

**DEMENTIA**  
NATIONAL AUDIT OF  
DEMENTIA



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

**Local report appendices for:**

**University Hospital Lewisham**

**Lewisham and Greenwich NHS Trust**

**July 2017**

**Commissioned by:**



**HQIP**

Healthcare Quality  
Improvement Partnership

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

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

# Table of Contents

---

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

## Introduction to the appendices

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

Std no. [Type]	Question number and text		National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den
Standard reference and type. Standards document can be found on the <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>No</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>	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>	No
	4b	Complaints – analysed by age (y/n)	<b>52.3%</b> 104/199	<b>Yes</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>Yes</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>	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>No</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>N/A</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>Quarterly</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>No</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>	No
	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>	N/A
	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>	N/A
	17c	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes recurring factors that may cause or exacerbate distress: (y/n)	<b>100%</b> 196/196	<b>Yes</b>	N/A
	17d	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes support or actions that can calm the person if they are agitated: (y/n)	<b>99%</b> 194/196	<b>Yes</b>	N/A
1.15 [3]	17e	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes life details which aid communication: (y/n)	<b>99.5%</b> 195/196	<b>Yes</b>	N/A
1.14 [1]	18	<i>(If Q16=Yes)</i> Information collected by the pro-forma includes how the person with dementia communicates with others/ understands communication: (y/n)	<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>	N/A
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>oak</b>		New question for Round 3
	Ward 2:		<b>elm</b>		
	Ward 3:		<b>ash</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>5</b>	New question for Round 3
	Percentage of patients where the information was present:		-	<b>50%</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>Yes</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	√	A box to highlight or alert dementia condition in the notes or care plan
		Alert sheet or electronic flag	<b>18.6%</b> 26/140	-	
		A box to highlight or alert dementia condition in the notes or care plan	<b>20.7%</b> 29/140	-	
Other		<b>17.9%</b> 25/140	-		
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>	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>No</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>	No
6.4 [2]	32	There is a named person/ identified team who takes overall responsibility for complex needs discharge and this includes people with dementia: (y/n)	<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>	No

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	Your hospital Round 3: % Num/Den	Your hospital Round 2: % Num/Den	
N3b [2]	35	The hospital can provide finger foods for people with dementia (please select one option only):			New question for Round 3
		Patients can choose a complete meal option (including vegetarian) that can be eaten without cutlery (finger food) on every day	<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>21.3%</b> (10)
81 - 100	<b>73%</b> (7332)	<b>78.7%</b> (37)
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>75 - 98</b>
Mean	<b>84</b>	<b>85.4</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>38.3%</b> (18)
Female	<b>59.9%</b> (6018)	<b>61.7%</b> (29)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>82.1%</b> (8250)	<b>63.8%</b> (30)
Black/ Black British	<b>1.2%</b> (123)	<b>12.8%</b> (6)
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>2.1%</b> (1)
Not documented	<b>2.1%</b> (210)	<b>8.5%</b> (4)
Other	<b>12.4%</b> (1250)	<b>12.8%</b> (6)

First language	National audit Round 3: % (N)	Your hospital Round 3: % (N)
English	<b>77.4%</b> (7778)	<b>100%</b> (47)
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>0%</b> (0)
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>25.5%</b> (12)
Fall	<b>13.3%</b> (1332)	<b>6.4%</b> (3)
Urinary/ renal	<b>9%</b> (901)	<b>10.6%</b> (5)
Hip dislocation/ hip fracture	<b>7.5%</b> (754)	<b>4.3%</b> (2)
Sepsis	<b>6.3%</b> (633)	<b>8.5%</b> (4)
Delirium/ confusion	<b>6%</b> (604)	<b>6.4%</b> (3)
Gastrointestinal	<b>5.9%</b> (595)	<b>0%</b> (0)
Cardiac/ vascular	<b>5.1%</b> (517)	<b>2.1%</b> (1)
Stroke	<b>3.8%</b> (380)	<b>2.1%</b> (1)
Neurological	<b>3.6%</b> (364)	<b>2.1%</b> (1)
Skin lacerations/ lesions	<b>2%</b> (204)	<b>2.1%</b> (1)
Impaired consciousness	<b>2%</b> (198)	<b>2.1%</b> (1)
Dementia**	<b>1.9%</b> (195)	<b>6.4%</b> (3)
Other	<b>1.9%</b> (192)	<b>0%</b> (0)
Unable to cope/ frailty	<b>1.6%</b> (160)	<b>2.1%</b> (1)
Dehydration	<b>1.4%</b> (143)	<b>0%</b> (0)
Haematology	<b>1.1%</b> (115)	<b>0%</b> (0)
Endocrine/ metabolic	<b>1.1%</b> (112)	<b>6.4%</b> (3)
Other fractures	<b>1%</b> (96)	<b>0%</b> (0)
Cancer	<b>0.9%</b> (94)	<b>2.1%</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>0%</b> (0)
Oral/ visual/ auditory	<b>0.4%</b> (45)	<b>4.3%</b> (2)
Rheumatic	<b>0.4%</b> (45)	<b>2.1%</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>4.3%</b> (2)

