

**DEMENTIA**  
NATIONAL AUDIT OF  
DEMENTIA



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

**Local report appendices for:**

**West Suffolk Hospital**

**West Suffolk 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>Yes</b>	In development
		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>Yes</b>	New question for Round 3
		Pathway in development	<b>26.6%</b> 46/173		
		Stroke			
		Yes	<b>32.9%</b> 57/173	<b>No</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>Yes</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>	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)	<b>31.7%</b> 63/199	<b>Yes</b>	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)	<b>60.3%</b> 120/199	<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
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>Yes</b>	Yes
	4c	Patient Advice and Liaison Services (PALS) – in relation to the services for older people and people with dementia (y/n/na (hospitals in Wales))	<b>58.6%</b> 106/181	<b>Yes</b>	Yes
	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>	Yes
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, more 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>Yes</b>	New question for Round 3
	9a	<i>(If Q9=Yes)</i> The group meets:			
		Annually	<b>0.5%</b> 1/186	<b>Bi-monthly</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	√	New question for Round 3
		Organisations e.g. Alzheimer's Society	<b>64%</b> 119/186	√	
Carer/ service user representation	<b>66.1%</b> 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)	<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>ward G4</b>		New question for Round 3
	Ward 2:		<b>ward G5</b>		
	Ward 3:		<b>Ward F3</b>		
	Number of patients checked:		-	<b>0</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>0</b>	New question for Round 3
	Percentage of patients where the information was present:		-	<b>0%</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>	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	<b>91.1%</b> 164/180	✓	A visual indicator, symbol or marker
		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	-	
	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>	Yes	
	22a	<i>(If Q22=Yes)</i> Please say what this is:			
		A visual indicator, symbol or marker	<b>87.1%</b> 122/140	<b>N/A</b>	Alert sheet
		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>		
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		
9.13 [2]	23				

## 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>	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	<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>	Yes
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>	Yes

## Environment

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den		
6.11 [3]	Opportunities for social interaction for patients with dementia are available (e.g. to eat/ socialise away from their bed area with other patients):					
	38	On all adult wards	<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>28%</b> (14)
81 - 100	<b>73%</b> (7332)	<b>72%</b> (36)
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>66 - 96</b>
Mean	<b>84</b>	<b>84.8</b>
Median	<b>85</b>	<b>85</b>

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>40.1%</b> (4029)	<b>52%</b> (26)
Female	<b>59.9%</b> (6018)	<b>48%</b> (24)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>82.1%</b> (8250)	<b>100%</b> (50)
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>0%</b> (0)
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>0%</b> (0)

First language	National audit Round 3: % (N)	Your hospital Round 3: % (N)
English	<b>77.4%</b> (7778)	<b>96%</b> (48)
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>4%</b> (2)
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>22%</b> (11)
Fall	<b>13.3%</b> (1332)	<b>12%</b> (6)
Urinary/ renal	<b>9%</b> (901)	<b>4%</b> (2)
Hip dislocation/ hip fracture	<b>7.5%</b> (754)	<b>10%</b> (5)
Sepsis	<b>6.3%</b> (633)	<b>8%</b> (4)
Delirium/ confusion	<b>6%</b> (604)	<b>10%</b> (5)
Gastrointestinal	<b>5.9%</b> (595)	<b>8%</b> (4)
Cardiac/ vascular	<b>5.1%</b> (517)	<b>4%</b> (2)
Stroke	<b>3.8%</b> (380)	<b>4%</b> (2)
Neurological	<b>3.6%</b> (364)	<b>0%</b> (0)
Skin lacerations/ lesions	<b>2%</b> (204)	<b>2%</b> (1)
Impaired consciousness	<b>2%</b> (198)	<b>2%</b> (1)
Dementia**	<b>1.9%</b> (195)	<b>6%</b> (3)
Other	<b>1.9%</b> (192)	<b>2%</b> (1)
Unable to cope/ frailty	<b>1.6%</b> (160)	<b>0%</b> (0)
Dehydration	<b>1.4%</b> (143)	<b>2%</b> (1)
Haematology	<b>1.1%</b> (115)	<b>2%</b> (1)
Endocrine/ metabolic	<b>1.1%</b> (112)	<b>2%</b> (1)
Other fractures	<b>1%</b> (96)	<b>0%</b> (0)
Cancer	<b>0.9%</b> (94)	<b>0%</b> (0)
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>0%</b> (0)
Oral/ visual/ auditory	<b>0.4%</b> (45)	<b>0%</b> (0)
Rheumatic	<b>0.4%</b> (45)	<b>0%</b> (0)
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>38%</b> (19)
General Medical	<b>23.5%</b> (2359)	<b>20%</b> (10)
Other Medical	<b>9.9%</b> (999)	<b>10%</b> (5)
Orthopaedics	<b>8.9%</b> (892)	<b>10%</b> (5)
Surgical	<b>6.8%</b> (681)	<b>8%</b> (4)
Stroke	<b>4.5%</b> (456)	<b>10%</b> (5)
Cardiac	<b>2.5%</b> (248)	<b>2%</b> (1)
Other	<b>1.4%</b> (136)	<b>0%</b> (0)
Nephrology	<b>0.5%</b> (52)	<b>2%</b> (1)
Obstetrics/ Gynaecology	<b>0.4%</b> (41)	<b>0%</b> (0)
Critical Care	<b>0.2%</b> (23)	<b>0%</b> (0)
Oncology	<b>0.2%</b> (22)	<b>0%</b> (0)
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>14%</b> (7)
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>2.3%</b> (1)
Received end of life care in hospital/ was on an end of life care plan	<b>13%</b> (1302)	<b>18%</b> (9)

