

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

Local report appendices for:

Basingstoke & North Hampshire Hospital

Hampshire Hospitals NHS Foundation Trust

July 2017

Commissioned by:



HQIP

Healthcare Quality
Improvement Partnership

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

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

Table of Contents

Introduction to the appendices	2
Appendix A: Organisational checklist data	3
Appendix B: Patient demographics	15
Appendix C: Casenote audit data	19
Appendix D: Carer demographics	28
Appendix E: Carer questionnaire data	29
Appendix F: Staff demographics	32
Appendix G: Staff questionnaire data	34
Appendix H: Verbatim staff suggestions for your hospital, presented by job role	40

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	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	No	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 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	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 Yes	
4.11 [2]	5	There are champions for dementia at:			
	5a	Directorate level (y/n)	81.9% 163/199	Yes Yes	
	5b	Ward level (y/n)	93.5% 186/199	Yes Yes	
N4a [3]	6	Dementia specialist nurses are employed in line with Royal College of Nursing guidance (there is at least one full time dementia specialist nurse for every 300 admissions of people with dementia per year): (y/n)	This question is not reported on as feedback showed hospitals found it difficult to interpret.		
N4b [3]	7	Has a strategy or plan for carer engagement been produced (e.g. using Triangle of Care self-assessment tool)? (y/n)	76.9% 153/199	Yes New question for Round 3	
	8	<i>(If Q7=Yes)</i> Is implementation of the strategy or plan scheduled for review?			
		Yes, more than once a year	41.2% 63/153	Yes, more than once a year	New question for Round 3
		Yes, once a year	34.6% 53/153		
Yes, less than once a year	20.3% 31/153				

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
N4c [3]	9	A Dementia Working Group is in place and reviews the quality of services provided in the hospital: (y/n)	93.5% 186/199	Yes	New question for Round 3
	9a	<i>(If Q9=Yes)</i> The group meets:			
		Annually	0.5% 1/186	Quarterly	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	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	No
	17a	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes personal details, preferences and routines: (y/n)	100% 196/196	Yes	N/A
	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	N/A
	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	N/A
	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	N/A
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	N/A
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	N/A
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:		E4		New question for Round 3
	Ward 2:		F2		
	Ward 3:		D3		
	Number of patients checked:		-	10	New question for Round 3
	Range		0-40	-	-
	Median		10	-	-
	Number of these patients where the information was present:		-	10	New question for Round 3
	Percentage of patients where the information was present:		-	100%	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	√	Alert sheet
		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	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	-			
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	Yes	Yes
7.5 [3]	27	What format is used to deliver basic dementia awareness training?			
		eLearning module	72.9% 145/199	✓	New question for Round 3
		Workshop or study day	91% 181/199	✓	
		Higher education module	22.6% 45/199	✓	
		Other	29.1% 58/199	✓	

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

Specific resources supporting people with dementia

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
6.2 [2]	30	The hospital has access to intermediate care services, which will admit people with dementia: (y/n)	93% 185/199	Yes	Yes
6.3 [3]	30a	<i>(If Q30=Yes)</i> Access to intermediate care services allows people with dementia to be admitted to intermediate care directly and avoid unnecessary hospital admission: (y/n)	84.3% 156/185	No	No
7.1 [2]	31	There is a named dignity lead to provide guidance, advice and consultation to staff: (y/n)	70.4% 140/199	Yes	No
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	No	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	No	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	No

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)	23.5% (12)
81 - 100	73% (7332)	76.5% (39)
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 - 100
Mean	84	84.8
Median	85	86

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	40.1% (4029)	41.2% (21)
Female	59.9% (6018)	58.8% (30)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	82.1% (8250)	100% (51)
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% (51)
Welsh	0.6% (61)	0% (0)
Other European language	1% (96)	0% (0)
Asian language	1.4% (144)	0% (0)
Not documented	19% (1909)	0% (0)
Other	0.6% (59)	0% (0)

