

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

Local report appendices for:

**Diana Princess of Wales Hospital, Grimsby**

**Northern Lincolnshire and Goole NHS Foundation Trust**

**July 2017**

Commissioned by:



**HQIP**

Healthcare Quality  
Improvement Partnership

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

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

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## Introduction to the appendices

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

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
Standard reference and type. Standards document can be found on the <a href="#">audit website</a> .	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	<b>60.8%</b> 121/199	<b>In development</b>	Yes
		In development	<b>26.1%</b> 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)	<b>97.1%</b> 168/173	<b>Yes</b>	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	<b>65.9%</b> 114/173	<b>In development</b>	New question for Round 3
		Pathway in development	<b>26.6%</b> 46/173		
		Stroke			
		Yes	<b>32.9%</b> 57/173	<b>In development</b>	New question for Round 3
		Pathway in development	<b>21.4%</b> 37/173		
		Fractured neck of femur			
		Yes	<b>43.6%</b> 75/172	<b>In development</b>	New question for Round 3
		Pathway in development	<b>24.4%</b> 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)	<b>31.7%</b> 63/199	<b>No</b>	Yes
	2b	Delayed discharge/ transfers, in which patients with dementia can be identified in the total number of patients with delayed discharge/ transfers (y/n)	<b>31.7%</b> 63/199	<b>No</b>	Yes
4.4 [2]	3	The Executive Board regularly reviews the number of in-hospital falls and the breakdown of the immediate causes, in which patients with dementia can be identified (y/n)	<b>60.3%</b> 120/199	<b>Yes</b>	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)	<b>84.9%</b> 169/199	<b>Yes</b> Yes	
	4b	Complaints – analysed by age (y/n)	<b>52.3%</b> 104/199	<b>No</b> 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))	<b>58.6%</b> 106/181	<b>No</b> No	
	4d	Patient/ public forums or local Healthwatch – in relation to services for older people and people with dementia (y/n)	<b>67.3%</b> 134/199	<b>Yes</b> No	
4.11 [2]	5	There are champions for dementia at:			
	5a	Directorate level (y/n)	<b>81.9%</b> 163/199	<b>Yes</b> Yes	
	5b	Ward level (y/n)	<b>93.5%</b> 186/199	<b>Yes</b> 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)	<b>76.9%</b> 153/199	<b>Yes</b> 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	<b>41.2%</b> 63/153	<b>Yes, less than once a year</b>	New question for Round 3
		Yes, once a year	<b>34.6%</b> 53/153		
Yes, less than once a year	<b>20.3%</b> 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)	<b>93.5%</b> 186/199	<b>No</b>	New question for Round 3
	9a	<i>(If Q9=Yes)</i> The group meets:			
		Annually	<b>0.5%</b> 1/186	<b>N/A</b>	New question for Round 3
		Bi-annually	<b>0.5%</b> 1/186		
		Quarterly	<b>30.1%</b> 56/186		
		Six-weekly	<b>4.3%</b> 8/186		
		Monthly	<b>33.3%</b> 62/186		
		Bi-monthly	<b>29%</b> 54/186		
		Weekly	<b>0.5%</b> 1/186		
	Unknown	<b>1.6%</b> 3/186			
	9b	<i>(If Q9=Yes)</i> The group includes:			
Healthcare professionals		<b>100%</b> 186/186	<b>N/A</b>	New question for Round 3	
Organisations e.g. Alzheimer's Society		<b>64%</b> 119/186	<b>N/A</b>		
Carer/ service user representation	<b>66.1%</b> 123/186	<b>N/A</b>			
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)	<b>88.4%</b> 176/199	<b>Yes</b>	New question for Round 3
	11	An evidence-based tool is used for establishing ward staffing levels: (y/n)	<b>99%</b> 197/199	<b>Yes</b>	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)	<b>98%</b> 195/199	<b>Yes</b>	Yes
	12a	<i>(If Q12=Yes)</i> Wards' adherence to protected mealtimes is reviewed and monitored: (y/n)	<b>88.7%</b> 173/195	<b>Yes</b>	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)	<b>88.9%</b> 177/199	<b>Yes</b>	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	<b>4%</b> 8/199	<b>No</b>	New question for Round 3
		Yes, within the last year	<b>1.5%</b> 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)	<b>38.2%</b> 76/199	<b>Yes</b>	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)	<b>98.5%</b> 196/199	<b>Yes</b>	Yes
	17a	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes personal details, preferences and routines: (y/n)	<b>100%</b> 196/196	<b>Yes</b>	Yes
	17b	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes reminders or support with personal care: (y/n)	<b>98.5%</b> 193/196	<b>Yes</b>	Yes
	17c	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes recurring factors that may cause or exacerbate distress: (y/n)	<b>100%</b> 196/196	<b>Yes</b>	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)	<b>99%</b> 194/196	<b>Yes</b>	Yes
1.15 [3]	17e	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes life details which aid communication: (y/n)	<b>99.5%</b> 195/196	<b>Yes</b>	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)	<b>99.5%</b> 195/196	<b>Yes</b>	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)	<b>93.4%</b> 183/196	<b>Yes</b>	Yes
20	Documenting use of personal information in practice: Hospitals selected three wards ( <b>not</b> 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:		<b>C1 Holles</b>		New question for Round 3
	Ward 2:		<b>B4</b>		
	Ward 3:		<b>B6</b>		
	Number of patients checked:		-	<b>10</b>	New question for Round 3
	Range		<b>0-40</b>	-	-
	Median		<b>10</b>	-	-
	Number of these patients where the information was present:		-	<b>6</b>	New question for Round 3
	Percentage of patients where the information was present:		-	<b>60%</b>	New question for Round 3
	Range		<b>0-100%</b>	-	-
	Mean		<b>49%</b>	-	-
Median		<b>50%</b>	-	-	