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>42%</b> (21)
11 – 20 days	<b>25.5%</b> (2559)	<b>30%</b> (15)
21 – 30 days	<b>11.3%</b> (1132)	<b>14%</b> (7)
31 – 40 days	<b>6.7%</b> (671)	<b>6%</b> (3)
41 – 50 days	<b>4.2%</b> (418)	<b>4%</b> (2)
51 – 60 days	<b>2.3%</b> (230)	<b>4%</b> (2)
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>3-60</b>
Median (days)	<b>12</b>	<b>13</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>66%</b> (33)	<b>44.2%</b> (19)
Respite care	<b>0.8%</b> (80)	<b>1.6%</b> (136)	<b>0%</b> (0)	<b>2.3%</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>2.3%</b> (1)
Carer's home	<b>2.1%</b> (212)	<b>2.1%</b> (181)	<b>4%</b> (2)	<b>0%</b> (0)
Intermediate care	<b>0.3%</b> (27)	<b>2%</b> (172)	<b>0%</b> (0)	<b>0%</b> (0)
Residential care	<b>16.9%</b> (1701)	<b>17.7%</b> (1551)	<b>18%</b> (9)	<b>23.3%</b> (10)
Nursing home	<b>19.7%</b> (1981)	<b>28.7%</b> (2511)	<b>12</b> (6)	<b>27.9%</b> (12)
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>0%</b> (0)	<b>0%</b> (0)
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>74.4%</b> (32)
Own/ carer's home to nursing/ residential care	<b>11.1%</b> (972)	<b>20.9%</b> (9)

\*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>100%</b> 48/48	100% 40/40	
	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>100%</b> 50/50	97.5% 39/40	
	15a	(If Q15=Yes) The assessment of nutritional status includes recording of BMI (Body Mass Index) or weight:				
			Yes, there is a recording of the patient's BMI or weight	<b>85.9%</b> 7580/8822 (89%, 79-96%)	<b>96%</b> 48/50	89.7% 35/39
		Other action taken	<b>4%</b> 352/8822 (2%, 0-5%)	<b>2%</b> 1/50	New answer options for Round 3	
	Yes or other action taken	<b>89.9%</b> 7932/2288 (93%, 85-98%)	<b>98%</b> 49/50			
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>100%</b> 50/50	100% 40/40	
1.12 [1]	17	As part of the multidisciplinary assessment has the patient been asked about any continence needs? (y/n/could not be assessed for recorded reasons)	<b>88%</b> 8572/9744 (92%, 85-97%)	<b>100%</b> 49/49	97.4% 38/39	
1.11 [1]	18	As part of the multidisciplinary assessment has the patient been assessed for the presence of any pain? (y/n/could not be assessed for recorded reasons)	<b>83.2%</b> 8185/9840 (90%, 77-98%)	<b>87.8%</b> 43/49	92.3% 36/39	

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
1.13 [1]	19	Has an assessment of functioning been carried out?			
		Yes, a standardised assessment has taken place	<b>45.3%</b> 4212/9294 (45%, 23-66%)	<b>51%</b> 25/49	0% 0/37
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	<b>42.8%</b> 3977/9294 (44%, 26-58%)	<b>49%</b> 24/49	New answer options for Round 3
		Yes, other	<b>1.7%</b> 161/9294 (0%, 0-2%)	<b>0%</b> 0/49	
		Yes (all options)	<b>89.8%</b> 8350/9294 (92%, 85-96%)	<b>100%</b> 49/49	

### 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>59.1%</b> 26/44	54.1% 20/37
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>34%</b> 17/50	7.5% 3/40
		Yes, but there was no indication that delirium may be present	<b>18.5%</b> 1863/10047 (15%, 6-25%)	<b>10%</b> 5/50	2.5% 1/40
		Yes (both options)	<b>44.5%</b> 4466/10047 (42%, 27-60%)	<b>44%</b> 22/50	10% 4/40
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>88.2%</b> 15/17	100% 3/3