Primary diagnosis/ cause of admission*	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Respiratory	19.9% (1998)	15.7% (8)
Fall	13.3% (1332)	21.6% (11)
Urinary/ renal	9% (901)	5.9% (3)
Hip dislocation/ hip fracture	7.5% (754)	5.9% (3)
Sepsis	6.3% (633)	7.8% (4)
Delirium/ confusion	6% (604)	15.7% (8)
Gastrointestinal	5.9% (595)	7.8% (4)
Cardiac/ vascular	5.1% (517)	2% (1)
Stroke	3.8% (380)	0% (0)
Neurological	3.6% (364)	3.9% (2)
Skin lacerations/ lesions	2% (204)	0% (0)
Impaired consciousness	2% (198)	0% (0)
Dementia**	1.9% (195)	0% (0)
Other	1.9% (192)	0% (0)
Unable to cope/ frailty	1.6% (160)	3.9% (2)
Dehydration	1.4% (143)	2% (1)
Haematology	1.1% (115)	0% (0)
Endocrine/ metabolic	1.1% (112)	2% (1)
Other fractures	1% (96)	2% (1)
Cancer	0.9% (94)	0% (0)
Surgical/ non-surgical procedure	0.9% (86)	2% (1)
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)	0% (0)
Psychiatric	0.4% (42)	0% (0)
Adverse reaction to medication/ allergy/ overdose	0.3% (28)	0% (0)
Injury/ trauma	0.2% (24)	0% (0)
Not documented/ unknown	0.2% (21)	0% (0)

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

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

Speciality of the ward patients spent the longest time in	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Care of the Elderly/ Complex Care	41.1% (4125)	49% (25)
General Medical	23.5% (2359)	21.6% (11)
Other Medical	9.9% (999)	2% (1)
Orthopaedics	8.9% (892)	11.8% (6)
Surgical	6.8% (681)	7.8% (4)
Stroke	4.5% (456)	2% (1)
Cardiac	2.5% (248)	3.9% (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)	2% (1)
Unknown	0.1% (13)	0% (0)

Patients who:	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Died in hospital	12.8% (1285)	7.8% (4)
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)	2.1% (1)
Received end of life care in hospital/ was on an end of life care plan	13% (1302)	3.9% (2)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
2 - 10 days	45.3% (4553)	29.4% (15)
11 – 20 days	25.5% (2559)	17.6% (9)
21 – 30 days	11.3% (1132)	15.7% (8)
31 – 40 days	6.7% (671)	13.7% (7)
41 – 50 days	4.2% (418)	9.8% (5)
51 – 60 days	2.3% (230)	2% (1)
61 – 70 days	1.7% (168)	2% (1)
71 – 80 days	1% (102)	2% (1)
81 – 90 days	0.6% (62)	3.9% (2)
More than 90 days	1.5% (152)	3.9% (2)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	2-775	3-139
Median (days)	12	22

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)	64.7% (33)	40.4% (19)
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)	0% (0)	2.1% (1)
Carer's home	2.1% (212)	2.1% (181)	0% (0)	0% (0)
Intermediate care	0.3% (27)	2% (172)	0% (0)	0% (0)
Residential care	16.9% (1701)	17.7% (1551)	5.9% (3)	14.9% (7)
Nursing home	19.7% (1981)	28.7% (2511)	23.5% (12)	36.2% (17)
Palliative care	0% (5)	0.6% (54)	0% (0)	0% (0)
Transfer from another hospital	1.4% (145)	3.9% (343)	5.9% (3)	6.4% (3)
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)	66% (31)
Own/ carer's home to nursing/ residential care	11.1% (972)	21.3% (10)

*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%)	88.2% 45/51	96.4% 27/28	
	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%)	88.2% 45/51	100% 31/31	
	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%)	100% 45/45	93.5% 29/31
		Other action taken	4% 352/8822 (2%, 0-5%)	0% 0/45	New answer options for Round 3	
	Yes or other action taken	89.9% 7932/2288 (93%, 85-98%)	100% 45/45			
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%)	96.1% 49/51	100% 31/31	
1.12 [1]	17	As part of the multidisciplinary assessment has the patient been asked about any continence needs? (y/n/could not be assessed for recorded reasons)	88% 8572/9744 (92%, 85-97%)	94% 47/50	90% 27/30	
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% 51/51	100% 31/31	