\*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>59.6%</b> (28)
General Medical	<b>23.5%</b> (2359)	<b>31.9%</b> (15)
Other Medical	<b>9.9%</b> (999)	<b>0%</b> (0)
Orthopaedics	<b>8.9%</b> (892)	<b>0%</b> (0)
Surgical	<b>6.8%</b> (681)	<b>6.4%</b> (3)
Stroke	<b>4.5%</b> (456)	<b>2.1%</b> (1)
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>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>6.4%</b> (3)
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>10.6%</b> (5)

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>29.8%</b> (14)
11 – 20 days	<b>25.5%</b> (2559)	<b>31.9%</b> (15)
21 – 30 days	<b>11.3%</b> (1132)	<b>4.3%</b> (2)
31 – 40 days	<b>6.7%</b> (671)	<b>10.6%</b> (5)
41 – 50 days	<b>4.2%</b> (418)	<b>8.5%</b> (4)
51 – 60 days	<b>2.3%</b> (230)	<b>4.3%</b> (2)
61 – 70 days	<b>1.7%</b> (168)	<b>0%</b> (0)
71 – 80 days	<b>1%</b> (102)	<b>2.1%</b> (1)
81 – 90 days	<b>0.6%</b> (62)	<b>6.4%</b> (3)
More than 90 days	<b>1.5%</b> (152)	<b>2.1%</b> (1)

Length of stay in the hospital	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Range	<b>2-775</b>	<b>4-103</b>
Median (days)	<b>12</b>	<b>15</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>63.8%</b> (30)	<b>50%</b> (22)
Respite care	<b>0.8%</b> (80)	<b>1.6%</b> (136)	<b>0%</b> (0)	<b>0%</b> (0)
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>2.1%</b> (1)	<b>2.3%</b> (1)
Intermediate care	<b>0.3%</b> (27)	<b>2%</b> (172)	<b>0%</b> (0)	<b>4.5%</b> (2)
Residential care	<b>16.9%</b> (1701)	<b>17.7%</b> (1551)	<b>6.4%</b> (3)	<b>4.5%</b> (2)
Nursing home	<b>19.7%</b> (1981)	<b>28.7%</b> (2511)	<b>27.7%</b> (13)	<b>36.4%</b> (16)
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>81.8%</b> (36)
Own/ carer's home to nursing/ residential care	<b>11.1%</b> (972)	<b>11.4%</b> (5)

\*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> 42/42	89.7% 35/39	
	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>89.1%</b> 41/46	92.3% 36/39	
	15a	(If Q15=Yes) The assessment of nutritional status includes recording of BMI (Body Mass Index) or weight:				
			Yes, there is a recording of the patient's BMI or weight	<b>85.9%</b> 7580/8822 (89%, 79-96%)	<b>92.7%</b> 38/41	75% 27/36
		Other action taken	<b>4%</b> 352/8822 (2%, 0-5%)	<b>0%</b> 0/41	New answer options for Round 3	
	Yes or other action taken	<b>89.9%</b> 7932/2288 (93%, 85-98%)	<b>92.7%</b> 38/41			
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>87.2%</b> 41/47	97.5% 39/40	
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>79.5%</b> 35/44	92.1% 35/38	
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>21.3%</b> 10/47	80.6% 29/36	

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>68.9%</b> 31/45	77.8% 28/36
		Yes, an occupational therapy and/or a physiotherapy assessment has taken place	<b>42.8%</b> 3977/9294 (44%, 26-58%)	<b>28.9%</b> 13/45	New answer options for Round 3
		Yes, other	<b>1.7%</b> 161/9294 (0%, 0-2%)	<b>0%</b> 0/45	
		Yes (all options)	<b>89.8%</b> 8350/9294 (92%, 85-96%)	<b>97.8%</b> 44/45	