## 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)	<b>90.5%</b> 180/199	<b>Yes</b>	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	
9.3 [1]	<i>(If Q21=Yes)</i> Please say what this is:				
	21a	A visual indicator, symbol or marker	<b>91.1%</b> 164/180	✓	N/A
		Alert sheet or electronic flag	<b>23.9%</b> 43/180	-	
		A box to highlight or alert dementia condition in the notes or care plan	<b>33.9%</b> 61/180	-	
		Other	<b>18.9%</b> 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)	<b>70.4%</b> 140/199	<b>No</b>	No
	<i>(If Q22=Yes)</i> Please say what this is:				
	22a	A visual indicator, symbol or marker	<b>87.1%</b> 122/140	<b>N/A</b>	N/A
		Alert sheet or electronic flag	<b>18.6%</b> 26/140	<b>N/A</b>	
		A box to highlight or alert dementia condition in the notes or care plan	<b>20.7%</b> 29/140	<b>N/A</b>	
Other		<b>17.9%</b> 25/140	<b>N/A</b>		
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)	<b>81.9%</b> 163/199	<b>Yes</b>	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)	<b>95.5%</b> 190/199	<b>Yes</b>	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	
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	<b>46.2%</b> 92/199	√	-
		Provided on induction	<b>63.3%</b> 126/199	-	-
		Provided in the last 12 months	<b>58.8%</b> 117/199	-	√
		Not provided in the last 12 months	<b>8.5%</b> 17/199	-	-
		Nurses			
		Mandatory	<b>51.8%</b> 103/199	√	-
		Provided on induction	<b>74.4%</b> 148/199	-	-
		Provided in the last 12 months	<b>68.3%</b> 136/199	-	√
		Not provided in the last 12 months	<b>1%</b> 2/199	-	-
		Healthcare assistants			
		Mandatory	<b>51.8%</b> 103/199	√	-
		Provided on induction	<b>71.4%</b> 142/199	-	-
		Provided in the last 12 months	<b>68.3%</b> 136/199	-	√
		Not provided in the last 12 months	<b>1%</b> 2/199	-	-
		Other allied healthcare professionals, e.g. physiotherapists, dieticians			
		Mandatory	<b>47.7%</b> 95/199	√	-
		Provided on induction	<b>64.8%</b> 129/199	-	-
		Provided in the last 12 months	<b>67.8%</b> 135/199	-	√
		Not provided in the last 12 months	<b>3.5%</b> 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	<b>41.2%</b> 82/199	√	-
		Provided on induction	<b>57.8%</b> 115/199	-	-
		Provided in the last 12 months	<b>63.8%</b> 127/199	-	√
		Not provided in the last 12 months	<b>11.1%</b> 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)	<b>82.4%</b> 164/199	<b>Yes</b>	No
7.5 [3]	27	What format is used to deliver basic dementia awareness training?			
		eLearning module	<b>72.9%</b> 145/199	√	New question for Round 3
		Workshop or study day	<b>91%</b> 181/199	√	
		Higher education module	<b>22.6%</b> 45/199	-	
		Other	<b>29.1%</b> 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)	<b>93%</b> 185/199	<b>Yes</b>	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)	<b>84.3%</b> 156/185	<b>Yes</b>	Yes
7.1 [2]	31	There is a named dignity lead to provide guidance, advice and consultation to staff: (y/n)	<b>70.4%</b> 140/199	<b>Yes</b>	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)	<b>95.5%</b> 190/199	<b>Yes</b>	Yes
6.5 [2]	33a	<i>(If Q32=Yes)</i> This person/ team has training in ongoing needs of people with dementia: (y/n)	<b>92.6%</b> 176/190	<b>Yes</b>	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)	<b>98.4%</b> 187/190	<b>Yes</b>	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)	<b>75.9%</b> 151/199	<b>Yes</b>	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	<b>65.3%</b> 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	<b>1%</b> 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	<b>0%</b> 0/199	-	
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery on only one day per week	<b>0%</b> 0/199	-	
		Finger food consists of sandwiches/wraps only	<b>33.7%</b> 67/199	√	
		Patients who may be unable to use cutlery will never be admitted to the hospital	<b>0%</b> 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	<b>50.8%</b> 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	<b>10.6%</b> 21/199	-	
		Simple food supplies for example bread, cereal, yoghurt and biscuits are available 24 hours a day	<b>32.2%</b> 64/199	√	
		Only snacks (biscuits, cake) are available 24 hours a day	<b>3%</b> 6/199	-	
Food is not available 24 hours a day	<b>3.5%</b> 7/199	-			
6.10 [2]	37	There is access to advocacy services with experience and training in working with people with dementia: (y/n)	<b>95%</b> 189/199	<b>Yes</b>	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	<b>15.1%</b> 30/199	-	New question for Round 3	
		On care of the elderly wards	<b>38.7%</b> 77/199	-		
		Other	<b>30.2%</b> 60/199	-		
		No	<b>16.1%</b> 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	<b>42.7%</b> 85/199	√	New question for Round 3	
		All adult wards/ areas	<b>13.6%</b> 27/199	-		
		All care of the elderly wards/ areas	<b>18.1%</b> 36/199	-		
		Designated dementia wards only	<b>3%</b> 6/199	-		
		Other	<b>13.1%</b> 26/199	-		
		No	<b>9.5%</b> 19/199	-		
	40	<i>(If Q39=Yes)</i> Environmental changes based on the review are:				
			Completed	<b>15%</b> 27/180	-	New question for Round 3
			Underway	<b>56.7%</b> 102/180	√	
			Planned but not yet underway	<b>10%</b> 18/180	-	
			Planned but funding has not been identified	<b>15.6%</b> 28/180	-	
			Plans are not in place	<b>2.8%</b> 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	<b>36.7%</b> 66/180	√	New question for Round 3
		All adult wards/ areas	<b>9.4%</b> 17/180	-	
		All care of the elderly wards/ areas	<b>13.3%</b> 24/180	-	
		Designated dementia wards only	<b>5%</b> 9/180	-	
		Other	<b>13.3%</b> 24/180	-	
		They have not been part of the team	<b>22.2%</b> 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	<b>49.4%</b> 89/180	-	New question for Round 3
		Yes, once the work is completed	<b>40%</b> 72/180	√	
		No plans are in place	<b>10.6%</b> 19/180	-	

## Appendix B: Patient demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
34 - 65	<b>2.2%</b> (221)	<b>0%</b> (0)
66 - 80	<b>24.3%</b> (2445)	<b>36.5%</b> (19)
81 - 100	<b>73%</b> (7332)	<b>63.5%</b> (33)
101 - 108	<b>0.4%</b> (39)	<b>0%</b> (0)
Unknown	<b>0.1%</b> (10)	<b>0%</b> (0)

Age	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	<b>34 - 108</b>	<b>69 - 100</b>
Mean	<b>84</b>	<b>84.8</b>
Median	<b>85</b>	<b>85.5</b>

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>40.1%</b> (4029)	<b>36.5%</b> (19)
Female	<b>59.9%</b> (6018)	<b>63.5%</b> (33)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>82.1%</b> (8250)	<b>90.4%</b> (47)
Black/ Black British	<b>1.2%</b> (123)	<b>0%</b> (0)
Asian/ Asian British	<b>1.9%</b> (193)	<b>0%</b> (0)
Chinese	<b>0.1%</b> (10)	<b>1.9%</b> (1)
Mixed	<b>0.1%</b> (11)	<b>0%</b> (0)
Not documented	<b>2.1%</b> (210)	<b>0%</b> (0)
Other	<b>12.4%</b> (1250)	<b>7.7%</b> (4)

First language	National audit Round 3: % (N)	Your hospital Round 3: % (N)
English	<b>77.4%</b> (7778)	<b>17.3%</b> (9)
Welsh	<b>0.6%</b> (61)	<b>0%</b> (0)
Other European language	<b>1%</b> (96)	<b>0%</b> (0)
Asian language	<b>1.4%</b> (144)	<b>0%</b> (0)
Not documented	<b>19%</b> (1909)	<b>82.7%</b> (43)
Other	<b>0.6%</b> (59)	<b>0%</b> (0)