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%)	92.2% 47/51	83.3% 25/30
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	42.8% 3977/9294 (44%, 26-58%)	0% 0/51	New answer options for Round 3
		Yes, other	1.7% 161/9294 (0%, 0-2%)	2% 1/51	
		Yes (all options)	89.8% 8350/9294 (92%, 85-96%)	94.1% 48/51	

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%)	56% 28/50	81.5% 22/27
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%)	21.6% 11/51	67.7% 21/31
		Yes, but there was no indication that delirium may be present	18.5% 1863/10047 (15%, 6-25%)	3.9% 2/51	6.5% 2/31
		Yes (both options)	44.5% 4466/10047 (42%, 27-60%)	25.5% 13/51	74.2% 23/31
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% 11/11	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%)	49% 25/51	90.3% 28/31
	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%)	78.3% 18/23	44% 11/25
		Unknown*	33.1% 1865/5626 (14%, 0-44%)	0% 0/23	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%)	78.3% 18/23	New question for Round 3
		Unknown*	34.1% 1916/5616 (16%, 3-48%)	0% 0/23	
	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%)	78.3% 18/23	71.4% 20/28
		Unknown*	29.9% 1685/5631 (13%, 0-37%)	0% 0/23	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%)	69.6% 16/23	7.1% 2/28
		Unknown*	37.8% 2110/5583 (20%, 5-50%)	0% 0/23	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%)	69.6% 16/23	14.8% 4/27
		Unknown*	39.1% 2167/5539 (20%, 7-52%)	0% 0/23	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%)	82.6% 19/23	37% 10/27
		Unknown*	35.3% 1977/5598 (17%, 3-46%)	0% 0/23	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%)	14% 6/43	33.3% 8/24
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	3.3% 189/5690	2.7% 1/37	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% 0/37	
		Not routine/ not standard practice	5.8% 331/5690	0% 0/37	
		Not documented/ unknown reason	78.1% 4444/5690	97.3% 36/37	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	10.8% 616/5690	0% 0/37		
	24	At the point of discharge the cause of cognitive impairment was summarised and recorded: (y/n)	69.1% 5067/7329 (72%, 57-84%)	25.6% 11/43	75% 18/24
	25	Have there been any symptoms of delirium? (y/n)	32.3% 2367/7329 (33%, 22-41%)	32.6% 14/43	58.3% 14/24
	25a	<i>(If Q25=Yes)</i> Have the symptoms of delirium been summarised for discharge? (y/n)	47.9% 1133/2367 (45%, 33-64%)	28.6% 4/14	42.9% 6/14
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%)	14% 6/43	29.2% 7/24	
26a	<i>(If Q26=Yes)</i> Have the symptoms of behavioural and psychiatric symptoms of dementia been summarised for discharge? (y/n)	44.5% 635/1426 (40%, 23-60%)	50% 3/6	71.4% 5/7	

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%)	90% 18/20	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%)	61.1% 11/18	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%)	9.1% 1/11	
		The patient lacked requisite capacity and evidence of a best interests decision has been recorded	69.9% 811/1161 (75%, 50-90%)	72.7% 8/11	
		There is no record of either consent or best interest decision making*	18.3% 212/1161 (14%, 0-33%)	18.2% 2/11	
	27a (i)	There are no documented concerns about the patient's capacity to consent to the referral:	29.6% 488/1649 (25%, 11-50%)	38.9% 7/18	
	27a (iii)	The patients consent was requested and this is recorded	29.1% 142/488 (25%, 0-50%)	14.3% 1/7	
		There is no record of the patients consent*	70.9% 346/488 (75%, 50-100%)	85.7% 6/7	
	27a (ii & iii)	Consent or best interests (responses options combined)	66.2% 1091/1649 (67%, 50-86%)	55.6% 10/18	
		No consent or best interests (response options combined)	33.8% 558/1649 (33%, 14-50%)	44.4% 8/18	