### 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>86%</b> 37/43	83.3% 30/36
1.4 [2]	21	Has an assessment been carried out for recent changes or fluctuation in behaviour that may indicate the presence of delirium?			
		Yes, and there were indications that delirium may be present	<b>25.9%</b> 2603/10047 (24%, 14-36%)	<b>21.3%</b> 10/47	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>23.4%</b> 11/47	7.5% 3/40
		Yes (both options)	<b>44.5%</b> 4466/10047 (42%, 27-60%)	<b>44.7%</b> 21/47	15% 6/40
1.5 [2]	21a	(If Q21=Yes) Has the patient been clinically assessed for delirium by a healthcare professional? (y/n)	<b>85.3%</b> 2220/2603 (90%, 78-100%)	<b>100%</b> 10/10	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>55.3%</b> 26/47	77.5% 31/40
	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>19.2%</b> 5/26	25.8% 8/31
		Unknown*	<b>33.1%</b> 1865/5626 (14%, 0-44%)	<b>76.9%</b> 20/26	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>19.2%</b> 5/26	New question for Round 3
		Unknown*	<b>34.1%</b> 1916/5616 (16%, 3-48%)	<b>76.9%</b> 20/26	
	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>23.1%</b> 6/26	32.3% 10/31
		Unknown*	<b>29.9%</b> 1685/5631 (13%, 0-37%)	<b>73.1%</b> 19/26	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>19.2%</b> 5/26	12.9% 4/31
		Unknown*	<b>37.8%</b> 2110/5583 (20%, 5-50%)	<b>76.9%</b> 20/26	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>19.2%</b> 5/26	10% 3/30
		Unknown*	<b>39.1%</b> 2167/5539 (20%, 7-52%)	<b>76.9%</b> 20/26	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>23.1%</b> 6/26	50% 15/30
		Unknown*	<b>35.3%</b> 1977/5598 (17%, 3-46%)	<b>73.1%</b> 19/26	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>31.6%</b> 12/38	50% 15/30
	23a	<i>(If 23=No)</i> Please comment:			
		Patient too unwell/ not responsive	<b>3.3%</b> 189/5690	<b>0%</b> 0/26	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> 0/26	
		Not routine/ not standard practice	<b>5.8%</b> 331/5690	<b>0%</b> 0/26	
		Not documented/ unknown reason	<b>78.1%</b> 4444/5690	<b>96.2%</b> 25/26	
	Dementia diagnosis (i.e. dementia diagnosis mentioned as a reason for not completing assessment)	<b>10.8%</b> 616/5690	<b>3.8%</b> 1/26		
	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>63.2%</b> 24/38	83.3% 25/30
	25	Have there been any symptoms of delirium? (y/n)	<b>32.3%</b> 2367/7329 (33%, 22-41%)	<b>18.4%</b> 7/38	23.3% 7/30
	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>28.6%</b> 2/7	28.6% 2/7
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>7.9%</b> 3/38	13.3% 4/30	
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>100%</b> 3/3	25% 1/4	

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>80%</b> 8/10	New question for Round 3
	27a (i)	<i>(If Q27=Yes):</i> There are documented concerns about the patient's capacity to consent to the referral:	<b>70.4%</b> 1161/1649 (75%, 50-89%)	<b>75%</b> 6/8	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> 0/6	
		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>100%</b> 6/6	
		There is no record of either consent or best interest decision making*	<b>18.3%</b> 212/1161 (14%, 0-33%)	<b>0%</b> 0/6	
	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>25%</b> 2/8	
	27a (iii)	The patients consent was requested and this is recorded	<b>29.1%</b> 142/488 (25%, 0-50%)	<b>50%</b> 1/2	
		There is no record of the patients consent*	<b>70.9%</b> 346/488 (75%, 50-100%)	<b>50%</b> 1/2	
	27a (ii & iii)	Consent or best interests (responses options combined)	<b>66.2%</b> 1091/1649 (67%, 50-86%)	<b>87.5%</b> 7/8	
		No consent or best interests (response options combined)	<b>33.8%</b> 558/1649 (33%, 14-50%)	<b>12.5%</b> 1/8	

\*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>21.1%</b> 8/38	80% 24/30
5.4 [1]	29a	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with the person with dementia? (y/n/na)	<b>53.9%</b> 3327/6169 (55%, 38-72%)	<b>50%</b> 16/32	75% 18/24
	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>88.6%</b> 31/35	86.2% 25/29
	29c	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with the consultant responsible for the patient's care? (y/n)	<b>75.1%</b> 5501/7329 (81%, 63-91%)	<b>89.5%</b> 34/38	83.3% 25/30
	29d	Is there evidence in the notes that the discharge coordinator/ person or team planning discharge has discussed place of discharge and support needs with other members of the multidisciplinary team? (y/n)	<b>81.5%</b> 5971/7329 (85%, 76-93%)	<b>78.9%</b> 30/38	86.7% 26/30
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>94.7%</b> 36/38	93.3% 28/30
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>27%</b> 10/37	43.3% 13/30
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> 32/32	96.7% 29/30
N5b [2]	33	Was a copy of the discharge plan/ summary sent to the GP/ primary care team on the day of discharge? (y/n/na)	<b>93.6%</b> 6701/7156 (98%, 93-100%)	<b>100%</b> 38/38	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>45.2%</b> 14/31	37% 10/27
	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>71.4%</b> 5/7	66.7% 2/3
		Patient awaiting assessment	<b>9.1%</b> 190/2088	<b>0%</b> 0/7	0% 0/3
		Patient awaiting history/ results	<b>6.1%</b> 127/2088	<b>0%</b> 0/7	0% 0/3
		Patient awaiting surgery	<b>9.6%</b> 200/2088	<b>0%</b> 0/7	0% 0/3
		Patient presenting confusion	<b>5.7%</b> 120/2088	<b>0%</b> 0/7	33.3% 1/3
		Patient on end of life plan	<b>0%</b> 1/2088	<b>0%</b> 0/7	-
		Patient being transferred to another hospital	<b>0.1%</b> 2/2088	<b>0%</b> 0/7	0% 0/3
		Patient unresponsive	<b>0.3%</b> 6/2088	<b>0%</b> 0/7	0% 0/3
		Patient being discharged to nursing/ residential care	<b>6.5%</b> 136/2088	<b>28.6%</b> 2/7	0% 0/3
		Not recorded	-	-	0% 0/3
Other	<b>0%</b> 0/2088	<b>0%</b> 0/7	0% 0/3		