Primary diagnosis/ cause of admission*	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Respiratory	<b>19.9%</b> (1998)	<b>25%</b> (13)
Fall	<b>13.3%</b> (1332)	<b>3.8%</b> (2)
Urinary/ renal	<b>9%</b> (901)	<b>5.8%</b> (3)
Hip dislocation/ hip fracture	<b>7.5%</b> (754)	<b>17.3%</b> (9)
Sepsis	<b>6.3%</b> (633)	<b>9.6%</b> (5)
Delirium/ confusion	<b>6%</b> (604)	<b>0%</b> (0)
Gastrointestinal	<b>5.9%</b> (595)	<b>5.8%</b> (3)
Cardiac/ vascular	<b>5.1%</b> (517)	<b>9.6%</b> (5)
Stroke	<b>3.8%</b> (380)	<b>0%</b> (0)
Neurological	<b>3.6%</b> (364)	<b>5.8%</b> (3)
Skin lacerations/ lesions	<b>2%</b> (204)	<b>1.9%</b> (1)
Impaired consciousness	<b>2%</b> (198)	<b>0%</b> (0)
Dementia**	<b>1.9%</b> (195)	<b>3.8%</b> (2)
Other	<b>1.9%</b> (192)	<b>0%</b> (0)
Unable to cope/ frailty	<b>1.6%</b> (160)	<b>0%</b> (0)
Dehydration	<b>1.4%</b> (143)	<b>1.9%</b> (1)
Haematology	<b>1.1%</b> (115)	<b>0%</b> (0)
Endocrine/ metabolic	<b>1.1%</b> (112)	<b>1.9%</b> (1)
Other fractures	<b>1%</b> (96)	<b>1.9%</b> (1)
Cancer	<b>0.9%</b> (94)	<b>1.9%</b> (1)
Surgical/ non-surgical procedure	<b>0.9%</b> (86)	<b>0%</b> (0)
Pain/ swelling	<b>0.8%</b> (85)	<b>0%</b> (0)
Hepatology	<b>0.8%</b> (84)	<b>1.9%</b> (1)
Oral/ visual/ auditory	<b>0.4%</b> (45)	<b>0%</b> (0)
Rheumatic	<b>0.4%</b> (45)	<b>1.9%</b> (1)
Psychiatric	<b>0.4%</b> (42)	<b>0%</b> (0)
Adverse reaction to medication/ allergy/ overdose	<b>0.3%</b> (28)	<b>0%</b> (0)
Injury/ trauma	<b>0.2%</b> (24)	<b>0%</b> (0)
Not documented/ unknown	<b>0.2%</b> (21)	<b>0%</b> (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	<b>41.1%</b> (4125)	<b>26.9%</b> (14)
General Medical	<b>23.5%</b> (2359)	<b>11.5%</b> (6)
Other Medical	<b>9.9%</b> (999)	<b>1.9%</b> (1)
Orthopaedics	<b>8.9%</b> (892)	<b>21.2%</b> (11)
Surgical	<b>6.8%</b> (681)	<b>11.5%</b> (6)
Stroke	<b>4.5%</b> (456)	<b>15.4%</b> (8)
Cardiac	<b>2.5%</b> (248)	<b>0%</b> (0)
Other	<b>1.4%</b> (136)	<b>0%</b> (0)
Nephrology	<b>0.5%</b> (52)	<b>0%</b> (0)
Obstetrics/ Gynaecology	<b>0.4%</b> (41)	<b>5.8%</b> (3)
Critical Care	<b>0.2%</b> (23)	<b>3.8%</b> (2)
Oncology	<b>0.2%</b> (22)	<b>1.9%</b> (1)
Unknown	<b>0.1%</b> (13)	<b>0%</b> (0)

Patients who:	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Died in hospital	<b>12.8%</b> (1285)	<b>11.5%</b> (6)
Self-discharged from hospital	<b>0.1%</b> (12)	<b>0%</b> (0)
Were marked 'fast track discharge'/ 'discharge to assess'/ 'transfer to assess'/ expedited with family agreement for recorded reasons	<b>5.5%</b> (482)	<b>0%</b> (0)
Received end of life care in hospital/ was on an end of life care plan	<b>13%</b> (1302)	<b>3.8%</b> (2)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
2 - 10 days	<b>45.3%</b> (4553)	<b>51.9%</b> (27)
11 – 20 days	<b>25.5%</b> (2559)	<b>28.8%</b> (15)
21 – 30 days	<b>11.3%</b> (1132)	<b>9.6%</b> (5)
31 – 40 days	<b>6.7%</b> (671)	<b>3.8%</b> (2)
41 – 50 days	<b>4.2%</b> (418)	<b>3.8%</b> (2)
51 – 60 days	<b>2.3%</b> (230)	<b>1.9%</b> (1)
61 – 70 days	<b>1.7%</b> (168)	<b>0%</b> (0)
71 – 80 days	<b>1%</b> (102)	<b>0%</b> (0)
81 – 90 days	<b>0.6%</b> (62)	<b>0%</b> (0)
More than 90 days	<b>1.5%</b> (152)	<b>0%</b> (0)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	<b>2-775</b>	<b>4-54</b>
Median (days)	<b>12</b>	<b>10</b>

Place of residence before/ after admission	National audit Round 3: % (N)		Your hospital Round 3: % (N)	
	Before	After*	Before	After*
Own home	<b>57.7%</b> (5793)	<b>40.2%</b> (3519)	<b>53.8%</b> (28)	<b>28.3%</b> (13)
Respite care	<b>0.8%</b> (80)	<b>1.6%</b> (136)	<b>1.9%</b> (1)	<b>2.2%</b> (1)
Rehabilitation	<b>0.4%</b> (37)	<b>2.4%</b> (207)	<b>0%</b> (0)	<b>0%</b> (0)
Psychiatric ward	<b>0.5%</b> (48)	<b>0.7%</b> (62)	<b>0%</b> (0)	<b>0%</b> (0)
Carer's home	<b>2.1%</b> (212)	<b>2.1%</b> (181)	<b>3.8%</b> (2)	<b>2.2%</b> (1)
Intermediate care	<b>0.3%</b> (27)	<b>2%</b> (172)	<b>0%</b> (0)	<b>15.2%</b> (7)
Residential care	<b>16.9%</b> (1701)	<b>17.7%</b> (1551)	<b>17.3%</b> (9)	<b>19.6%</b> (9)
Nursing home	<b>19.7%</b> (1981)	<b>28.7%</b> (2511)	<b>21.2</b> (11)	<b>21.7%</b> (10)
Palliative care	<b>0%</b> (5)	<b>0.6%</b> (54)	<b>0</b> (0)	<b>0%</b> (0)
Transfer from another hospital	<b>1.4%</b> (145)	<b>3.9%</b> (343)	<b>1.9%</b> (1)	<b>10.9%</b> (5)
Long stay care	<b>0.2%</b> (18)	<b>0.3%</b> (26)	<b>0%</b> (0)	<b>0%</b> (0)

Change in residence*	National audit Round 3: % (N)	Your hospital Round 3: % (N)
No change	<b>73.4%</b> (6428)	<b>69.6%</b> (32)
Own/ carer's home to nursing/ residential care	<b>11.1%</b> (972)	<b>0%</b> (0)

\*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)	<b>93.8%</b> 8558/9126 (96%, 91-98%)	<b>98%</b> 50/51	95% 38/40	
	15	An assessment of nutritional status was performed by a healthcare professional: (y/n/could not be assessed for recorded reasons)	<b>89.8%</b> 8832/9837 (93%, 86-96%)	<b>94.2%</b> 49/52	90% 36/40	
	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	<b>85.9%</b> 7580/8822 (89%, 79-96%)	<b>100%</b> 49/49	13.9% 5/36
		Other action taken	<b>4%</b> 352/8822 (2%, 0-5%)	<b>0%</b> 0/49	New answer options for Round 3	
	Yes or other action taken	<b>89.9%</b> 7932/2288 (93%, 85-98%)	<b>100%</b> 49/49			
1.10 [1]	16	Has a formal pressure ulcer risk assessment been carried out and score recorded? (y/n)	<b>95.5%</b> 9590/10044 (98%, 94-100%)	<b>92.3%</b> 48/52	90% 36/40	
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)	<b>88%</b> 8572/9744 (92%, 85-97%)	<b>90.4%</b> 47/52	92.5% 37/40	
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)	<b>83.2%</b> 8185/9840 (90%, 77-98%)	<b>73.1%</b> 38/52	75% 30/40	

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	<b>45.3%</b> 4212/9294 (45%, 23-66%)	<b>78.8%</b> 41/52	30.8% 12/39
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	<b>42.8%</b> 3977/9294 (44%, 26-58%)	<b>9.6%</b> 5/52	New answer options for Round 3
		Yes, other	<b>1.7%</b> 161/9294 (0%, 0-2%)	<b>3.8%</b> 2/52	
		Yes (all options)	<b>89.8%</b> 8350/9294 (92%, 85-96%)	<b>92.3%</b> 48/52	