*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%)	71.4% 30/42	95.8% 23/24
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%)	71.1% 27/38	83.3% 15/18
	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%)	86% 37/43	95.5% 21/22
	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%)	97.7% 42/43	87.5% 21/24
	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%)	86% 37/43	91.7% 22/24
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%)	41.9% 18/43	37.5% 9/24
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%)	36.8% 14/38	66.7% 12/18
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%)	97.6% 40/41	79.2% 19/24
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% 42/42	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%)	65.2% 15/23	50% 7/14
	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	55% 11/20	70% 7/10
		Patient awaiting assessment	9.1% 190/2088	0% 0/20	10% 1/10
		Patient awaiting history/ results	6.1% 127/2088	5% 1/20	0% 0/10
		Patient awaiting surgery	9.6% 200/2088	10% 2/20	0% 0/10
		Patient presenting confusion	5.7% 120/2088	15% 3/20	10% 1/10
		Patient on end of life plan	0% 1/2088	0% 0/20	-
		Patient being transferred to another hospital	0.1% 2/2088	0% 0/20	0% 0/10
		Patient unresponsive	0.3% 6/2088	0% 0/20	0% 0/10
		Patient being discharged to nursing/ residential care	6.5% 136/2088	15% 3/20	0% 0/10
		Not recorded	-	-	10% 1/10
		Other	0% 0/2088	0% 0/20	0% 0/10

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	7% 3/43	8.3% 2/24
		24 hours	12.2% 897/7329	0% 0/43	16.7% 4/24
		25 - 48 hours	14.7% 1075/7329	2.3% 1/43	37.5% 9/24
		More than 48 hours	27.1% 1985/7329	69.8% 30/43	33.3% 8/24
		No notice at all	0.5% 35/7329	0% 0/43	0% 0/24
		Not documented	24.2% 1770/7329	20.9% 9/43	4.2% 1/24
		No carer, family, friend/ could not contact	1.8% 132/7329	0% 0/43	0% 0/24
		Patient specified information withheld	0% 3/7329	0% 0/43	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%)	100% 14/14	94.7% 18/19

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)	4.5% (3)
45 – 54 years	16.2% (749)	15.2% (10)
55 – 64 years	25.8% (1193)	28.8% (19)
65 – 74 years	20.8% (960)	13.6% (9)
75 – 84 years	19.1% (885)	27.3% (18)
85 years or over	7.4% (343)	9.1% (6)
Prefer not to say	1.2% (56)	1.5% (1)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	30.6% (1413)	45.5% (30)
Female	68.1% (3150)	54.5% (36)
Other	0.1% (4)	0% (0)
Prefer not to say	1.2% (57)	0% (0)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	88.4% (4079)	100% (66)
Black/ Black British	3% (140)	0% (0)
Asian/ Asian British	3.3% (152)	0% (0)
Mixed	1% (44)	0% (0)
Chinese	0.2% (9)	0% (0)
Other	1.4% (64)	0% (0)
Prefer not to say	2.7% (124)	0% (0)

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	33.5% (1558)	40.9% (27)
Family member	55.9% (2597)	50% (33)
Friend	4.4% (203)	9.1% (6)
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)	80.7% (46)

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	36.5% 23/63
		43.3% 1980/4578	57.1% 36/63
		10.2% 468/4578	6.3% 4/63
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	47.7% 31/65
		36.4% 1672/4592	44.6% 29/65
		9.4% 431/4592	7.7% 5/65
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	54.1% 33/61
		34.2% 1515/4433	34.4% 21/61
		10.4% 462/4433	11.5% 7/61
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		76% 3471/4569	75.4% 49/65
		20.8% 952/4569	21.5% 14/65
		3.2% 146/4569	3.1% 2/65

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	31.8% 21/66
		Yes, to some extent	40.4% 1843/4566	43.9% 29/66
		No	17.8% 815/4566	24.2% 16/66
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	37.5% 24/64
		Yes, to some extent	36.4% 1637/4497	39.1% 25/64
		No	16.1% 722/4497	23.4% 15/64
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	33.3% 22/66
		Yes, to some extent	34.5% 1563/4524	36.4% 24/66
		No	20.1% 908/4524	30.3% 20/66

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	22.7% 15/66
		Very good	33.9% 1575/4645	42.4% 28/66
		Good	17% 790/4645	18.2% 12/66
		Fair	9.6% 446/4645	10.6% 7/66
		Poor	5% 232/4645	6.1% 4/66
	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	34.9% 22/63
		Likely	34.1% 1551/4544	39.7% 25/63
		Neither likely nor unlikely	14.3% 648/4544	14.3% 9/63
		Unlikely	4.8% 220/4544	7.9% 5/63
		Extremely unlikely	4.2% 192/4544	3.2% 2/63