## 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>62%</b> 31/50	5% 2/40
	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>51.6%</b> 16/31	100% 1/1
		Unknown*	<b>33.1%</b> 1865/5626 (14%, 0-44%)	<b>45.2%</b> 14/31	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>32.1%</b> 9/28	New question for Round 3
		Unknown*	<b>34.1%</b> 1916/5616 (16%, 3-48%)	<b>57.1%</b> 16/28	
	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>80%</b> 24/30	100% 1/1
		Unknown*	<b>29.9%</b> 1685/5631 (13%, 0-37%)	<b>16.7%</b> 5/30	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>12.9%</b> 4/31	100% 1/1
		Unknown*	<b>37.8%</b> 2110/5583 (20%, 5-50%)	<b>80.6%</b> 25/31	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>0%</b> 0/27	100% 1/1
		Unknown*	<b>39.1%</b> 2167/5539 (20%, 7-52%)	<b>96.3%</b> 26/27	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>32.1%</b> 9/28	100% 1/1
		Unknown*	<b>35.3%</b> 1977/5598 (17%, 3-46%)	<b>67.9%</b> 19/28	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>23.1%</b> 9/39	11.4% 4/35
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	<b>3.3%</b> 189/5690	<b>0%</b> 0/30	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>93.3%</b> 28/30	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	<b>10.8%</b> 616/5690	<b>6.7%</b> 2/30		
	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>79.5%</b> 31/39	94.3% 33/35
	25	Have there been any symptoms of delirium? (y/n)	<b>32.3%</b> 2367/7329 (33%, 22-41%)	<b>38.5%</b> 15/39	25.7% 9/35
	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>40%</b> 6/15	66.7% 6/9
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>25.6%</b> 10/39	20% 7/35	
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>30%</b> 3/10	42.9% 3/7	

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?	<b>65.5%</b> 1649/2519 (71%, 53-89%)	<b>92.3%</b> 12/13	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>83.3%</b> 10/12	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>0%</b> 0/10	
		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>90%</b> 9/10	
		There is no record of either consent or best interest decision making*	<b>18.3%</b> 212/1161 (14%, 0-33%)	<b>10%</b> 1/10	
	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>16.7%</b> 2/12	
	27a (iii)	The patients consent was requested and this is recorded	<b>29.1%</b> 142/488 (25%, 0-50%)	<b>0%</b> 0/2	
		There is no record of the patients consent*	<b>70.9%</b> 346/488 (75%, 50-100%)	<b>100%</b> 2/2	
	27a (ii & iii)	Consent or best interests (responses options combined)	<b>66.2%</b> 1091/1649 (67%, 50-86%)	<b>75%</b> 9/12	
		No consent or best interests (response options combined)	<b>33.8%</b> 558/1649 (33%, 14-50%)	<b>25%</b> 3/12	

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

## Discharge coordination and multi-disciplinary team input

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
6.4 [2]	28	Did a named person/ identified team co-ordinate the discharge plan? (y/n/na)	<b>82%</b> 5807/7083 (89%, 72-96%)	<b>87.2%</b> 34/39	75.8% 25/33
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>60.9%</b> 14/23	32.4% 11/34
	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>94.4%</b> 34/36	77.1% 27/35
	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>84.6%</b> 33/39	57.1% 20/35
	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>87.2%</b> 34/39	62.9% 22/35
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>89.7%</b> 35/39	97.1% 34/35
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>79.5%</b> 31/39	74.3% 26/35
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>100%</b> 39/39	94.3% 33/35
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> 39/39	New question for Round 3

## Discharge planning

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den (Median, IQR)	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
5.1 [2]	34	Was discharge planning initiated within 24 hours of admission? (y/n/na)	<b>47.4%</b> 2483/5242 (48%, 27-67%)	<b>52.4%</b> 11/21	81.8% 27/33
	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>61.1%</b> 11/18	50% 1/2
		Patient awaiting assessment	<b>9.1%</b> 190/2088	<b>11.1%</b> 2/18	0% 0/2
		Patient awaiting history/ results	<b>6.1%</b> 127/2088	<b>5.6%</b> 1/18	0% 0/2
		Patient awaiting surgery	<b>9.6%</b> 200/2088	<b>11.1%</b> 2/18	0% 0/2
		Patient presenting confusion	<b>5.7%</b> 120/2088	<b>11.1%</b> 2/18	0% 0/2
		Patient on end of life plan	<b>0%</b> 1/2088	<b>0%</b> 0/18	-
		Patient being transferred to another hospital	<b>0.1%</b> 2/2088	<b>0%</b> 0/18	0% 0/2
		Patient unresponsive	<b>0.3%</b> 6/2088	<b>0%</b> 0/18	0% 0/2
		Patient being discharged to nursing/ residential care	<b>6.5%</b> 136/2088	<b>0%</b> 0/18	0% 0/2
		Not recorded	-	-	50% 1/2
Other	<b>0%</b> 0/2088	<b>0%</b> 0/18	0% 0/2		