## 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>0%</b> 0/38	6.7% 2/30
		24 hours	<b>12.2%</b> 897/7329	<b>2.6%</b> 1/38	3.3% 1/30
		25 - 48 hours	<b>14.7%</b> 1075/7329	<b>7.9%</b> 3/38	13.3% 4/30
		More than 48 hours	<b>27.1%</b> 1985/7329	<b>63.2%</b> 24/38	33.3% 10/30
		No notice at all	<b>0.5%</b> 35/7329	<b>0%</b> 0/38	3.3% 1/30
		Not documented	<b>24.2%</b> 1770/7329	<b>23.7%</b> 9/38	40% 12/30
		No carer, family, friend/ could not contact	<b>1.8%</b> 132/7329	<b>2.6%</b> 1/38	0% 0/30
		Patient specified information withheld	<b>0%</b> 3/7329	<b>0%</b> 0/38	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>57.7%</b> 15/26	30% 6/20

## Appendix D: Carer demographics

Age range	National audit Round 3: % (N)	Your hospital Round 3: % (N)
18 – 24 years	1% (48)	1.5% (1)
25 – 34 years	2.9% (133)	4.5% (3)
35 – 44 years	5.6% (259)	10.4% (7)
45 – 54 years	16.2% (749)	22.4% (15)
55 – 64 years	25.8% (1193)	29.9% (20)
65 – 74 years	20.8% (960)	17.9% (12)
75 – 84 years	19.1% (885)	10.4% (7)
85 years or over	7.4% (343)	1.5% (1)
Prefer not to say	1.2% (56)	1.5% (1)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	30.6% (1413)	34.3% (23)
Female	68.1% (3150)	64.2% (43)
Other	0.1% (4)	0% (0)
Prefer not to say	1.2% (57)	1.5% (1)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	88.4% (4079)	72.7% (48)
Black/ Black British	3% (140)	7.6% (5)
Asian/ Asian British	3.3% (152)	6.1% (4)
Mixed	1% (44)	0% (0)
Chinese	0.2% (9)	0% (0)
Other	1.4% (64)	1.5% (1)
Prefer not to say	2.7% (124)	12.1% (8)

Relationship to patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Spouse or partner	33.5% (1558)	30.9% (21)
Family member	55.9% (2597)	47.1% (32)
Friend	4.4% (203)	8.8% (6)
Professional carer (health or social care)	5.4% (249)	11.8% (8)
Other	0.9% (41)	1.5% (1)

One of main carers for patient	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Yes	77.8% (3356)	55% (33)

## 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>37.3%</b> 25/67
		<b>43.3%</b> 1980/4578	<b>55.2%</b> 37/67
		<b>10.2%</b> 468/4578	<b>7.5%</b> 5/67
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>37.7%</b> 23/61
		<b>36.4%</b> 1672/4592	<b>45.9%</b> 28/61
		<b>9.4%</b> 431/4592	<b>16.4%</b> 10/61
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>38.2%</b> 21/55
		<b>34.2%</b> 1515/4433	<b>40%</b> 22/55
		<b>10.4%</b> 462/4433	<b>21.8%</b> 12/55
7.4 [2]	4	Was the person you look after treated with respect by hospital staff?	
		<b>76%</b> 3471/4569	<b>54.2%</b> 32/59
		<b>20.8%</b> 952/4569	<b>40.7%</b> 24/59
		<b>3.2%</b> 146/4569	<b>5.1%</b> 3/59