### 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)	<b>54%</b> 4684/8682 (55%, 38-72%)	<b>16.3%</b> 8/49	23.1% 9/39
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	<b>25.9%</b> 2603/10047 (24%, 14-36%)	<b>11.5%</b> 6/52	0% 0/40
		Yes, but there was no indication that delirium may be present	<b>18.5%</b> 1863/10047 (15%, 6-25%)	<b>15.4%</b> 8/52	7.5% 3/40
		Yes (both options)	<b>44.5%</b> 4466/10047 (42%, 27-60%)	<b>26.9%</b> 14/52	7.5% 3/40
1.5 [2]	21a	<i>(If Q21=Yes)</i> Has the patient been clinically assessed for delirium by a healthcare professional? (y/n)	<b>85.3%</b> 2220/2603 (90%, 78-100%)	<b>83.3%</b> 5/6	-% N/A

## 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)	<b>57.2%</b> 5727/10010 (58%, 31-85%)	<b>90.4%</b> 47/52	45% 18/40
	22a	<i>(If Q22=Yes)</i> Has information been collected about the patient regarding personal details, preferences and routines?			
		Yes	<b>47.4%</b> 2669/5626 (53%, 30-77%)	<b>27.7%</b> 13/47	66.7% 12/18
		Unknown*	<b>33.1%</b> 1865/5626 (14%, 0-44%)	<b>68.1%</b> 32/47	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	<b>44.1%</b> 2476/5616 (50%, 29-71%)	<b>27.7%</b> 13/47	New question for Round 3
		Unknown*	<b>34.1%</b> 1916/5616 (16%, 3-48%)	<b>66%</b> 31/47	
	22c	<i>(If Q22=Yes)</i> Has information been collected about the patient regarding reminders or support with personal care?			
		Yes	<b>55.3%</b> 3116/5631 (64%, 42-80%)	<b>27.7%</b> 13/47	55.6% 10/18
		Unknown*	<b>29.9%</b> 1685/5631 (13%, 0-37%)	<b>68.1%</b> 32/47	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	<b>32.6%</b> 1818/5583 (35%, 18-56%)	<b>17%</b> 8/47	17.6% 3/17
		Unknown*	<b>37.8%</b> 2110/5583 (20%, 5-50%)	<b>78.7%</b> 37/47	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	<b>28.2%</b> 1564/5539 (26%, 13-50%)	<b>17.4%</b> 8/46	11.8% 2/17
		Unknown*	<b>39.1%</b> 2167/5539 (20%, 7-52%)	<b>80.4%</b> 37/46	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	<b>43.1%</b> 2413/5598 (50%, 25-70%)	<b>23.9%</b> 11/46	27.8% 5/18
		Unknown*	<b>35.3%</b> 1977/5598 (17%, 3-46%)	<b>73.9%</b> 34/46	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)	<b>22.4%</b> 1639/7329 (17%, 9-30%)	<b>9.1%</b> 3/33	11.8% 4/34
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	<b>3.3%</b> 189/5690	<b>3.3%</b> 1/30	New question for Round 3
		Patient has advanced dementia (i.e. patient's advanced dementia makes the assessment not appropriate)	<b>1.9%</b> 110/5690	<b>0%</b> 0/30	
		Not routine/ not standard practice	<b>5.8%</b> 331/5690	<b>0%</b> 0/30	
		Not documented/ unknown reason	<b>78.1%</b> 4444/5690	<b>96.7%</b> 29/30	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	<b>10.8%</b> 616/5690	<b>0%</b> 0/30		
	24	At the point of discharge the cause of cognitive impairment was summarised and recorded: (y/n)	<b>69.1%</b> 5067/7329 (72%, 57-84%)	<b>48.5%</b> 16/33	11.8% 4/34
	25	Have there been any symptoms of delirium? (y/n)	<b>32.3%</b> 2367/7329 (33%, 22-41%)	<b>21.2%</b> 7/33	5.9% 2/34
	25a	<i>(If Q25=Yes)</i> Have the symptoms of delirium been summarised for discharge? (y/n)	<b>47.9%</b> 1133/2367 (45%, 33-64%)	<b>0%</b> 0/7	50% 1/2
26	Have there been any persistent behavioural and psychiatric symptoms of dementia (wandering, aggression, shouting) during this admission? (y/n)	<b>19.4%</b> 1425/7329 (19%, 13-26%)	<b>6.1%</b> 2/33	17.6% 6/34	
26a	<i>(If Q26=Yes)</i> Have the symptoms of behavioural and psychiatric symptoms of dementia been summarised for discharge? (y/n)	<b>44.5%</b> 635/1426 (40%, 23-60%)	<b>0%</b> 0/2	50% 3/6	

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
5.3 [2]	27	Is there a recorded referral to a social worker for assessment of housing and care needs due to a proposed change in residence?	<b>65.5%</b> 1649/2519 (71%, 53-89%)	<b>83.3%</b> 5/6	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:	<b>70.4%</b> 1161/1649 (75%, 50-89%)	<b>40%</b> 2/5	New question for Round 3
	27a (ii)	The patient had capacity on assessment and their consent is documented	<b>11.9%</b> 138/1161 (0%, 0-20%)	<b>50%</b> 1/2	
		The patient lacked requisite capacity and evidence of a best interests decision has been recorded	<b>69.9%</b> 811/1161 (75%, 50-90%)	<b>50%</b> 1/2	
		There is no record of either consent or best interest decision making*	<b>18.3%</b> 212/1161 (14%, 0-33%)	<b>0%</b> 0/2	
	27a (i)	There are no documented concerns about the patient's capacity to consent to the referral:	<b>29.6%</b> 488/1649 (25%, 11-50%)	<b>60%</b> 3/5	
	27a (iii)	The patients consent was requested and this is recorded	<b>29.1%</b> 142/488 (25%, 0-50%)	<b>33.3%</b> 1/3	
		There is no record of the patients consent*	<b>70.9%</b> 346/488 (75%, 50-100%)	<b>66.7%</b> 2/3	
	27a (ii & iii)	Consent or best interests (responses options combined)	<b>66.2%</b> 1091/1649 (67%, 50-86%)	<b>60%</b> 3/5	
		No consent or best interests (response options combined)	<b>33.8%</b> 558/1649 (33%, 14-50%)	<b>40%</b> 2/5	

\*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)	<b>82%</b> 5807/7083 (89%, 72-96%)	<b>100%</b> 32/32	61.8% 21/34
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)	<b>53.9%</b> 3327/6169 (55%, 38-72%)	<b>25%</b> 7/28	23.5% 8/34
	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)	<b>80.7%</b> 5597/6935 (82%, 71-91%)	<b>77.4%</b> 24/31	55.9% 19/34
	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)	<b>75.1%</b> 5501/7329 (81%, 63-91%)	<b>54.5%</b> 18/33	17.6% 6/34
	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)	<b>81.5%</b> 5971/7329 (85%, 76-93%)	<b>75.8%</b> 25/33	55.9% 19/34
5.6 [1]	30	Has a single plan/ summary for discharge with clear updated information been produced? (y/n)	<b>85.1%</b> 6234/7329 (92%, 77-97%)	<b>27.3%</b> 9/33	50% 17/34
5.7 [2]	31	Are any support needs that have been identified documented in the discharge plan/ summary? (y/n/na)	<b>60.2%</b> 4211/6995 (61%, 44-79%)	<b>32.3%</b> 10/31	58.8% 20/34
5.8 [1]	32	Has the patient and/ or carer received a copy of the plan/ summary? (y/n/na)	<b>80.6%</b> 5621/6975 (94%, 72-100%)	<b>74.2%</b> 23/31	64.7% 22/34
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)	<b>93.6%</b> 6701/7156 (98%, 93-100%)	<b>100%</b> 33/33	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)	<b>47.4%</b> 2483/5242 (48%, 27-67%)	<b>10.3%</b> 3/29	0% 0/34
	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	<b>62.5%</b> 1306/2088	<b>50%</b> 2/4	-% -/-
		Patient awaiting assessment	<b>9.1%</b> 190/2088	<b>0%</b> 0/4	-% -/-
		Patient awaiting history/ results	<b>6.1%</b> 127/2088	<b>50%</b> 2/4	-% -/-
		Patient awaiting surgery	<b>9.6%</b> 200/2088	<b>0%</b> 0/4	-% -/-
		Patient presenting confusion	<b>5.7%</b> 120/2088	<b>0%</b> 0/4	-% -/-
		Patient on end of life plan	<b>0%</b> 1/2088	<b>0%</b> 0/4	- -
		Patient being transferred to another hospital	<b>0.1%</b> 2/2088	<b>0%</b> 0/4	-% -/-
		Patient unresponsive	<b>0.3%</b> 6/2088	<b>0%</b> 0/4	-% -/-
		Patient being discharged to nursing/ residential care	<b>6.5%</b> 136/2088	<b>0%</b> 0/4	-% -/-
		Not recorded	-	-	-% -/-
		Other	<b>0%</b> 0/2088	<b>0%</b> 0/4	-% -/-