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	42.9% 27/63
		Somewhat satisfied	34% 1487/4379	39.7% 25/63
		Somewhat dissatisfied	9.9% 434/4379	15.9% 10/63
		Very dissatisfied	5.8% 254/4379	1.6% 1/63

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)	17.3% (9)
26 - 50%	25.6% (3651)	34.6% (18)
51 - 75%	24.4% (3489)	34.6% (18)
More than 75%	18.1% (2588)	13.5% (7)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	15.7% (2260)	9.6% (5)
Female	83.2% (11954)	84.6% (44)
Other	0.2% (34)	0% (0)
Prefer not to say	0.8% (113)	5.8% (3)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	79.9% (11467)	80.8% (42)
Black/ Black British	4.1% (594)	0% (0)
Asian/ Asian British	8% (1150)	3.8% (2)
Mixed	1.3% (183)	1.9% (1)
Chinese	0.5% (73)	0% (0)
Other	4.5% (646)	3.8% (2)
Prefer not to say	1.7% (241)	9.6% (5)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	29.9% (4300)	32.7% (17)
Registered nurse (Band 7 or above)	12.7% (1831)	3.8% (2)
Healthcare assistant	23.1% (3324)	23.1% (12)
Doctor	11.5% (1645)	1.9% (1)
Allied healthcare professional	11.9% (1713)	13.5% (7)
Therapy assistant/ allied healthcare professional assistant	2.6% (367)	1.9% (1)
Student	2.3% (332)	5.8% (3)
Ward based administrators	4% (571)	13.5% (7)
Other/ unknown	1.9% (279)	3.8% (2)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	13% (1866)	11.5% (6)
30 hours or more	87% (12458)	88.5% (46)

Time worked in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Less than 6 months	8% (1148)	5.8% (3)
6 - 11 months	9.5% (1364)	11.5% (6)
1 - 2 years	15.6% (2242)	11.5% (6)
3 - 5 years	16.4% (2350)	21.2% (11)
6 - 10 years	15.9% (2283)	11.5% (6)
11 - 15 years	12.1% (1739)	19.2% (10)
More than 15 years	22.4% (3205)	19.2% (10)

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	36% 18/50	56% 28/50
		Yes, most of the time	32.9% 4614/14024		20% 10/50	
		Yes, sometimes	26.8% 3760/14024	-	36% 18/50	-
		No	11.6% 1624/14024	-	8% 4/50	-
	1b	Out of office hours				
		Yes, always	7.8% 874/11207	23.5% 2637/11207	15% 6/40	40% 16/40
		Yes, most of the time	15.7% 1763/11207		25% 10/40	
		Yes, sometimes	27.9% 3129/11207	-	35% 14/40	-
No		48.6% 5441/11207	-	25% 10/40	-	

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	18% 9/50
		53.2% 7030/13205	54% 27/50
		5.4% 713/13205	22% 11/50
		7.7% 1018/13205	12% 6/50
		7.3% 961/13205	14% 7/50
		17.3% 2278/13205	22% 11/50
	2a	Following your training at this hospital, do you feel better prepared to provide care/ support to people with dementia?	
		42.2% 4502/10670	50% 18/36
		50.5% 5390/10670	41.7% 15/36
	7.3% 778/10670	8.3% 3/36	

Information and communication

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	Your hospital Round 3: % Num/Den	Your hospital Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	
9.3 [1]	3	In your current role, do you think that personal information is available to you to help you care for/ support people with dementia? <i>E.g. their likes/ dislikes, preferred name, past job.</i>				
		Yes, always	21.4% 3072/14345	59.9% 8597/14345	30.8% 16/52	71.2% 37/52
		Yes, most of the time	38.5% 5525/14345		40.4% 21/52	
		Yes, sometimes	33% 4734/14345	-	21.2% 11/52	-
		No	7.1% 1014/14345	-	7.7% 4/52	-
	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	29.2% 14/48	83.3% 40/48
		Yes, most of the time	40.9% 5454/13329		54.2% 26/48	
		Yes, sometimes	30.6% 4074/13329	-	16.7% 8/48	-
		No	1.9% 252/13329	-	0% 0/48	-
7.4 [2]	4	In your current role, do you feel encouraged to accommodate the individual needs and preferences of people with dementia? <i>E.g. taking time to speak and interact at the pace of the person with dementia, permitting them to walk around the ward.</i>				
		Yes, always	28.9% 4145/14333	62.1% 8904/14333	30.8% 16/52	65.4% 34/52
		Yes, most of the time	33.2% 4759/14333		34.6% 18/52	
		Yes, sometimes	27.3% 3913/14333	-	25% 13/52	-
	No	10.6% 1516/14333	-	9.6% 5/52	-	