## 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>23.1%</b> 9/39	31.4% 11/35
		24 hours	<b>12.2%</b> 897/7329	<b>15.4%</b> 6/39	5.7% 2/35
		25 - 48 hours	<b>14.7%</b> 1075/7329	<b>20.5%</b> 8/39	28.6% 10/35
		More than 48 hours	<b>27.1%</b> 1985/7329	<b>33.3%</b> 13/39	8.6% 3/35
		No notice at all	<b>0.5%</b> 35/7329	<b>0%</b> 0/39	0% 0/35
		Not documented	<b>24.2%</b> 1770/7329	<b>7.7%</b> 3/39	25.7% 9/35
		No carer, family, friend/ could not contact	<b>1.8%</b> 132/7329	<b>0%</b> 0/39	0% 0/35
		Patient specified information withheld	<b>0%</b> 3/7329	<b>0%</b> 0/39	New answer option for Round 3
5.5 [2]	36	An assessment of the carer's current needs has taken place in advance of discharge: (y/n/na)	<b>67.3%</b> 2605/3868 (70%, 50-88%)	<b>82.4%</b> 14/17	31.3% 5/16

## Appendix D: Carer demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
18 – 24 years	<b>1%</b> (48)	<b>0%</b> (0)
25 – 34 years	<b>2.9%</b> (133)	<b>0%</b> (0)
35 – 44 years	<b>5.6%</b> (259)	<b>0%</b> (0)
45 – 54 years	<b>16.2%</b> (749)	<b>18.2%</b> (4)
55 – 64 years	<b>25.8%</b> (1193)	<b>31.8%</b> (7)
65 – 74 years	<b>20.8%</b> (960)	<b>22.7%</b> (5)
75 – 84 years	<b>19.1%</b> (885)	<b>18.2%</b> (4)
85 years or over	<b>7.4%</b> (343)	<b>9.1%</b> (2)
Prefer not to say	<b>1.2%</b> (56)	<b>0%</b> (0)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>30.6%</b> (1413)	<b>27.3%</b> (6)
Female	<b>68.1%</b> (3150)	<b>72.7%</b> (16)
Other	<b>0.1%</b> (4)	<b>0%</b> (0)
Prefer not to say	<b>1.2%</b> (57)	<b>0%</b> (0)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>88.4%</b> (4079)	<b>100%</b> (22)
Black/ Black British	<b>3%</b> (140)	<b>0%</b> (0)
Asian/ Asian British	<b>3.3%</b> (152)	<b>0%</b> (0)
Mixed	<b>1%</b> (44)	<b>0%</b> (0)
Chinese	<b>0.2%</b> (9)	<b>0%</b> (0)
Other	<b>1.4%</b> (64)	<b>0%</b> (0)
Prefer not to say	<b>2.7%</b> (124)	<b>0%</b> (0)

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	<b>33.5%</b> (1558)	<b>36.4%</b> (8)
Family member	<b>55.9%</b> (2597)	<b>59.1%</b> (13)
Friend	<b>4.4%</b> (203)	<b>4.5%</b> (1)
Professional carer (health or social care)	<b>5.4%</b> (249)	<b>0%</b> (0)
Other	<b>0.9%</b> (41)	<b>0%</b> (0)

One of main carers for patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Yes	<b>77.8%</b> (3356)	<b>89.5%</b> (17)

## Appendix E: Carer questionnaire data

### Patient care

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den
9.3 [1]	1	Do you feel that hospital staff were well informed and understood the needs of the person you look after?	
		<b>46.5%</b> 2130/4578	<b>72.7%</b> 16/22
		<b>43.3%</b> 1980/4578	<b>27.3%</b> 6/22
		<b>10.2%</b> 468/4578	<b>0%</b> 0/22
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?	
		<b>54.2%</b> 2489/4592	<b>72.7%</b> 16/22
		<b>36.4%</b> 1672/4592	<b>27.3%</b> 6/22
		<b>9.4%</b> 431/4592	<b>0%</b> 0/22
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>	
		<b>55.4%</b> 2456/4433	<b>72.7%</b> 16/22
		<b>34.2%</b> 1515/4433	<b>22.7%</b> 5/22
		<b>10.4%</b> 462/4433	<b>4.5%</b> 1/22
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		<b>76%</b> 3471/4569	<b>95.5%</b> 21/22
		<b>20.8%</b> 952/4569	<b>4.5%</b> 1/22
		<b>3.2%</b> 146/4569	<b>0%</b> 0/22