## 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	<b>19.5%</b> 1432/7329	<b>39.4%</b> 13/33	35.3% 12/34
		24 hours	<b>12.2%</b> 897/7329	<b>12.1%</b> 4/33	17.6% 6/34
		25 - 48 hours	<b>14.7%</b> 1075/7329	<b>24.2%</b> 8/33	29.4% 10/34
		More than 48 hours	<b>27.1%</b> 1985/7329	<b>6.1%</b> 2/33	17.6% 6/34
		No notice at all	<b>0.5%</b> 35/7329	<b>3%</b> 1/33	0% 0/34
		Not documented	<b>24.2%</b> 1770/7329	<b>15.2%</b> 5/33	0% 0/34
		No carer, family, friend/ could not contact	<b>1.8%</b> 132/7329	<b>0%</b> 0/33	0% 0/34
		Patient specified information withheld	<b>0%</b> 3/7329	<b>0%</b> 0/33	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)	<b>67.3%</b> 2605/3868 (70%, 50-88%)	<b>72.2%</b> 13/18	88.5% 23/26

## 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)	9.1% (1)
35 – 44 years	5.6% (259)	0% (0)
45 – 54 years	16.2% (749)	36.4% (4)
55 – 64 years	25.8% (1193)	9.1% (1)
65 – 74 years	20.8% (960)	27.3% (3)
75 – 84 years	19.1% (885)	9.1% (1)
85 years or over	7.4% (343)	9.1% (1)
Prefer not to say	1.2% (56)	0% (0)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	30.6% (1413)	40% (4)
Female	68.1% (3150)	60% (6)
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% (11)
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)	16.7% (2)
Family member	55.9% (2597)	83.3% (10)
Friend	4.4% (203)	0% (0)
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)	75% (9)

## 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?		
		Yes, definitely	<b>46.5%</b> 2130/4578	<b>75%</b> 9/12
		Yes, to some extent	<b>43.3%</b> 1980/4578	<b>8.3%</b> 1/12
		No	<b>10.2%</b> 468/4578	<b>16.7%</b> 2/12
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?		
		Yes, definitely	<b>54.2%</b> 2489/4592	<b>66.7%</b> 8/12
		Yes, to some extent	<b>36.4%</b> 1672/4592	<b>16.7%</b> 2/12
		No	<b>9.4%</b> 431/4592	<b>16.7%</b> 2/12
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>		
		Yes, definitely	<b>55.4%</b> 2456/4433	<b>50%</b> 6/12
		Yes, to some extent	<b>34.2%</b> 1515/4433	<b>50%</b> 6/12
		No	<b>10.4%</b> 462/4433	<b>0%</b> 0/12
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?		
		Yes, definitely	<b>76%</b> 3471/4569	<b>91.7%</b> 11/12
		Yes, to some extent	<b>20.8%</b> 952/4569	<b>8.3%</b> 1/12
		No	<b>3.2%</b> 146/4569	<b>0%</b> 0/12

## 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	<b>41.8%</b> 1908/4566	<b>58.3%</b> 7/12
		Yes, to some extent	<b>40.4%</b> 1843/4566	<b>25%</b> 3/12
		No	<b>17.8%</b> 815/4566	<b>16.7%</b> 2/12
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	<b>47.5%</b> 2138/4497	<b>63.6%</b> 7/11
		Yes, to some extent	<b>36.4%</b> 1637/4497	<b>36.4%</b> 4/11
		No	<b>16.1%</b> 722/4497	<b>0%</b> 0/11
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	<b>45.4%</b> 2053/4524	<b>66.7%</b> 8/12
		Yes, to some extent	<b>34.5%</b> 1563/4524	<b>25%</b> 3/12
		No	<b>20.1%</b> 908/4524	<b>8.3%</b> 1/12



## 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?	
		<b>34.5%</b> 1602/4645	<b>58.3%</b> 7/12
		<b>33.9%</b> 1575/4645	<b>8.3%</b> 1/12
		<b>17%</b> 790/4645	<b>25%</b> 3/12
		<b>9.6%</b> 446/4645	<b>8.3%</b> 1/12
		<b>5%</b> 232/4645	<b>0%</b> 0/12
	9	How likely would you be to recommend the service to friends and family if they needed similar care or treatment?	
		<b>42.5%</b> 1933/4544	<b>72.7%</b> 8/11
		<b>34.1%</b> 1551/4544	<b>18.2%</b> 2/11
		<b>14.3%</b> 648/4544	<b>9.1%</b> 1/11
		<b>4.8%</b> 220/4544	<b>0%</b> 0/11
		<b>4.2%</b> 192/4544	<b>0%</b> 0/11

## 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 <b>you</b> have received from this hospital to help you in your role as a carer?	
		<b>50.3%</b> 2204/4379	<b>63.6%</b> 7/11
		<b>34%</b> 1487/4379	<b>36.4%</b> 4/11
		<b>9.9%</b> 434/4379	<b>0%</b> 0/11
		<b>5.8%</b> 254/4379	<b>0%</b> 0/11

## 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%	<b>31.9%</b> (4559)	<b>51.1%</b> (67)
26 - 50%	<b>25.6%</b> (3651)	<b>29.8%</b> (39)
51 - 75%	<b>24.4%</b> (3489)	<b>17.6%</b> (23)
More than 75%	<b>18.1%</b> (2588)	<b>1.5%</b> (2)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>15.7%</b> (2260)	<b>13.7%</b> (18)
Female	<b>83.2%</b> (11954)	<b>86.3%</b> (113)
Other	<b>0.2%</b> (34)	<b>0%</b> (0)
Prefer not to say	<b>0.8%</b> (113)	<b>0%</b> (0)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>79.9%</b> (11467)	<b>94.7%</b> (124)
Black/ Black British	<b>4.1%</b> (594)	<b>1.5%</b> (2)
Asian/ Asian British	<b>8%</b> (1150)	<b>1.5%</b> (2)
Mixed	<b>1.3%</b> (183)	<b>0%</b> (0)
Chinese	<b>0.5%</b> (73)	<b>0%</b> (0)
Other	<b>4.5%</b> (646)	<b>1.5%</b> (2)
Prefer not to say	<b>1.7%</b> (241)	<b>0.8%</b> (1)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	<b>29.9%</b> (4300)	<b>32.8%</b> (43)
Registered nurse (Band 7 or above)	<b>12.7%</b> (1831)	<b>13.7%</b> (18)
Healthcare assistant	<b>23.1%</b> (3324)	<b>30.5%</b> (40)
Doctor	<b>11.5%</b> (1645)	<b>8.4%</b> (11)
Allied healthcare professional	<b>11.9%</b> (1713)	<b>4.6%</b> (6)
Therapy assistant/ allied healthcare professional assistant	<b>2.6%</b> (367)	<b>2.3%</b> (3)
Student	<b>2.3%</b> (332)	<b>0.8%</b> (1)
Ward based administrators	<b>4%</b> (571)	<b>3.8%</b> (5)
Other/ unknown	<b>1.9%</b> (279)	<b>3.1%</b> (4)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	<b>13%</b> (1866)	<b>20.6%</b> (27)
30 hours or more	<b>87%</b> (12458)	<b>79.4%</b> (104)