## 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>27.9%</b> 17/61
		Yes, to some extent	<b>40.4%</b> 1843/4566	<b>45.9%</b> 28/61
		No	<b>17.8%</b> 815/4566	<b>26.2%</b> 16/61
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>31.7%</b> 19/60
		Yes, to some extent	<b>36.4%</b> 1637/4497	<b>46.7%</b> 28/60
		No	<b>16.1%</b> 722/4497	<b>21.7%</b> 13/60
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>37.5%</b> 24/64
		Yes, to some extent	<b>34.5%</b> 1563/4524	<b>31.3%</b> 20/64
		No	<b>20.1%</b> 908/4524	<b>31.3%</b> 20/64



## 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>8.8%</b> 6/68
		<b>33.9%</b> 1575/4645	<b>35.3%</b> 24/68
		<b>17%</b> 790/4645	<b>44.1%</b> 30/68
		<b>9.6%</b> 446/4645	<b>4.4%</b> 3/68
		<b>5%</b> 232/4645	<b>7.4%</b> 5/68
	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>18.3%</b> 11/60
		<b>34.1%</b> 1551/4544	<b>36.7%</b> 22/60
		<b>14.3%</b> 648/4544	<b>31.7%</b> 19/60
		<b>4.8%</b> 220/4544	<b>3.3%</b> 2/60
		<b>4.2%</b> 192/4544	<b>10%</b> 6/60

## 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>48.1%</b> 26/54
		<b>34%</b> 1487/4379	<b>33.3%</b> 18/54
		<b>9.9%</b> 434/4379	<b>7.4%</b> 4/54
		<b>5.8%</b> 254/4379	<b>11.1%</b> 6/54

## 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>23%</b> (17)
26 - 50%	<b>25.6%</b> (3651)	<b>25.7%</b> (19)
51 - 75%	<b>24.4%</b> (3489)	<b>24.3%</b> (18)
More than 75%	<b>18.1%</b> (2588)	<b>27%</b> (20)

Gender	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Male	<b>15.7%</b> (2260)	<b>17.3%</b> (13)
Female	<b>83.2%</b> (11954)	<b>81.3%</b> (61)
Other	<b>0.2%</b> (34)	<b>0%</b> (0)
Prefer not to say	<b>0.8%</b> (113)	<b>1.3%</b> (1)

Ethnicity	National audit Round 3: % (N)	Your hospital Round 3: % (N)
White/ White British	<b>79.9%</b> (11467)	<b>49.3%</b> (37)
Black/ Black British	<b>4.1%</b> (594)	<b>26.7%</b> (20)
Asian/ Asian British	<b>8%</b> (1150)	<b>12%</b> (9)
Mixed	<b>1.3%</b> (183)	<b>4%</b> (3)
Chinese	<b>0.5%</b> (73)	<b>0%</b> (0)
Other	<b>4.5%</b> (646)	<b>5.3%</b> (4)
Prefer not to say	<b>1.7%</b> (241)	<b>2.7%</b> (2)

Job role	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Registered nurse (Band 5 or 6)	<b>29.9%</b> (4300)	<b>26.7%</b> (20)
Registered nurse (Band 7 or above)	<b>12.7%</b> (1831)	<b>24%</b> (18)
Healthcare assistant	<b>23.1%</b> (3324)	<b>5.3%</b> (4)
Doctor	<b>11.5%</b> (1645)	<b>10.7%</b> (8)
Allied healthcare professional	<b>11.9%</b> (1713)	<b>17.3%</b> (13)
Therapy assistant/ allied healthcare professional assistant	<b>2.6%</b> (367)	<b>2.7%</b> (2)
Student	<b>2.3%</b> (332)	<b>2.7%</b> (2)
Ward based administrators	<b>4%</b> (571)	<b>8%</b> (6)
Other/ unknown	<b>1.9%</b> (279)	<b>2.7%</b> (2)

Hours worked per week	National audit Round 3: % (N)	Your hospital Round 3: % (N)
Up to 29 hours	<b>13%</b> (1866)	<b>5.3%</b> (4)
30 hours or more	<b>87%</b> (12458)	<b>94.7%</b> (71)

<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%</b> (1148)	<b>4%</b> (3)
6 - 11 months	<b>9.5%</b> (1364)	<b>12%</b> (9)
1 - 2 years	<b>15.6%</b> (2242)	<b>22.7%</b> (17)
3 - 5 years	<b>16.4%</b> (2350)	<b>21.3%</b> (16)
6 - 10 years	<b>15.9%</b> (2283)	<b>9.3%</b> (7)
11 - 15 years	<b>12.1%</b> (1739)	<b>12%</b> (9)
More than 15 years	<b>22.4%</b> (3205)	<b>18.7%</b> (14)