## 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>40.9%</b> 9/22
		Yes, to some extent	<b>40.4%</b> 1843/4566	<b>50%</b> 11/22
		No	<b>17.8%</b> 815/4566	<b>9.1%</b> 2/22
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>40.9%</b> 9/22
		Yes, to some extent	<b>36.4%</b> 1637/4497	<b>45.5%</b> 10/22
		No	<b>16.1%</b> 722/4497	<b>13.6%</b> 3/22
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>59.1%</b> 13/22
		Yes, to some extent	<b>34.5%</b> 1563/4524	<b>27.3%</b> 6/22
		No	<b>20.1%</b> 908/4524	<b>13.6%</b> 3/22



## Overall

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
	8	Overall, how would you rate the care received by the person you look after during the hospital stay?		
		Excellent	<b>34.5%</b> 1602/4645	<b>45.5%</b> 10/22
		Very good	<b>33.9%</b> 1575/4645	<b>40.9%</b> 9/22
		Good	<b>17%</b> 790/4645	<b>9.1%</b> 2/22
		Fair	<b>9.6%</b> 446/4645	<b>4.5%</b> 1/22
		Poor	<b>5%</b> 232/4645	<b>0%</b> 0/22
	9	How likely would you be to recommend the service to friends and family if they needed similar care or treatment?		
		Extremely likely	<b>42.5%</b> 1933/4544	<b>54.5%</b> 12/22
		Likely	<b>34.1%</b> 1551/4544	<b>36.4%</b> 8/22
		Neither likely nor unlikely	<b>14.3%</b> 648/4544	<b>9.1%</b> 2/22
		Unlikely	<b>4.8%</b> 220/4544	<b>0%</b> 0/22
		Extremely unlikely	<b>4.2%</b> 192/4544	<b>0%</b> 0/22

## 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?		
		Very satisfied	<b>50.3%</b> 2204/4379	<b>66.7%</b> 14/21
		Somewhat satisfied	<b>34%</b> 1487/4379	<b>33.3%</b> 7/21
		Somewhat dissatisfied	<b>9.9%</b> 434/4379	<b>0%</b> 0/21
		Very dissatisfied	<b>5.8%</b> 254/4379	<b>0%</b> 0/21

## 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>41.7%</b> (40)
26 - 50%	<b>25.6%</b> (3651)	<b>21.9%</b> (21)
51 - 75%	<b>24.4%</b> (3489)	<b>29.2%</b> (28)
More than 75%	<b>18.1%</b> (2588)	<b>7.3%</b> (7)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>15.7%</b> (2260)	<b>8.3%</b> (8)
Female	<b>83.2%</b> (11954)	<b>90.6%</b> (87)
Other	<b>0.2%</b> (34)	<b>0%</b> (0)
Prefer not to say	<b>0.8%</b> (113)	<b>1%</b> (1)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>79.9%</b> (11467)	<b>88.5%</b> (85)
Black/ Black British	<b>4.1%</b> (594)	<b>1%</b> (1)
Asian/ Asian British	<b>8%</b> (1150)	<b>2.1%</b> (2)
Mixed	<b>1.3%</b> (183)	<b>1%</b> (1)
Chinese	<b>0.5%</b> (73)	<b>1%</b> (1)
Other	<b>4.5%</b> (646)	<b>3.1%</b> (3)
Prefer not to say	<b>1.7%</b> (241)	<b>3.1%</b> (3)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	<b>29.9%</b> (4300)	<b>35.4%</b> (34)
Registered nurse (Band 7 or above)	<b>12.7%</b> (1831)	<b>18.8%</b> (18)
Healthcare assistant	<b>23.1%</b> (3324)	<b>22.9%</b> (22)
Doctor	<b>11.5%</b> (1645)	<b>6.3%</b> (6)
Allied healthcare professional	<b>11.9%</b> (1713)	<b>7.3%</b> (7)
Therapy assistant/ allied healthcare professional assistant	<b>2.6%</b> (367)	<b>3.1%</b> (3)
Student	<b>2.3%</b> (332)	<b>1%</b> (1)
Ward based administrators	<b>4%</b> (571)	<b>2.1%</b> (2)
Other/ unknown	<b>1.9%</b> (279)	<b>3.1%</b> (3)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	<b>13%</b> (1866)	<b>17.5%</b> (17)
30 hours or more	<b>87%</b> (12458)	<b>82.5%</b> (80)

