% 0/36	0% 0/30
		Not documented	24.2% 1770/7329	0% 0/36	6.7% 2/30
		No carer, family, friend/ could not contact	1.8% 132/7329	0% 0/36	0% 0/30
		Patient specified information withheld	0% 3/7329	0% 0/36	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%)	60% 3/5	77.8% 7/9

Appendix D: Carer demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
18 – 24 years	1% (48)	0% (0)
25 – 34 years	2.9% (133)	0% (0)
35 – 44 years	5.6% (259)	0% (0)
45 – 54 years	16.2% (749)	8% (2)
55 – 64 years	25.8% (1193)	32% (8)
65 – 74 years	20.8% (960)	24% (6)
75 – 84 years	19.1% (885)	16% (4)
85 years or over	7.4% (343)	16% (4)
Prefer not to say	1.2% (56)	4% (1)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	30.6% (1413)	24% (6)
Female	68.1% (3150)	76% (19)
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)	96% (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)	4% (1)

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	33.5% (1558)	37.5% (9)
Family member	55.9% (2597)	58.3% (14)
Friend	4.4% (203)	4.2% (1)
Professional carer (health or social care)	5.4% (249)	0% (0)
Other	0.9% (41)	0% (0)

One of main carers for patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Yes	77.8% (3356)	77.3% (17)

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	50% 12/24
		43.3% 1980/4578	37.5% 9/24
		10.2% 468/4578	12.5% 3/24
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	68% 17/25
		36.4% 1672/4592	20% 5/25
		9.4% 431/4592	12% 3/25
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	69.6% 16/23
		34.2% 1515/4433	17.4% 4/23
		10.4% 462/4433	13% 3/23
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		76% 3471/4569	80% 20/25
		20.8% 952/4569	12% 3/25
		3.2% 146/4569	8% 2/25

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	36% 9/25
		Yes, to some extent	40.4% 1843/4566	48% 12/25
		No	17.8% 815/4566	16% 4/25
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	36% 9/25
		Yes, to some extent	36.4% 1637/4497	40% 10/25
		No	16.1% 722/4497	24% 6/25
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	45.5% 10/22
		Yes, to some extent	34.5% 1563/4524	31.8% 7/22
		No	20.1% 908/4524	22.7% 5/22

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?	
		34.5% 1602/4645	40% 10/25
		33.9% 1575/4645	32% 8/25
		17% 790/4645	16% 4/25
		9.6% 446/4645	8% 2/25
		5% 232/4645	4% 1/25
	9	How likely would you be to recommend the service to friends and family if they needed similar care or treatment?	
		42.5% 1933/4544	36% 9/25
		34.1% 1551/4544	36% 9/25
		14.3% 648/4544	20% 5/25
		4.8% 220/4544	0% 0/25
		4.2% 192/4544	8% 2/25

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?	
		50.3% 2204/4379	69.6% 16/23
		34% 1487/4379	30.4% 7/23
		9.9% 434/4379	0% 0/23
		5.8% 254/4379	0% 0/23

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)	23% (23)
26 - 50%	25.6% (3651)	41% (41)
51 - 75%	24.4% (3489)	18% (18)
More than 75%	18.1% (2588)	18% (18)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	15.7% (2260)	10% (10)
Female	83.2% (11954)	89% (89)
Other	0.2% (34)	0% (0)
Prefer not to say	0.8% (113)	1% (1)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	79.9% (11467)	90% (90)
Black/ Black British	4.1% (594)	2% (2)
Asian/ Asian British	8% (1150)	3% (3)
Mixed	1.3% (183)	0% (0)
Chinese	0.5% (73)	0% (0)
Other	4.5% (646)	3% (3)
Prefer not to say	1.7% (241)	2% (2)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	29.9% (4300)	25.7% (26)
Registered nurse (Band 7 or above)	12.7% (1831)	20.8% (21)
Healthcare assistant	23.1% (3324)	39.6% (40)
Doctor	11.5% (1645)	5% (5)
Allied healthcare professional	11.9% (1713)	6.9% (7)
Therapy assistant/ allied healthcare professional assistant	2.6% (367)	0% (0)
Student	2.3% (332)	0% (0)
Ward based administrators	4% (571)	2% (2)
Other/ unknown	1.9% (279)	0% (0)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	13% (1866)	13.9% (14)
30 hours or more	87% (12458)	86.1% (87)

Time worked in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Less than 6 months	8% (1148)	7.9% (8)
6 - 11 months	9.5% (1364)	8.9% (9)
1 - 2 years	15.6% (2242)	9.9% (10)
3 - 5 years	16.4% (2350)	18.8% (19)
6 - 10 years	15.9% (2283)	18.8% (19)
11 - 15 years	12.1% (1739)	13.9% (14)
More than 15 years	22.4% (3205)	21.8% (22)