## 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>34.7%</b> 25/72	<b>63.9%</b> 46/72	
		Yes, most of the time	<b>32.9%</b> 4614/14024		<b>29.2%</b> 21/72		
		Yes, sometimes	<b>26.8%</b> 3760/14024	-	<b>25%</b> 18/72	-	
		No	<b>11.6%</b> 1624/14024	-	<b>11.1%</b> 8/72	-	
		1b	Out of office hours				
			Yes, always	<b>7.8%</b> 874/11207	<b>23.5%</b> 2637/11207	<b>9.8%</b> 5/51	<b>17.6%</b> 9/51
			Yes, most of the time	<b>15.7%</b> 1763/11207		<b>7.8%</b> 4/51	
	Yes, sometimes		<b>27.9%</b> 3129/11207	-	<b>23.5%</b> 12/51	-	
	No	<b>48.6%</b> 5441/11207	-	<b>58.8%</b> 30/51	-		

## 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>19.7%</b> 14/71
		<b>53.2%</b> 7030/13205	<b>60.6%</b> 43/71
		<b>5.4%</b> 713/13205	<b>5.6%</b> 4/71
		<b>7.7%</b> 1018/13205	<b>7%</b> 5/71
		<b>7.3%</b> 961/13205	<b>9.9%</b> 7/71
		<b>17.3%</b> 2278/13205	<b>25.4%</b> 18/71
	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>50%</b> 26/52
		<b>50.5%</b> 5390/10670	<b>44.2%</b> 23/52
	<b>7.3%</b> 778/10670	<b>5.8%</b> 3/52	

## Information and communication

Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	Your hospital Round 3: % Num/Den	Your hospital Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	
9.3 [1]	3	In your current role, do you think that personal information is available to you to help you care for/ support people with dementia? <i>E.g. their likes/ dislikes, preferred name, past job.</i>				
		Yes, always	<b>21.4%</b> 3072/14345	<b>59.9%</b> 8597/14345	<b>18.9%</b> 14/74	<b>48.6%</b> 36/74
		Yes, most of the time	<b>38.5%</b> 5525/14345		<b>29.7%</b> 22/74	
		Yes, sometimes	<b>33%</b> 4734/14345	-	<b>41.9%</b> 31/74	-
		No	<b>7.1%</b> 1014/14345	-	<b>9.5%</b> 7/74	-
	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>25.8%</b> 17/66	<b>69.7%</b> 46/66
		Yes, most of the time	<b>40.9%</b> 5454/13329		<b>43.9%</b> 29/66	
		Yes, sometimes	<b>30.6%</b> 4074/13329	-	<b>28.8%</b> 19/66	-
		No	<b>1.9%</b> 252/13329	-	<b>1.5%</b> 1/66	-
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>29.7%</b> 22/74	<b>67.6%</b> 50/74
		Yes, most of the time	<b>33.2%</b> 4759/14333		<b>37.8%</b> 28/74	
		Yes, sometimes	<b>27.3%</b> 3913/14333	-	<b>25.7%</b> 19/74	-
	No	<b>10.6%</b> 1516/14333	-	<b>6.8%</b> 5/74	-	

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>64.4%</b> 38/59
		Occasionally	<b>37.2%</b> 4636/12457	<b>27.1%</b> 16/59
		Almost Never	<b>9.7%</b> 1210/12457	<b>8.5%</b> 5/59
		Never	<b>3.3%</b> 408/12457	<b>0%</b> 0/59

## 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>36.4%</b> 20/55	<b>70.9%</b> 39/55
		Yes, most of the time	<b>27.3%</b> 3271/11978		<b>34.5%</b> 19/55	
		Yes, sometimes	<b>16.1%</b> 1927/11978	-	<b>20%</b> 11/55	-
		No	<b>5.4%</b> 649/11978	-	<b>9.1%</b> 5/55	-
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>19.3%</b> 11/57	<b>68.4%</b> 39/57
		Yes, most of the time	<b>50.1%</b> 6149/12263		<b>49.1%</b> 28/57	
		Yes, sometimes	<b>19.2%</b> 2357/12263	-	<b>29.8%</b> 17/57	-
		No	<b>4.7%</b> 576/12263	-	<b>1.8%</b> 1/57	-

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>32.5%</b> 13/40	<b>80%</b> 32/40
		Yes, most of the time	<b>47.6%</b> 4352/9148		<b>47.5%</b> 19/40	
		Yes, sometimes	<b>18.7%</b> 1708/9148	-	<b>20%</b> 8/40	-
		No	<b>3.3%</b> 303/9148	-	<b>0%</b> 0/40	-
	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>12.5%</b> 5/40	<b>37.5%</b> 15/40
		Yes, most of the time	<b>27.5%</b> 2516/9143		<b>25%</b> 10/40	
		Yes, sometimes	<b>42.5%</b> 3887/9143	-	<b>47.5%</b> 19/40	-
		No	<b>19.3%</b> 1763/9143	-	<b>15%</b> 6/40	-
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>10.8%</b> 4/37	<b>27%</b> 10/37
		Yes, most of the time	<b>32.5%</b> 2942/9047		<b>16.2%</b> 6/37	
		Yes, sometimes	<b>27.7%</b> 2506/9047	-	<b>48.6%</b> 18/37	-
	No	<b>23.5%</b> 2125/9047	-	<b>24.3%</b> 9/37	-	