<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>2.1% (2)</b>
6 - 11 months	<b>9.5% (1364)</b>	<b>4.1% (4)</b>
1 - 2 years	<b>15.6% (2242)</b>	<b>16.5% (16)</b>
3 - 5 years	<b>16.4% (2350)</b>	<b>16.5% (16)</b>
6 - 10 years	<b>15.9% (2283)</b>	<b>18.6% (18)</b>
11 - 15 years	<b>12.1% (1739)</b>	<b>18.6% (18)</b>
More than 15 years	<b>22.4% (3205)</b>	<b>23.7% (23)</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>42.6%</b> 40/94	<b>78.7%</b> 74/94	
		Yes, most of the time	<b>32.9%</b> 4614/14024		<b>36.2%</b> 34/94		
		Yes, sometimes	<b>26.8%</b> 3760/14024	-	<b>13.8%</b> 13/94	-	
		No	<b>11.6%</b> 1624/14024	-	<b>7.4%</b> 7/94	-	
		1b	Out of office hours				
			Yes, always	<b>7.8%</b> 874/11207	<b>23.5%</b> 2637/11207	<b>4.5%</b> 3/67	<b>20.9%</b> 14/67
			Yes, most of the time	<b>15.7%</b> 1763/11207		<b>16.4%</b> 11/67	
	Yes, sometimes		<b>27.9%</b> 3129/11207	-	<b>26.9%</b> 18/67	-	
	No	<b>48.6%</b> 5441/11207	-	<b>52.2%</b> 35/67	-		

## Dementia care training

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	
7.4 [2]	What form did your dementia training at this hospital take? <i>Please tick all that apply:</i>			
	2	eLearning	<b>42.8%</b> 5653/13205	<b>54.7%</b> 52/95
		Workshop/ study day	<b>53.2%</b> 7030/13205	<b>62.1%</b> 59/95
		Higher education module	<b>5.4%</b> 713/13205	<b>6.3%</b> 6/95
		Workbook	<b>7.7%</b> 1018/13205	<b>3.2%</b> 3/95
		Other	<b>7.3%</b> 961/13205	<b>13.7%</b> 13/95
		I have not received any dementia training at this hospital	<b>17.3%</b> 2278/13205	<b>10.5%</b> 10/95
	2a	Following your training at this hospital, do you feel better prepared to provide care/ support to people with dementia?		
		Yes, much better prepared	<b>42.2%</b> 4502/10670	<b>33.3%</b> 28/84
		Yes, somewhat better prepared	<b>50.5%</b> 5390/10670	<b>60.7%</b> 51/84
No		<b>7.3%</b> 778/10670	<b>6%</b> 5/84	

## 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>18.6%</b> 18/97	<b>55.7%</b> 54/97
		Yes, most of the time	<b>38.5%</b> 5525/14345		<b>37.1%</b> 36/97	
		Yes, sometimes	<b>33%</b> 4734/14345	-	<b>37.1%</b> 36/97	-
		No	<b>7.1%</b> 1014/14345	-	<b>7.2%</b> 7/97	-
	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>24.4%</b> 22/90	<b>70%</b> 63/90
		Yes, most of the time	<b>40.9%</b> 5454/13329		<b>45.6%</b> 41/90	
		Yes, sometimes	<b>30.6%</b> 4074/13329	-	<b>30%</b> 27/90	-
		No	<b>1.9%</b> 252/13329	-	<b>0%</b> 0/90	-
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>27.1%</b> 26/96	<b>67.7%</b> 65/96
		Yes, most of the time	<b>33.2%</b> 4759/14333		<b>40.6%</b> 39/96	
		Yes, sometimes	<b>27.3%</b> 3913/14333	-	<b>17.7%</b> 17/96	-
	No	<b>10.6%</b> 1516/14333	-	<b>14.6%</b> 14/96	-	

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>42.7%</b> 35/82
		Occasionally	<b>37.2%</b> 4636/12457	<b>34.1%</b> 28/82
		Almost Never	<b>9.7%</b> 1210/12457	<b>18.3%</b> 15/82
		Never	<b>3.3%</b> 408/12457	<b>4.9%</b> 4/82

## 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>72.2%</b> 57/79	<b>91.1%</b> 72/79
		Yes, most of the time	<b>27.3%</b> 3271/11978		<b>19%</b> 15/79	
		Yes, sometimes	<b>16.1%</b> 1927/11978	-	<b>7.6%</b> 6/79	-
		No	<b>5.4%</b> 649/11978	-	<b>1.3%</b> 1/79	-
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>30.5%</b> 25/82	<b>84.1%</b> 69/82
		Yes, most of the time	<b>50.1%</b> 6149/12263		<b>53.7%</b> 44/82	
		Yes, sometimes	<b>19.2%</b> 2357/12263	-	<b>14.6%</b> 12/82	-
		No	<b>4.7%</b> 576/12263	-	<b>1.2%</b> 1/82	-