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: % <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>		
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	18.8% 18/96	52.1% 50/96	
		Yes, most of the time	32.9% 4614/14024		33.3% 32/96		
		Yes, sometimes	26.8% 3760/14024	-	32.3% 31/96	-	
		No	11.6% 1624/14024	-	15.6% 15/96	-	
		1b	Out of office hours				
			Yes, always	7.8% 874/11207	23.5% 2637/11207	8.3% 7/84	22.6% 19/84
			Yes, most of the time	15.7% 1763/11207		14.3% 12/84	
	Yes, sometimes		27.9% 3129/11207	-	26.2% 22/84	-	
	No	48.6% 5441/11207	-	51.2% 43/84	-		

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]	What form did your dementia training at this hospital take? <i>Please tick all that apply:</i>			
	2	eLearning	42.8% 5653/13205	53.8% 50/93
		Workshop/ study day	53.2% 7030/13205	38.7% 36/93
		Higher education module	5.4% 713/13205	3.2% 3/93
		Workbook	7.7% 1018/13205	28% 26/93
		Other	7.3% 961/13205	10.8% 10/93
		I have not received any dementia training at this hospital	17.3% 2278/13205	12.9% 12/93
	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	36.3% 29/80
		Yes, somewhat better prepared	50.5% 5390/10670	57.5% 46/80
No		7.3% 778/10670	6.3% 5/80	

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	17.8% 18/101	63.4% 64/101
		Yes, most of the time	38.5% 5525/14345		45.5% 46/101	
		Yes, sometimes	33% 4734/14345	-	31.7% 32/101	-
		No	7.1% 1014/14345	-	5% 5/101	-
	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	21.9% 21/96	67.7% 65/96
		Yes, most of the time	40.9% 5454/13329		45.8% 44/96	
		Yes, sometimes	30.6% 4074/13329	-	31.3% 30/96	-
		No	1.9% 252/13329	-	1% 1/96	-
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	28.7% 29/101	58.4% 59/101
		Yes, most of the time	33.2% 4759/14333		29.7% 30/101	
		Yes, sometimes	27.3% 3913/14333	-	31.7% 32/101	-
	No	10.6% 1516/14333	-	9.9% 10/101	-	

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	52.6% 51/97
		Occasionally	37.2% 4636/12457	30.9% 30/97
		Almost Never	9.7% 1210/12457	15.5% 15/97
		Never	3.3% 408/12457	1% 1/97

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	41.9% 39/93	69.9% 65/93
		Yes, most of the time	27.3% 3271/11978		28% 26/93	
		Yes, sometimes	16.1% 1927/11978	-	24.7% 23/93	-
		No	5.4% 649/11978	-	5.4% 5/93	-
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	24.5% 24/98	71.4% 70/98
		Yes, most of the time	50.1% 6149/12263		46.9% 46/98	
		Yes, sometimes	19.2% 2357/12263	-	22.4% 22/98	-
		No	4.7% 576/12263	-	6.1% 6/98	-

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	27.7% 23/83	80.7% 67/83
		Yes, most of the time	47.6% 4352/9148		53% 44/83	
		Yes, sometimes	18.7% 1708/9148	-	14.5% 12/83	-
		No	3.3% 303/9148	-	4.8% 4/83	-
	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	15.5% 13/84	42.9% 36/84
		Yes, most of the time	27.5% 2516/9143		27.4% 23/84	
		Yes, sometimes	42.5% 3887/9143	-	44% 37/84	-
		No	19.3% 1763/9143	-	13.1% 11/84	-
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	19.3% 16/83	61.4% 51/83
		Yes, most of the time	32.5% 2942/9047		42.2% 35/83	
		Yes, sometimes	27.7% 2506/9047	-	27.7% 23/83	-
	No	23.5% 2125/9047	-	10.8% 9/83	-	

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	30.4% 24/79	74.7% 59/79
		Yes, most of the time	39.3% 3456/8788		44.3% 35/79	
		Yes, sometimes	16.8% 1476/8788	-	11.4% 9/79	-
		No	15.6% 1368/8788	-	13.9% 11/79	-
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	34.6% 28/81	64.2% 52/81
		Yes, most of the time	27.2% 2398/8822		29.6% 24/81	
		Yes, sometimes	22.5% 1983/8822	-	24.7% 20/81	-
		No	12.3% 1085/8822	-	11.1% 9/81	-
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	33.7% 29/86	67.4% 58/86
		Yes, most of the time	28.7% 2615/9119		33.7% 29/86	
		Yes, sometimes	20.7% 1886/9119	-	25.6% 22/86	-
		No	6.1% 558/9119	-	7% 6/86	-
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	43% 37/86	86% 74/86
		Yes, most of the time	33.4% 3039/9090		43% 37/86	
		Yes, sometimes	15.5% 1408/9090	-	9.3% 8/86	-
		No	4.9% 444/9090	-	4.7% 4/86	-

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 Macclesfield District General Hospital are provided.