Std no. [Type]	Question number and text	National audit Round 3: % Num/Den	National audit Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	Your hospital Round 3: % Num/Den	Your hospital Round 3: % <i>(Yes, always and Yes, most of the time responses combined)</i>	
3.7 [1]	12	In the last week (except in emergency situations), were patient mealtimes kept free of any clinical activity on the ward(s) you work on?				
		Yes, always	<b>28.3%</b> 2488/8788	<b>67.6%</b> 5944/8788	<b>35.1%</b> 13/37	<b>73%</b> 27/37
		Yes, most of the time	<b>39.3%</b> 3456/8788		<b>37.8%</b> 14/37	
		Yes, sometimes	<b>16.8%</b> 1476/8788	-	<b>18.9%</b> 7/37	-
		No	<b>15.6%</b> 1368/8788	-	<b>8.1%</b> 3/37	-
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>21.1%</b> 8/38	<b>42.1%</b> 16/38
		Yes, most of the time	<b>27.2%</b> 2398/8822		<b>21.1%</b> 8/38	
		Yes, sometimes	<b>22.5%</b> 1983/8822	-	<b>34.2%</b> 13/38	-
		No	<b>12.3%</b> 1085/8822	-	<b>23.7%</b> 9/38	-
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>34.1%</b> 14/41	<b>63.4%</b> 26/41
		Yes, most of the time	<b>28.7%</b> 2615/9119		<b>29.3%</b> 12/41	
		Yes, sometimes	<b>20.7%</b> 1886/9119	-	<b>24.4%</b> 10/41	-
		No	<b>6.1%</b> 558/9119	-	<b>12.2%</b> 5/41	-
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>36.6%</b> 15/41	<b>82.9%</b> 34/41
		Yes, most of the time	<b>33.4%</b> 3039/9090		<b>46.3%</b> 19/41	
		Yes, sometimes	<b>15.5%</b> 1408/9090	-	<b>17.1%</b> 7/41	-
		No	<b>4.9%</b> 444/9090	-	<b>0%</b> 0/41	-

## 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 University Hospital Lewisham are provided.

### Registered Nurses (Band 5 or 6)

Activities coordinator.
Encourage all staff to smile at patients and visitors and greet them in a friendly manner.
I think that provision of adequate staff would be of great help. Looking after dementia patients is not easy, especially if they are very confused. If there is not enough staff to look after them, then it poses a great risk to their safety.
Increase the number of staff.
More training in the ward for nurses and healthcare assistants.
More volunteers are needed at mealtimes, trained to feed and assist patients with feeding problems. Special help is not always provided for with patients needing one to one care 24/7. Staff are often moved to other wards to relieve their staffing problems, without realising it leaves the original ward more vulnerable with their patients. Staffing is always an issue.
Not at the moment on my ward as we are acute medical admission ward, but on the elderly ward, bright colours with bigger signs could be handy. More visual equipment or objects around the ward to help with memory.
People with dementia should have games, activities to keep their mind away from things that can make them aggressive. e.g. something like [illegible] colours full on their table to play with or watching some activities on the television. Games both in front of them or on television. Painting image on notebook. Interacting with them and let them express themselves. Offer them sound (music), if possible.
Scheduled lectures on dementia.
Train the staff that are involved in their care to enable them to be able to cope with the challenges they face.
Unable to support patients completely as some require one to one care. Each nurse has a minimum of six patients, regardless of patients' needs.

### Registered Nurses (Band 7 or above)

Activities for patients. Activity coordinator post.
Better organised dementia lead. More resources on ward.
Facilities such as iPads for games etc. Ice cream in hot weather, plus fans as patients find it very uncomfortable.
I feel that the support services i.e. catering could do with improving around catering for the needs of this client group better.
Mandatory yearly training would be good.
More activities. Better person centred care.
Social room - with a TV. Activities for individuals or in a group. Animal therapy. Volunteers to sit and talk to patients. Patients to wear their own clothes - promote individuality.

## Registered Nurses (Band 7 or above)

To have an activities coordinator to run activities in groups and individual patient specific activities to assist with agitation and violence in the ward.

Totally committing to person centred care and giving the nurses time and support.

We had an activities coordinator for one year and it was felt to be a great loss when the post ended.

What I would like is an activity coordinator to start to do things with dementia patient [in order to distract them]. Open visiting to all family members and friends. More staff - at list one in each bay to monitor them closely.

Would it be helpful to start a conversation in the hospital about how we make decisions about end of life care, what is appropriate and what may not be appropriate?

## Healthcare Assistants

At present I am a bank staff working full time hours every day. I think this should be taken in consideration to support and improve training. In my opinion, bank staff should be given an equal amount of training to permanent staff. We are [here] to do the same job as permanent [staff].