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>11.6%</b> 8/69	<b>81.2%</b> 56/69
		Yes, most of the time	<b>47.6%</b> 4352/9148		<b>69.6%</b> 48/69	
		Yes, sometimes	<b>18.7%</b> 1708/9148	-	<b>15.9%</b> 11/69	-
		No	<b>3.3%</b> 303/9148	-	<b>2.9%</b> 2/69	-
	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>8.7%</b> 6/69	<b>34.8%</b> 24/69
		Yes, most of the time	<b>27.5%</b> 2516/9143		<b>26.1%</b> 18/69	
		Yes, sometimes	<b>42.5%</b> 3887/9143	-	<b>40.6%</b> 28/69	-
		No	<b>19.3%</b> 1763/9143	-	<b>24.6%</b> 17/69	-
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>20.6%</b> 14/68	<b>57.4%</b> 39/68
		Yes, most of the time	<b>32.5%</b> 2942/9047		<b>36.8%</b> 25/68	
		Yes, sometimes	<b>27.7%</b> 2506/9047	-	<b>25%</b> 17/68	-
	No	<b>23.5%</b> 2125/9047	-	<b>17.6%</b> 12/68	-	



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>29.2%</b> 19/65	<b>67.7%</b> 44/65
		Yes, most of the time	<b>39.3%</b> 3456/8788		<b>38.5%</b> 25/65	
		Yes, sometimes	<b>16.8%</b> 1476/8788	-	<b>16.9%</b> 11/65	-
		No	<b>15.6%</b> 1368/8788	-	<b>15.4%</b> 10/65	-
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>33.8%</b> 22/65	<b>61.5%</b> 40/65
		Yes, most of the time	<b>27.2%</b> 2398/8822		<b>27.7%</b> 18/65	
		Yes, sometimes	<b>22.5%</b> 1983/8822	-	<b>23.1%</b> 15/65	-
		No	<b>12.3%</b> 1085/8822	-	<b>15.4%</b> 10/65	-
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>41.2%</b> 28/68	<b>80.9%</b> 55/68
		Yes, most of the time	<b>28.7%</b> 2615/9119		<b>39.7%</b> 27/68	
		Yes, sometimes	<b>20.7%</b> 1886/9119	-	<b>11.8%</b> 8/68	-
		No	<b>6.1%</b> 558/9119	-	<b>7.4%</b> 5/68	-
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>37.9%</b> 25/66	<b>80.3%</b> 53/66
		Yes, most of the time	<b>33.4%</b> 3039/9090		<b>42.4%</b> 28/66	
		Yes, sometimes	<b>15.5%</b> 1408/9090	-	<b>15.2%</b> 10/66	-
		No	<b>4.9%</b> 444/9090	-	<b>4.5%</b> 3/66	-

## 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 West Suffolk Hospital are provided.

<b>Registered Nurses (Band 5 or 6)</b>
Adequate staffing levels.
Better staffing levels so the nurses have more time for individual needs of people with dementia.
Better staffing so I have more time to give patients and their families support and information. Need more games to give to patients to help them to relax, but health and safety often prevent this i.e. painting. I do not have time to give good quality support. Would also benefit from some leaflets/ information packs we could give to families. Kitchen could provide an option for finger foods. Containers and lids should be easy to open - not currently.
Education for staff has increased which has raised awareness hospital wide coinciding with community increased awareness and openness. I am unaware of anything in particular to assist this group of patients.
Further training/ input from specialist dementia team. Improved communication between care providers and hospital re: personal needs of each patient to aid provision of optimal care.
Have more nurse specialists in dementia care, as there is an increase in the number of patients being admitted with other conditions, but who have dementia. Provide a quieter area for the assessment for those patients admitted with conditions other than their dementia - as the "hustle and bustle" of a normal acute admissions unit is distressing to them, without the ordeal of having tests and investigations. More coping strategies for staff when patients with dementia become aggressive/ agitated. It is also distressing for other patients to witness this as they may not understand the reason the patient is behaving this way.
Higher number of qualified nurses per patient on the wards would give more time.
Higher staff ratio to enable staff to spend more time with patients. Day room or somewhere other than bedside for patients to sit.
I feel one major improvement, would be to have all patients with dementia to be completely looked after by one nurse e.g. to do their admission, involved with their procedure, recovery and discharge. This would provide an understanding of the patients' needs, but mainly it would provide continuity, trust, confidence and continued reinforcement of information of events while the patient was in an unfamiliar environment. I think it would be of great improvement to dementia patients' outcomes if more discussion took place and time given to their complex needs.
I feel that our service on this unit could be improved by having one nurse dealing with the patient throughout their time in the unit e.g. the admission, the procedure and then the discharge. This I feel would improve the outcomes and success of procedures.
It could ensure that all wards have doors that are locked at night.
More dementia champions working ward based, especially at night.
More dementia trained staff.
More staff on ward.
More staff.
More study days and exercises we can use to help patients on the ward.
More time with the patients but under-staffing reduces the time we have. It would also be helpful if the homes the patient come from, give us the information we require in the "this is me" booklet or at least send the patients in with details of what they like, how they are, what calms them etc.