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% 20/38
		Occasionally	37.2% 4636/12457	26.3% 10/38
		Almost Never	9.7% 1210/12457	13.2% 5/38
		Never	3.3% 408/12457	7.9% 3/38

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	71.4% 25/35	97.1% 34/35
		Yes, most of the time	27.3% 3271/11978		25.7% 9/35	
		Yes, sometimes	16.1% 1927/11978	-	0% 0/35	-
		No	5.4% 649/11978	-	2.9% 1/35	-
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	13.5% 5/37	78.4% 29/37
		Yes, most of the time	50.1% 6149/12263		64.9% 24/37	
		Yes, sometimes	19.2% 2357/12263	-	13.5% 5/37	-
		No	4.7% 576/12263	-	8.1% 3/37	-

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	20% 6/30	70% 21/30
		Yes, most of the time	47.6% 4352/9148		50% 15/30	
		Yes, sometimes	18.7% 1708/9148	-	16.7% 5/30	-
		No	3.3% 303/9148	-	13.3% 4/30	-
	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	0% 0/30	16.7% 5/30
		Yes, most of the time	27.5% 2516/9143		16.7% 5/30	
		Yes, sometimes	42.5% 3887/9143	-	30% 9/30	-
		No	19.3% 1763/9143	-	53.3% 16/30	-
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	20% 6/30	53.3% 16/30
		Yes, most of the time	32.5% 2942/9047		33.3% 10/30	
		Yes, sometimes	27.7% 2506/9047	-	30% 9/30	-
		No	23.5% 2125/9047	-	16.7% 5/30	-

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	17.9% 5/28	60.7% 17/28
		Yes, most of the time	39.3% 3456/8788		42.9% 12/28	
		Yes, sometimes	16.8% 1476/8788	-	17.9% 5/28	-
		No	15.6% 1368/8788	-	21.4% 6/28	-
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	25% 7/28	46.4% 13/28
		Yes, most of the time	27.2% 2398/8822		21.4% 6/28	
		Yes, sometimes	22.5% 1983/8822	-	25% 7/28	-
		No	12.3% 1085/8822	-	28.6% 8/28	-
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	40% 12/30	60% 18/30
		Yes, most of the time	28.7% 2615/9119		20% 6/30	
		Yes, sometimes	20.7% 1886/9119	-	23.3% 7/30	-
		No	6.1% 558/9119	-	16.7% 5/30	-
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	26.7% 8/30	73.3% 22/30
		Yes, most of the time	33.4% 3039/9090		46.7% 14/30	
		Yes, sometimes	15.5% 1408/9090	-	10% 3/30	-
		No	4.9% 444/9090	-	16.7% 5/30	-

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 Basingstoke & North Hampshire Hospital are provided.

Registered Nurses (Band 5 or 6)

Activity coordinators.

By ensuring an appropriate staffing ratio applies at all times and challenging behaviour is responded to accordingly and effectively for all involved.

By fully utilising the "this is me" information sheet - they are often filled in incredibly well by family members or carers but then filed in the patient's folder and forgotten about.

Change the attitude of the dementia specialist nurses and helpers, who are very patronising when they arrive on the ward.

Dementia team available on the floor most of the time. Paperwork like "this is me".

Increased dementia assistants. 24-hour carer. Activity coordinators (increase).

Increased staffing levels would help to improve the care and support to allow staff to spend the required amount of time with individuals.

Need more space for the dementia patients to be able to walk around in. Acute hospital wards are a poor environment for someone with dementia. They are often here for months awaiting placement.