I am a bank only staff working full time hours every day. I think this should be taken into consideration to support and improve our training in dementia care. Bank staff should have equal training as permanent staff, for we are expected to do the same job and we are doing the same job. We only get basic mandatory training.

There should be a symbol for dementia patients at their bedside so healthcare assistants could know how to relate with them.

To provide enough staff and to provide staff support for patients who need one to one care.

## Doctors

Improved uptake of learning events - especially those not usually involved in directly caring for these patients e.g. domestics/ food teams/ security.

Many times, patients from other boroughs are brought in by the ambulance service. The social services cannot arrange needs in other borough. Also, if carers are readily available to discuss the needs.

More staff to specifically look after patients with dementia, providing gentle care and assistance and some element of consistency.

Offer training to healthcare assistants and nurses to deal with complex behaviours.

Raising awareness of specific care methods and having champions to promote them.

## Allied Healthcare Professionals

Activity coordinator.

By not moving patients onto different wards - usually patients with dementia are waiting a long time in hospital for placement and get moved to different wards to wait - this is disruptive for patients and sometimes distressing. Patients could be encouraged to eat lunch together to resemble a 'normal' lunch/ dinner time. More groups, such as reminiscence groups, should be offered - this kind of thing is the first thing to be cut following budget cuts in hospitals.

Have occupational therapy assistants who would do activities with dementia patients on the wards.

## Allied Healthcare Professionals

High quality IT systems to facilitate communication with all relevant healthcare professionals and social services. This would also improve discharge planning so that the person coordinating is aware of all relevant professionals involved in the care package. My post is mainly in the community, but also involves working in South London and Maudsley acute [trust] in Lewisham. It would be helpful if the communication was better - different IT systems don't link up and care is very fragmented. Training has also been limited regarding supporting clients with more challenging behaviour and how to apply the mental capacity act.

More help at mealtimes from staff/ volunteers would aid people with dementia to eat/ drink more of their food and hence their nutritional status could be stabilised or improved. More training of all staff with the management of behaviours associated with dementia would be helpful. A passport/ proforma detailing the patient's communication/ ability issues regarding their dementia by a specialist team would be very useful. Information from a specialist team regarding patient's attitudes to food/ fluid/ eating and drinking regarding their dementia would be helpful in providing appropriate support of their nutritional intake.

More practical assistance for all staff to care for the patients on the ward e.g. wandering patients.

Nutritional needs are difficult to meet as the catering team has set times for mealtimes and are not able to be flexible around this. Flexibility around mealtimes would be optimal for patients with dementia but honestly, I have not worked in a single hospital in London or the surrounds where this can be accommodated - the problem is with using a third party catering service (as almost all hospitals do) who have their own protocols and timeframes to work within.

Perhaps try to spend more time having stimulating interactions with patients with dementia e.g. chatting about their previous jobs, where they have travelled etc.

Recently, hospital passports for people with dementia have been made available for us. I think this is an excellent way of being able to know vital information and preferences for people with dementia/ cognitive impairments. However, there is still a long way to go in relation to all staff's understanding and attitudes towards people with dementia. Sometimes the way we approach, speak with, and provide other stimuli (tactile feedback) can completely reduce the distress of a person with dementia. Communication and patience is key and this is not something I frequently see - even down to hurrying someone to make food/ menu choices. Better education and understanding is key and I am confident that things are going in the right direction.

The multidisciplinary team should collaboratively encourage patients to engage with activities available for those with dementia. Many nursing staff are unaware of activities available - perhaps this could be made more well-known between members of multidisciplinary team.

## Students

More "this is me" passports for patients please. I've seen these used in different trusts in London but not much here.

Offer dementia training for all employees who will be involved in the care of patients with dementia.

## Therapy Assistants & Allied Healthcare Professional Assistants

More assistance needed e.g. training days.

More training. Spot checks to see how staff are talking to/ caring for dementia patients. Special wards with dementia friendly decor and well-trained staff. More interaction with patients' families.

## Ward-based Administrators

*No comments from ward-based administrators for your hospital.*

## Other / Unknown

Increased staff who are trained and specialised in understanding emotional/ mental healthcare needs of a patient with dementia and support/ understanding of this will offer increased support to the carers.



Royal College of Psychiatrists' Centre for Quality Improvement  
21 Prescott Street • London • E1 8BB

The Royal College of Psychiatrists is a registered charity  
in England and Wales (228636) and Scotland (SC038369)

© Healthcare Quality Improvement Partnership Ltd. (HQIP) 2017

[www.nationalauditofdementia.org.uk](http://www.nationalauditofdementia.org.uk)

[nad@rcpsych.ac.uk](mailto:nad@rcpsych.ac.uk)