<b>Time worked in the hospital</b>	<b>National audit Round 3: % (N)</b>	<b>Your hospital Round 3: % (N)</b>
Less than 6 months	<b>8% (1148)</b>	<b>3.1% (4)</b>
6 - 11 months	<b>9.5% (1364)</b>	<b>6.9% (9)</b>
1 - 2 years	<b>15.6% (2242)</b>	<b>15.3% (20)</b>
3 - 5 years	<b>16.4% (2350)</b>	<b>13% (17)</b>
6 - 10 years	<b>15.9% (2283)</b>	<b>16.8% (22)</b>
11 - 15 years	<b>12.1% (1739)</b>	<b>6.9% (9)</b>
More than 15 years	<b>22.4% (3205)</b>	<b>38.2% (50)</b>

## Appendix G: Staff questionnaire data

### Specialist services for dementia

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % (Yes, always and Yes, most of the time responses combined)	Your hospital Round 3: % Num/Den	Your hospital Round 3: % (Yes, always and Yes, most of the time responses combined)		
4.11 [2]	1	Do you feel supported by specialist services for dementia in your hospital? <i>E.g. dementia specialist team, mental health liaison, dementia champions.</i>					
	1a	During office hours <i>i.e. Monday-Fri, 9am-5pm</i>					
		Yes, always	<b>28.7%</b> 4026/14024	<b>61.6%</b> 8640/14024	<b>18.6%</b> 24/129	<b>52.7%</b> 68/129	
		Yes, most of the time	<b>32.9%</b> 4614/14024		<b>34.1%</b> 44/129		
		Yes, sometimes	<b>26.8%</b> 3760/14024	-	<b>26.4%</b> 34/129	-	
		No	<b>11.6%</b> 1624/14024	-	<b>20.9%</b> 27/129	-	
		1b	Out of office hours				
			Yes, always	<b>7.8%</b> 874/11207	<b>23.5%</b> 2637/11207	<b>3.9%</b> 4/102	<b>16.7%</b> 17/102
			Yes, most of the time	<b>15.7%</b> 1763/11207		<b>12.7%</b> 13/102	
	Yes, sometimes		<b>27.9%</b> 3129/11207	-	<b>27.5%</b> 28/102	-	
	No	<b>48.6%</b> 5441/11207	-	<b>55.9%</b> 57/102	-		

## 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>	
		<b>42.8%</b> 5653/13205	<b>24.4%</b> 31/127
		<b>53.2%</b> 7030/13205	<b>69.3%</b> 88/127
		<b>5.4%</b> 713/13205	<b>4.7%</b> 6/127
		<b>7.7%</b> 1018/13205	<b>6.3%</b> 8/127
		<b>7.3%</b> 961/13205	<b>1.6%</b> 2/127
		<b>17.3%</b> 2278/13205	<b>17.3%</b> 22/127
	2a	Following your training at this hospital, do you feel better prepared to provide care/ support to people with dementia?	
		<b>42.2%</b> 4502/10670	<b>48.1%</b> 50/104
		<b>50.5%</b> 5390/10670	<b>45.2%</b> 47/104
	<b>7.3%</b> 778/10670	<b>6.7%</b> 7/104	

## 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	<b>21.4%</b> 3072/14345	<b>59.9%</b> 8597/14345	<b>14.5%</b> 19/131	<b>45.8%</b> 60/131
		Yes, most of the time	<b>38.5%</b> 5525/14345		<b>31.3%</b> 41/131	
		Yes, sometimes	<b>33%</b> 4734/14345	-	<b>40.5%</b> 53/131	-
		No	<b>7.1%</b> 1014/14345	-	<b>13.7%</b> 18/131	-
	3a	Do you have the opportunity to use this information to help you care for/ support people with dementia?				
		Yes, always	<b>26.6%</b> 3549/13329	<b>67.5%</b> 9003/13329	<b>22.1%</b> 25/113	<b>66.4%</b> 75/113
		Yes, most of the time	<b>40.9%</b> 5454/13329		<b>44.2%</b> 50/113	
		Yes, sometimes	<b>30.6%</b> 4074/13329	-	<b>31.9%</b> 36/113	-
		No	<b>1.9%</b> 252/13329	-	<b>1.8%</b> 2/113	-
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	<b>28.9%</b> 4145/14333	<b>62.1%</b> 8904/14333	<b>18.5%</b> 24/130	<b>43.8%</b> 57/130
		Yes, most of the time	<b>33.2%</b> 4759/14333		<b>25.4%</b> 33/130	
		Yes, sometimes	<b>27.3%</b> 3913/14333	-	<b>32.3%</b> 42/130	-
	No	<b>10.6%</b> 1516/14333	-	<b>23.8%</b> 31/130	-	

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	<b>49.8%</b> 6203/12457	<b>31.3%</b> 36/115
		Occasionally	<b>37.2%</b> 4636/12457	<b>49.6%</b> 57/115
		Almost Never	<b>9.7%</b> 1210/12457	<b>14.8%</b> 17/115
		Never	<b>3.3%</b> 408/12457	<b>4.3%</b> 5/115

## 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	<b>51.2%</b> 6131/11978	<b>78.5%</b> 9402/11978	<b>50.9%</b> 55/108	<b>79.6%</b> 86/108
		Yes, most of the time	<b>27.3%</b> 3271/11978		<b>28.7%</b> 31/108	
		Yes, sometimes	<b>16.1%</b> 1927/11978	-	<b>13%</b> 14/108	-
		No	<b>5.4%</b> 649/11978	-	<b>7.4%</b> 8/108	-
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	<b>25.9%</b> 3181/12263	<b>76.1%</b> 9330/12263	<b>18.2%</b> 20/110	<b>69.1%</b> 76/110
		Yes, most of the time	<b>50.1%</b> 6149/12263		<b>50.9%</b> 56/110	
		Yes, sometimes	<b>19.2%</b> 2357/12263	-	<b>22.7%</b> 25/110	-
		No	<b>4.7%</b> 576/12263	-	<b>8.2%</b> 9/110	-

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	<b>30.4%</b> 2785/9148	<b>78%</b> 7137/9148	<b>23.7%</b> 23/97	<b>70.1%</b> 68/97
		Yes, most of the time	<b>47.6%</b> 4352/9148		<b>46.4%</b> 45/97	
		Yes, sometimes	<b>18.7%</b> 1708/9148	-	<b>25.8%</b> 25/97	-
		No	<b>3.3%</b> 303/9148	-	<b>4.1%</b> 4/97	-
	10	Is additional staffing support provided if dependency needs on the ward(s) you work on increase?				
		Yes, always	<b>10.7%</b> 977/9143	<b>38.2%</b> 3493/9143	<b>2.1%</b> 2/97	<b>15.5%</b> 15/97
		Yes, most of the time	<b>27.5%</b> 2516/9143		<b>13.4%</b> 13/97	
		Yes, sometimes	<b>42.5%</b> 3887/9143	-	<b>43.3%</b> 42/97	-
		No	<b>19.3%</b> 1763/9143	-	<b>41.2%</b> 40/97	-
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	<b>16.3%</b> 1474/9047	<b>48.8%</b> 4416/9047	<b>2.1%</b> 2/97	<b>17.5%</b> 17/97
		Yes, most of the time	<b>32.5%</b> 2942/9047		<b>15.5%</b> 15/97	
		Yes, sometimes	<b>27.7%</b> 2506/9047	-	<b>32%</b> 31/97	-
		No	<b>23.5%</b> 2125/9047	-	<b>50.5%</b> 49/97	-



Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % (Yes, always and Yes, most of the time responses combined)	Your hospital Round 3: % Num/Den	Your hospital Round 3: % (Yes, always and Yes, most of the time responses combined)	
3.7 [1]	12	In the last week (except in emergency situations), were patient mealtimes kept free of any clinical activity on the ward(s) you work on?				
		Yes, always	<b>28.3%</b> 2488/8788	<b>67.6%</b> 5944/8788	<b>20%</b> 19/95	<b>52.6%</b> 50/95
		Yes, most of the time	<b>39.3%</b> 3456/8788		<b>32.6%</b> 31/95	
		Yes, sometimes	<b>16.8%</b> 1476/8788	-	<b>22.1%</b> 21/95	-
		No	<b>15.6%</b> 1368/8788	-	<b>25.3%</b> 24/95	-
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	<b>38%</b> 3356/8822	<b>65.2%</b> 5754/8822	<b>27.4%</b> 26/95	<b>61.1%</b> 58/95
		Yes, most of the time	<b>27.2%</b> 2398/8822		<b>33.7%</b> 32/95	
		Yes, sometimes	<b>22.5%</b> 1983/8822	-	<b>24.2%</b> 23/95	-
		No	<b>12.3%</b> 1085/8822	-	<b>14.7%</b> 14/95	-
3.11 [2]	14	Can you access snacks for people with dementia in between meals?				
		Yes, always	<b>44.5%</b> 4060/9119	<b>73.2%</b> 6675/9119	<b>39.2%</b> 38/97	<b>76.3%</b> 74/97
		Yes, most of the time	<b>28.7%</b> 2615/9119		<b>37.1%</b> 36/97	
		Yes, sometimes	<b>20.7%</b> 1886/9119	-	<b>17.5%</b> 17/97	-
		No	<b>6.1%</b> 558/9119	-	<b>6.2%</b> 6/97	-
N3a [2]	15	Are the nutrition and hydration needs of people with dementia communicated at handovers/ safety briefings?				
		Yes, always	<b>46.2%</b> 4199/9090	<b>79.6%</b> 7238/9090	<b>24.7%</b> 24/97	<b>71.1%</b> 69/97
		Yes, most of the time	<b>33.4%</b> 3039/9090		<b>46.4%</b> 45/97	
		Yes, sometimes	<b>15.5%</b> 1408/9090	-	<b>19.6%</b> 19/97	-
		No	<b>4.9%</b> 444/9090	-	<b>9.3%</b> 9/97	-

## 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 Diana Princess of Wales Hospital, Grimsby are provided.

<b>Registered Nurses (Band 5 or 6)</b>
Additional staff support.
Always have a staff member free to help with nutrition at mealtimes.
Better staffing levels would help in providing the best possible care. Training to continue for all members of staff. More specialist nurses to be employed at the trust.
Better staffing levels. Provide extra staff if required to meet the needs of a person with dementia.
Booklets that come with patient "my life" are so important and a real aide for staff. Best thing to have been done to improve care for patients.
By ensuring wards are staffed adequately according to workload and dependency.
By prioritising the individual needs of patients instead of prioritising patient flow/ bed management.
Continuous training/ updates.
Correct staffing levels to appreciate the extra time dementia patients require. Day rooms to take away from clinical area. Encourage snacks. Assisted feeding - again staffing does not always reflect time this requires.
Dementia specialist nurses.
Employ more staff.
Encourage information to be sent into the hospital along with the patient as this will enable everyone involved to provide a holistic approach to each individual.
Encourage, relative/ carer to stay with patient as much as possible, to provide a familiar face.
Extra carer to meet dementia patient needs over and above acceptable staffing level.
Having time to do one to one work with dementia patients.
I would say the hospital has improved the care and support of people with dementia with intense study days, which was so educational and my understanding of dementia was greatly improved in my practical skills on the ward.
It is almost impossible to get on the training. Food choices are very limited. Staff shortages mean time to spend with dementia patients is limited.
It would be beneficial to increase staffing to help with feeding of dementia patients, there should be availability to obtain certain foods from the kitchen out of hours, whereas at the moment the kitchen closes around 2pm daily.
More staff.
More staffing, a day room.
Not move dementia patients from bay to bay or different wards. Patient movement overridden by site managers when ward staff voice concerns due to moving dementia patients - even at night.
Not transfer patients with dementia during the night.
Patients being moved from dementia specialist bays to other wards causing increased confusion and distress. When patients moved from care homes, no information provided.
Specialist nurses - team of junior nurses who can be redeployed to support wards at short notice including days and nights. These workers should have additional training in care of patients with dementia - and

## Registered Nurses (Band 5 or 6)

assessments should be undertaken and needs assessed. Support should be available at mealtimes to ensure [nutrition needs are always met].

Stop moving dementia patients from ward to ward. Dementia patients struggle to adapt to new surroundings so repeated moves under instructions from bed management is counterproductive when trying to keep dementia patients safe. Snacks to be provided more frequently to allow patients to eat at all times if so wish.

Stop moving them from ward to ward purely due to insufficient beds, especially when they are settled and have become used to the staff.

Stop the night time movement of all [people with dementia], irrespective of how full the medical wards are.

The hospital has an excellent advocate/ teacher on dementia care and the department/ ward especially dedicated for these peoples is an excellent facility. The staffing levels are stretched and time is a difficulty for when patients are on a general ward.

Think that if funds were available, more staff to help support people with dementia whilst on a ward with unfamiliar surroundings.

To ensure staff receive the correct training - the training session could be included in the e-roster.

To provide music on our ward for dementia patients to listen to.

To reduce the number of bed moves to the minimum. I can recall a relative being distressed that a patient had been moved seven times during the admission period. To discontinue the practice of moving patients after teatime moves - often occur after the night shift has commenced.

## Registered Nurses (Band 7 or above)

Better planning and agreement not to move patients with dementia from ward to ward especially during night time.

By employing a team of unregistered practitioners who could support meaningful activities, 1:1 support, pathway support and carers support.

Ideally, require a specialist area within the hospital with dedicated care however, with the complex medical needs and conditions which many of the people with dementia suffer, this often cannot happen and they are admitted into critical care areas which can be distressing for many people.

More dedicated resources outside the ward staffing to link into wards to provide support. These patients require time and this needs to be built into how we deliver dementia care, not just "let's try and do the best we can". Having a dedicated dementia support team would provide valuable support for wards and better care for dementia patients and families.

More specialised nurses available, specialised areas/ wards dedicated to people with dementia.

Study was very informative.

The matron at my foundation trust is very motivated and is working in all areas to help facilitate better, or best support, patients with dementia. With the matrons input, I am working with my college directly in looking at barriers to improving pain management for patients with dementia and learning difficulties and providing education for ward staff members.

This ward spent a long time turning two bays and two cubicles into dementia bays. They worked very well. Not due to bed pressures. Dementia patients are being moved and upset and non-dementia patients put in these bays. Staff have found it difficult to get on dementia training. Nursing homes need to send better information.