Registered Nurses (Band 5 or 6)
Access to music possibly with headphones/ activities, we have no televisions on the ward and it's a very boring environment/ no stimulation. Sometimes patients with dementia that get admitted become medically fit and are waiting for social input e.g. a nursing home placement and can be on the ward (acute medical ward) for long periods of time (weeks rather than days). [Perhaps] better place for them to be while they wait - as patients can become very distressed.
Accommodate more living areas as to promote day time/ night time routines.
Activities/ distraction.
Better liaison and cooperation with specialist mental health services.
By having an area that's suitable for patients to go to that they can reflect on their past i.e. pictures, books etc. I think there should be more services available for people with dementia. I think the ward environment can be very difficult at times to spend time with a patient with dementia, due to workload and other pressures.
By having more easily accessible community support groups.
By providing more entertainment for patients i.e. a day room with TV, books games.
Dementia nurse specialist to aid in the care of patients with dementia.
Ensure all wards are staffed safely, encourage family/ friends to visit more frequently, access volunteers and train them to assist where appropriate. Ensure all staff are offered training. Nursing patients with dementia on mainstream wards poses a tremendous challenge, especially if the ward has another specialist need. Staffing shortages also makes the task more difficult. Caring for a patient with dementia should have staff with the knowledge/ skills and the designated time to support the individual needs of this group of patients.
Ensure staffing is maximised and had training in care of patients with dementia. Provide access for family to visit out of normal visiting times.
Families need to be included more to gather information about their loved one.
Finger foods, additional meal/ snack rounds. Cold food (sandwiches) readily available all the time on wards with dementia patients, open visiting for family to assist with meals, more staff allocated to a role of ensuring patients eat - and at their own pace. More staff to support dementia patients effectively.
Having staff available to 1:1 the patient, this is not always the case. Staff having dementia training, training on communication with patients with dementia, activity packs available for patients.
Increase of staff looking after this kind of patient.
More activities for those with dementia. More staff courses and more staff needed for those who are extremely confused - and we have other patients needing out attention too.
Short workshops or refresher training to keep staff up to date - and especially new staff as part of their induction.
Some stimulation, distraction on the ward areas. There are NO televisions, audio books, dayrooms etc.
Supply more staff/ carers to help accommodate [needs and preferences of people with dementia].
There isn't enough to stimulate patients, i.e. books, games, TVs. Also, staff don't have enough time to sit with them.

Registered Nurses (Band 5 or 6)

To encourage the person's family/ significant others to take part in their care when appropriate.

Unable to let patients walk around/ take them off the ward as not enough staff.

We need more staff to help us care for dementia patients.

Registered Nurses (Band 7 or above)

All staff need to access the dementia training day which provides a specialist speaker adapting their presentation to fit the needs of the audience, giving a clear balanced view of dementia, its effects on the patient and the way forward to manage dementia patients. The afternoon session is a dementia role play undertaken by professional actors, who re-enact a dementia scene and then change each scene depending on the view point and ideas of the audience. A very powerful thought provoking learning tool. More volunteers are required to help with the meal time support and supervision of morning and afternoon drinks.

Appointment of a dementia specialist nurse and/ or admiral nurse to support patients with dementia's needs across ALL clinical areas ...

Dementia specialist nurse. Falls service.

Education/ lectures for junior staff. If junior staff understood the process/ course of dementia, they could relate more specifically to patient needs. Actively encourage relatives/ long term carers to visit as much as possible.

Ensuring patients have patient passports - commenced in the community and brought into hospital for any admissions.

Improved social activities.

Increase the level of on-unit training specific to dementia training.

Looking at the general environment and creating an atmosphere that is reflective of both dementia and non-dementia patients.

More access to specialist teams in dementia care who would routinely follow up patients on discharge, within their own homes.

More training would be advantageous.

More training would be beneficial for all staff.

People with dementia should be nursed in an area that is a safe environment and staffing levels to an optimum with staff that have a greater knowledge of dementia. These could then be supported by staff from required specialities, rather than the person being in a busy area and having no support from the dementia team.

Provide admiral nurses.

Providing activities and a dedicated area for the activities for people with dementia.

Providing staff for the sole purpose of helping at mealtimes - would ensure patients didn't miss out on food.

To explore if a dementia nurse specialist role or admiral nurse could be employed to support/ in reach to ward areas. Improve all signage across the trust to support wayfinding and continue to work towards creating a dementia friendly environment.

TVs and quiet rooms. Additional staff. Activity sessions - with staff.