## Registered Nurses (Band 5 or 6)

More training in work time and better staffing levels, better equipped wards and more bed space per patient.

One nurse to six patients. Not enough time. 'Memory walk' - no time for patients to enjoy. No protected time. High care needs not reflected in staffing.

Right patient, right ward, right time.

The hospital has developed in the last year, the use of props to support and distract our patients that spend sometime in the wards [has proven to] work very well. The new pictures on the corridors have given topic of conversation for patients and staff. Maybe consider a garden in the summer for patients to walk and if want treat some plants.

They should not move dementia patients, many are moved late in evening. Many have been to three or more wards.

We should have specialist nurses based on the ward due to the high number of cases and their severity.

When patients go for surgery who have dementia, post-operatively, they sometimes require one to one care on the ward. Sometimes staffing is a huge problem.

## Registered Nurses (Band 7 or above)

Continue the dementia friendly environment improvements across all wards, including the provision of day room facilities.

Dementia trained healthcare support workers (specific structured training with competencies such as the acute illness management course for deteriorating patients) that could be utilised on wards with a high ratio of dementia patients.

Have specialist unit.

Have the specialist dementia care nurses actually work night shifts to see, and recognise, the issues that night staff have to cope with when people with dementia start to become agitated and become uncontrollable - when there are minimal staffing levels with the same work load as the day team, but no extra staff to care for these patients.

If there was integrated working between acute services and the mental health services - currently there is no mental health liaison. It would be great to offer 'finger foods'. Sometimes, usually with someone with advanced dementia, it is difficult to achieve optimal nutrition as they will persistently decline oral intake.

More dementia specialist nurses at West Suffolk Hospital so they can visit the wards daily and help with troubleshooting/ challenging patients.

More training, take on board what other hospitals are doing regarding visiting times and uniform.

More ward based activities in addition to our "Fiddle blankets" and "Twiddle mitts" e.g. Memory boxes (ration books, photographs etc.) - staff would need to ensure that these did not just sit in a corner gathering dust. Addition to the care plans/ rounding tools, could help prompt usage.

Pain management - i.e. use abbey pain scale – [it is] in place just needs to be used more frequently.

Prevention of multiple transfers from ward to ward.

To roll out the environmental changes an all wards across the trust. This has already been started on two wards but needs momentum to continue across all wards.

Wards need more staff to support people with dementia.

## Healthcare Assistants

"This is me" booklets are a really good way of understanding the needs and personality of your patient - would be helpful if every patient with dementia had one filled out by a relative or close friend. Moving patients who have dementia overnight has a significant effect on how well they settle into a new environment. They should not be moved unless for clinical need.

An ideal world - reduce number of patients per bay, would reduce noise levels and 'closed in' feeling. Provide enclosed/ safe garden areas - a place of calm and tranquillity.

Dedicated dementia nurse or HCA for each shift.

Ensure all patients with dementia have information available, likes, dislikes etc. Although I try to make sure this already happens, would be better to be more of a priority, especially when the patient becomes distressed.

Have more specialised staff who are trained in dementia.

Having time to chat more, go down memory lane. More colourful plates, cups.

I think we are a fantastic example of a proactive, supportive environment for patients with dementia.

Maybe regular training and not just a couple of hours.

More training, other than just mandatory training.

Provide more staffing, which isn't always possible. When that happens, it becomes a case of who needs the help more - either other patients go without or the dementia patient is left.

To carry on giving the support we have at the moment. [illegible] training ongoing.

To reintroduce the "this is me" books, and to ensure it follows the patient around the hospital. Very important that we know a little about their background and [illegible], enabling us to connect with them when needed.

We always have short staff in the ward which is not giving us opportunity to spend more time with dementia patients. Need more people who can spend time with them, play games or have simple chats.

## Doctors

*No comments from doctors for your hospital.*

## Allied Healthcare Professionals

Food and drinks available throughout the day. Areas off the ward to wander. Outside garden space.

Include a section on the electronic system that includes specific information regarding their dementia (likes/ dislikes/ preferred name/ usual carer/ favourite foods etc.)

More regular training.

More use of the "this is me" booklet.

We have great care.

## Students

Taking time to explain the procedures to patients.

## **Therapy Assistants & Allied Healthcare Professional Assistants**

I think on the whole, the hospital works very hard and generally it is easy to access help and support, especially using the dementia champions.

## **Ward-based Administrators**

More education to staff members who are in close contact with patients.

## **Other / Unknown**

By identifying patients who have a diagnosis of dementia and implementing the initiatives we are using here, the "getting to know me", the 'blue wrist bands' and the "forget me not" flower.

I believe the most important change would be around availability of services in the community. This would mean that the inpatient stay would be shorter as community care would have managed the increase in need, without the need for acute admission. It would also mean that discharge to home with the comfort and familiarity that it brings would happen more quickly.

Need more staff!! No time.



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