## Healthcare Assistants

As the hospital has specialist wards, it is a daily occurrence that the beds are taken up by dementia patients as there is a free bed... There is not enough specialised staff for the patients and the daily duties of the nurses and care assistants are already stretched to the max to give safe best practice care... If a dementia patient has to be admitted to the hospital, it is vital that there is a ward just for those patients full of care assistants, nurses and specialist staff who are fully trained in dementia care to give the best possible care and support possible. [Nutrition] is a huge area that should be [re-evaluated] as the patients nutrition is not taken as importantly as it should. Care assistants are far and few between and do not have the time to assist the patients and the specialists need to visit the wards on a daily basis.

Background information from family or patient needed - resulting in more time with patient. Not enough information regarding patient and lack of support. Training should include a lot more than what it entails at present.

Because the number of patients with dementia is increasing there could be more than one patient with dementia on the ward at any given time. I have worked on a variety of different wards and it is the same wherever you work, the demand on healthcare staff is very high, I think it would help if there were two or more patients with advanced dementia on a ward - an extra member of staff should be given.

Better documentation of likes and dislikes regarding food and drink and preferences to dressing in bedside folders.

Daily activities to promote inclusion. Also, to regulate body clocks so not too sleepy in the day.

Dementia patients to have escorts when coming from A&E. More information regarding whether the patient has dementia or not from A&E.

Extra staff 1 to 1.

Give more training in dementia and provide more specialist care for them. Variable snacks and drinks should be made available and offered little and often.

Have more staff on the wards to give the patients with challenging behaviour associated with dementia more one to one care.

Have more training.

I feel "my life" passports should be filled in whilst the patient is in the emergency care centre where possible as this would give the wards the upper hand to treat the patient the way they prefer - for example, not giving a vegetarian meat/ calling the patient by their preferred name, if different from the one on their notes etc.

I think people with dementia should have a bay of their own due to noisiness and wandering i.e. keeping other patients awake.

Involve carers more, have a passport for them so we know how to care for their needs, better information from care homes. Better communication, more time, more staff.

Less bed moves at night, extra staff to support the safety of care and attention required for dementia whilst being able to continue supporting the needs of other patients on a busy admissions unit.

More information to be passed on regarding the individual.

More specific training and regular specialist support.

More staff needed sometimes to be able to offer dementia patients a bit more time that they may need.

More staff to encourage spending time with patients with dementia.

More staff to help support people with dementia i.e. sit and talk with them, play cards with them.

More support, training.

More time with individuals to learn about patient's background. Feel lack of support and not enough information about a patient, everyone is different. Feel training could be longer.

## Healthcare Assistants

More understanding [from] site managers so patients aren't moved in the night.

Need more training.

Not moving patients with dementia to other wards/ ward areas. staffing levels.

People with dementia like to have company at times - for example, reading them a story or looking at pictures. Some wards are very busy so they don't always get the support they need and they can get frustrated.

Some dementia patients need sitters, unfortunately, this is not always provided. As some dementia patients need a one to one care package as they are very confused and do not really understand what is happening to them, this can be dangerous for the patient and the staff working on that ward -especially at night when the staffing levels decrease somewhat.

Staff to have more time with individuals to gain more understanding of their needs. Background information.

Stop taking dementia patients out of bays provided for them and moving them around all the time.

The hospital care as sufficient support.

We have a specific ward for people with dementia but the ward doesn't always accept patients from a medical ward because they don't meet 'their criteria'?? Their patients are not treated in the most appropriate environment, causing disruption to other patients.

## Doctors

A dedicated inpatient dementia nurse to coordinate the variable needs of dementia patients, as medical teams sometimes become focused on the medical issues and may not see the patient frequently enough to build a picture - particularly if the communication with the nursing staff is not optimal. More emphasis [should be placed] on nutritional needs of patients with dementia and the assessment of their intake should be revisited frequently as it could vary within the same episode of admission.

Better training and awareness for staff not routinely caring for patients with dementia.

By ensuring that more doctors fill in end of life forms instead of treating and investigating end stage dementia patients endlessly... More importantly, the most important reason for high summary hospital-level mortality indicator (SHMI) in this hospital is PURELY because of end stage dementia people being brought into hospital to die. This has to stop... nationally! Train local nursing homes to facilitate palliative care for people with dementia instead of shunting them the minute they clutch their chest.

Continue to improve accessibility to workshop training - the one day course is exceptional and really helped focus and, in some instances, change my interactions with patients with dementia. The more people that can attend the training, the greater the opportunity for improving understanding and care delivery.

Out of hours support would be helpful.

Patients are constantly moved because of bed pressures.

Prevent movement of patients with dementia and delirium. A direct care by a geriatrician from admission.

Very confused patients are often moved around without warning - confusion increases for both patients and staff. Not infrequently, the staff have no idea who the patient is, the patient cannot tell me anything because they are confused. Length of stay increases because on every ward you have to start all over again (no idea about discharge planning).

## Allied Healthcare Professionals

Inform the assessment team that the patient has dementia so that they can be quickly dealt with in order to shorten the time they are in the department which may reduce their anxiety.

It would be helpful to have dementia liaison nurses coming to ward, multidisciplinary teams more regularly and for there to be better working relationships between specialisms. For example, I work in stroke services and therefore encounter a high proportion of people vulnerable to vascular decline specifically.

Unfortunately, local memory services are often reluctant to engage in dual working or in offering follow-up once a possible dementia is identified.

There tends to be initiatives started but not continued. There seems to be a single person within the organisation doing all the training, which makes it difficult to get people on the training. There are dementia bays and cubicles set up but not always used for dementia patients as bed management place other patients into these areas based on bed shortages. Patient "my life" booklets need to be better ingrained into pathways and services.

Time is a key issue with dementia patients and it's the one thing that most staff would agree is a commodity that we're all too short of.

## Students

Further equipment to keep dementia patients engaged i.e. dolls.

## Therapy Assistants & Allied Healthcare Professional Assistants

More dementia training for staff.

Provide day rooms (on each ward) where patients can physically move away from their hospital beds, interact with each other (and their relatives) in a more social setting, whilst having access to magazines, books, games, crafting materials etc. Insisting that patients remain on the bay, at their beds, I feel does not support patients with dementia/ Alzheimer's (or any other patient without dementia). Very often, patients with dementia will 'act out' past life/ activities/ job roles; they should not be forced back to their beds to sit, whilst waiting for a consultant/ nurse. We should be encouraging them to be more mobile and mentally active, to maintain independence.

## Ward-based Administrators

Offer training courses to all front-line staff.

To provide training for all staff.

## Other / Unknown

Have a ward area that only deals with patients with dementia no matter what the medical [reason] is for them being an inpatient and have a fenced outdoor area the patients can access while in hospital.

I think our hospital has worked hard to provide a dementia friendly environment, to help patients living with dementia. [Name] is passionate about dementia care and training.

## Other / Unknown

I think the home from home ward is very helpful, I have seen other patients suffer a lot of sleep loss in bays with dementia patients and behave badly towards them. I think writing reminders down for dementia patients is underused. Patients' dignity is not always maintained if they strip off clothing. The use of lowered bed is helping. Perhaps a card explaining dementia for those in a bay around a dementia patient to explain what is helpful and what might not be useful. As a [identifying job title], I cannot look at patient notes and rely on staff for information. Sometimes they are dismissive and discourage you entering a bay so as not to disturb a patient who has presented in a difficult manner, or assume [job title] has nothing to offer. Sometimes, I will ask the staff if a patient had dementia and a conversation is helpful. Rarely, I get a member of staff who tells me a person's preferences.

In the pathology department when taking bloods, it can be quite daunting for them waiting, if they are on their own and confused. So, something to help in there.





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