Healthcare Assistants

Activities provided to help them. Support groups for relatives and carers.
Activities throughout their day - proactive rehabilitation. "About me" profiles and communication with families.
Actual training for dementia, refresh and provide the proper care [to] patients with dementia, and encourage the worker to strengthen their patience and kindness to look after them.
As soon as they are admitted, could do with a personal overview of what helps the patient. Phrases/ gestures that help calm/ reassure the patient, or what can be used as a distraction e.g. folding/ drawing. We also do not get the one to ones needed when required - especially when there a numerous falls risks/ confusion/ wandersome patients in different bays.
By providing 1 to 1 care for patients if there are 2-4 patients that require this care, give four extra staff members. We don't do enough for patient with dementia, there is nothing to provide distractions to the patients, none of the staff are given the right training to deal with these patients.
By providing activities for the patients with dementia i.e. music, puzzles, colouring.
Care could be improved a lot if we had full staffing. If we have dementia patients that need one to one caring, we can only give the caring to them which means the rest of the patients get neglected. Those who want to go walking cannot because we cannot leave the bay as there are only two of us most of the time.
Give their staff more training as I feel people don't get enough here. I had a lot of training and awareness courses at the care home I was at, but do feel people are not given the help they need to be able to offer the right care to people with dementia.
Help the family with the people with dementia, and support the family too.
I believe that the hospital is doing its best to take care of, and support, people with dementia. I will therefore, encourage them to continue with the good work.
I don't feel there is any improvement needed, my [relative] who has dementia was recently admitted into one of the wards and the staff were great.
If all wards could supply e.g. memory box with easy looking books in, with pictures e.g. to show war [time related things], not just elderly/ stroke wards.
It is a busy orthopaedic elective and trauma ward, due to workload and pace of the ward, you do not always have time to sit down and talk to your patients.
More access to dementia training for the majority of wards.
More activities to encourage patients and improve motivation.
More activities with patients, need more staff.
More contact with people, staff are too rushed doing jobs - more doing things to help the brain e.g. puzzles, crosswords, painting, knitting. Animal visits seem very helpful with these patients. Fluids are of utmost importance for all patients and must be pushed at all times - fruit bowls would be a good idea too.
More hand overs for day staff.
More staff on the ward who could look after dementia patients better.
More staff to help, all professionals being aware of this.
More training and better awareness.
More training or specialised one to one care especially at night.
More training.
Providing extra staff to fully meet the required needs of dementia patients.
Stimulate ideas for memory i.e. pictures, books, colour.
Supply enough staff with training.

Healthcare Assistants

Training and awareness courses.

Volunteers to help with mealtimes. Assisting patients with feeding takes up valuable time and not everyone had the meal at the same time.

Doctors

Formal training on how to deal with patients/ care needs.

Have dedicated dementia champion especially on surgical ward, have better protocols for sedation in dementia, encourage and support our frailty team and ward 9, our dementia ward.

I think a specific dementia nurse would help with education and training, help to support families and lead on the introduction of the dementia care bundle.

Provide a guidebook, reading material, etc.

Allied Healthcare Professionals

Better, more consistent use of ward and facilities for activity groups. More frequent educational groups for carers/ relatives, better training.

Ensuring all staff try to adapt their treatment and ensure flexible working with patients, i.e. having the time to go back to ensure your patients have taken their meds and eaten. If they have refused once does not mean they will refuse in the next 5 mins.

More staff on the wards with specialist training in dementia care. Adequate training for staff from band 2 upwards. I think that additional staff should be provided when there is a higher than normal number of patients with dementia on the ward so that they can provide one to one care with tasks such as eating, without having to compromise the care of the other patients.

Sometimes I can be asked to see a patient with dementia but I have no background information on them. Often [I go] to see them and I haven't even been told they have dementia. This can be confusing for me as I cannot gauge if what they are telling me about their history is accurate.

Train key staff so they are informed of all local support services available in the area, to enable appropriate signposting for carers. Set up a dementia awareness drop in centre within the hospital.

We often run the unit with too few staff. We have some unqualified staff who are very good with patients. Sadly, we have those who lack patience and understanding. This also applies to some qualified staff. What looks good on paper, does not always follow into practice. Families can be very demanding in their rejection of reality and seek an alternative to the truth. Dementia is a horrible disease, and is [irrespective] of class or status. Staff can be demoralised by these families, who make their judgements on a snap shot at visiting times. Visitors can be a real problem. They overfill the limited space, interfere in care giving, want constant feedback, and will ask several different staff, in the hope of getting the response they want. Family structure within the white, mainly Christian population has changed and they do not want their lives to be limited by an unwell relative.

Students

No comments from students for your hospital.

Therapy Assistants & Allied Healthcare Professional Assistants

No comments from therapy assistants and allied healthcare professional assistants for your hospital.

Ward-based Administrators

More staff.

Other / Unknown

No comments from other staff for your hospital.

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