Patients with dementia who are medically fit but awaiting discharge are nursed alongside acutely unwell patients which means nursing staff are unable to give the needed time to either the medically fit patient who needs time, or the unwell patient who needs complex medical care. Although we attempt to offer a wide range of nutritional options we are often thwarted by the kitchen. Finger foods are often useful but our kitchen sends carrot sticks! Not the easy thing to crunch for 90 year olds.

Putting on extra staff to help deal with the acuity.

To understand that recovery takes longer and needs encouragement to rehabilitation.

Twenty-four-hour cover, more organised activities.

We need to improve in planning their discharge as soon as possible because hospital is not the best environment for a person with dementia. Preferably home. Avoid unnecessary hospital admissions. Provide patients choices recognised and acted on.

Registered Nurses (Band 7 or above)

Avoid transferring patients with dementia from one ward to another. Better environment for patients with dementia. Improved discharge services to enable patients to be discharged promptly and safely.

Have a memory cafe and re-design ward's layout for patients and relatives to feel at home and supported (Kings Fund).

Healthcare Assistants

By providing a dementia friendly environment. Quiet areas, signs, coloured doors/ halls.

Extra help to sit with patients as sometimes they only need someone to talk to (never enough time). Family need to make a list of likes/ dislikes to help when ordering meals.

Higher staffing levels giving us time to be able to support patients better. The "This is Me" leaflet could ask questions about dementia patients dietary preferences. As they don't always understand what you are asking when doing menus, they sometimes end up with meals they don't like.

Increase dementia volunteers at the weekend. Have more finger foods/ snacks available between mealtimes. Other than that, continue with the great care.

It's all very good and with the support of the dementia team, very good.

More staff to be trained in the person centred approach for the patient with dementia.

More time off the ward for patients and activities.

More training - more frequent training.

Provide more stimulation for dementia patients.

Providing greater staffing numbers would provide more time to safely allow patients to make their own choices e.g. walking around.

Providing more staff and training.

Doctors

By not employing heartless people.

Allied Healthcare Professionals

Easy to find "This is Me" for each patient.

Enough staff to provide one to one care with patients who require more support and attention.

I see a lot of good practice with patients who have dementia, but it is always a challenge keeping them safe with staffing levels as they are. Many need constant monitoring/ occupying and this is not possible. Also, the acute hospital environment is not the place for them whilst they are waiting for placement, so it would be good to have more activities off the ward, including meals together.

More dementia awareness training for all staff.

Painting doors and toilets to make them recognisable and improve signage on wards.

Staff need to attend the basic dysphagia HCA training. Often there are only 1-2 people. If they attend, they would understand how to help patients be safer and get some pointers to help this client group. Sometimes staff time pressures mean that patients have to wait a long time to be helped or staff are feeling the pressure to help others. We need more staff. There are however a team of helpers for patients with dementia to help at lunch times - but they need more people too.

Students

By designing a dementia friendly ward. Bays could be smaller. Bed spaces would be bigger. Better signage, lighting, flooring. Bays would be easily observable.

Have a "this is me" form in patients notes as they're quite useful.

People with dementia who need one on one nursing do not receive one on one nursing due to staffing levels.

Therapy Assistants & Allied Healthcare Professional Assistants

Labelling patients' wandering', 'aggressive', 'difficult'. We could use or 'likes to walk', 'gets frustrated easily', 'knows their own mind' :)

Ward-based Administrators

More dementia team staff available to support the ward staff.

More dementia volunteers, a bigger dementia team, more dementia trained nursing staff.

More staff, more activities, more choice of food. Very limited food supply from kitchen, not much in way of finger food.

The concept of the multidisciplinary meetings to ensure the safe discharge of complex patients is a good one, sadly it lacks coherent systems to allow it to function as it should, which is a real shame and regularly opportunities are missed to discharge patients who have been in a critical bed for months, due to an apparent lack of synergy between clinical services, adult services and pharmacy.

They could improve care by more staff attending training sessions. The dementia team are very good at their training sessions and giving out any advice you may need. Explaining about dementia in an easy way to be able to understand.

With the reconstruction of a dementia friendly area.

Other / Unknown

Colour coded areas/ bays in the ward i.e. bay one is red, bay one green.

Off ward activities or ward activities i.e. colouring books, story books.

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