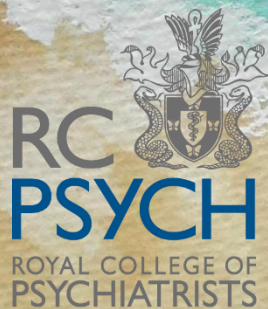


National Audit of Dementia
Care in General Hospitals Round 5
Flex Report December 2023

Maidstone Hospital

Maidstone and Tunbridge Wells NHS Trust



NAD
NATIONAL AUDIT
OF DEMENTIA

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The National Audit of Dementia (care in general hospitals) is commissioned by the Healthcare Quality Improvement Partnership (HQIP) as part of the National Clinical Audit and Patient Outcomes Programme (NCAPOP). HQIP is led by a consortium of the Academy of Medical Royal Colleges, the Royal College of Nursing, and National Voices. Its aim is to promote quality improvement in patient outcomes, and in particular, to increase the impact that clinical audit, outcome review programmes and registries have on healthcare quality in England and Wales. HQIP holds the contract to commission, manage and develop the National Clinical Audit and Patient Outcomes Programme (NCAPOP), comprising around 40 projects covering care provided to people with a wide range of medical, surgical and mental health conditions. The programme is funded by NHS England, the Welsh Government and, with some individual projects, other devolved administrations and crown dependencies.

www.hqip.org.uk/national-programmes

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Introduction

Background

The National Audit of Dementia care in general hospitals (NAD) examines aspects of care received by people with dementia in general hospitals in England and Wales. The audit is commissioned by the Healthcare Quality Improvement Partnership on behalf of NHS England/NHS Improvement and the Welsh Government, as part of the National Clinical Audit Programme.

Data collection

Hospitals participating in Round 5 of NAD collected data during the mandatory period (September 2022-January 2023), and had a choice of submitting data in the flex period (March 2023 – July 2023) . The audit was open to all general acute hospitals in England and Wales providing acute services on more than one ward which admits adults over the age of 65. In England and Wales, 187 hospitals (92% of eligible hospitals) took part in the mandatory period, and 56 hospitals opted to take part in the flex period. Round 5 used a new sampling methodology and reduced casenote dataset, and revised organisational dataset (see [National Report](#) p11).

During the flex period, participating hospitals were asked to complete:

- Prospective identification of all people with dementia or suspected dementia admitted to the hospital from 6 March – 5 April 2022.
- A casenote audit of the first 20-40 patients depending on their mandatory sample size (some hospitals extended their identification period to achieve their sample).

Results in this report

This report contains:

- Summary graphs/graphics showing key results from the flex period prospective casenote audit, including comparison with Round 5 National results and Round 5 mandatory period local data.
- Appendix tables with a full breakdown of Round 5 flex results for the casenote audit.

You will find a full presentation of your ADS data downloadable as a poster from [CaseCapture](#) data collection platform.

Please note that National R5 data throughout the report is referred to as 'TNS', for the National sample.

Data verification and analysis

Participating sites were asked to check their data at the end of the data collection period, and also received specific data cleaning queries relating to anomalous entries. The confirmed datasets were aggregated and analysed for national reporting. These results appear in the national report and in this local report.

Recommendations

[Please see National Report page 5 for Round 5 recommendations.](#)

Summary

RWF03

Mandatory Period

Mandatory Period
Patients Identified:

54

Mandatory Period
Selected Sample

54

Mandatory Period Admission Date Range:

**19/09/2022-
14/10/2022**

Mandatory Period
Casenotes within
Admission Period:

54

Mandatory Period
Casenotes outside
Admission Period:

0

Flex Period

Flex Period Patients
Identified:

28

Flex Period Patients
Selected:

28

Flex Period Admission Date Range:

**06/03/2023-
30/03/2023**

Flex Period Casenotes
within Admission
Period:

28

Flex Period Casenotes
outside Admission
Period:

0

Table 1: Key Metrics and Summary Data

| Key metrics | National R5 % | RWF03 R5 Mandatory Period % | RWF03 R5 Flex Period % |
|--|---------------|-----------------------------|------------------------|
| % Delirium screen (inc. noted on admission) | 87% | 88.9% | 64.3% |
| % Pain assessment | 92% | 100% | 100% |
| % Pain reassessment | 92% | 100% | 100% |
| % Pain tool – question only | 61% | 74.1% | 96.4% |
| % Initiation of discharge plan in first 24 hours | 45% | 35.2% | 0% |

Demographic Information

Results of less than 5 locally have been suppressed to preserve anonymity. All graph data within infographics are rounded and may not add to 100%. For full breakdown, please see your [appendices tables](#). **NB:** 10 casenote audit returns were minimum requirements for inclusion in flex period local reporting.

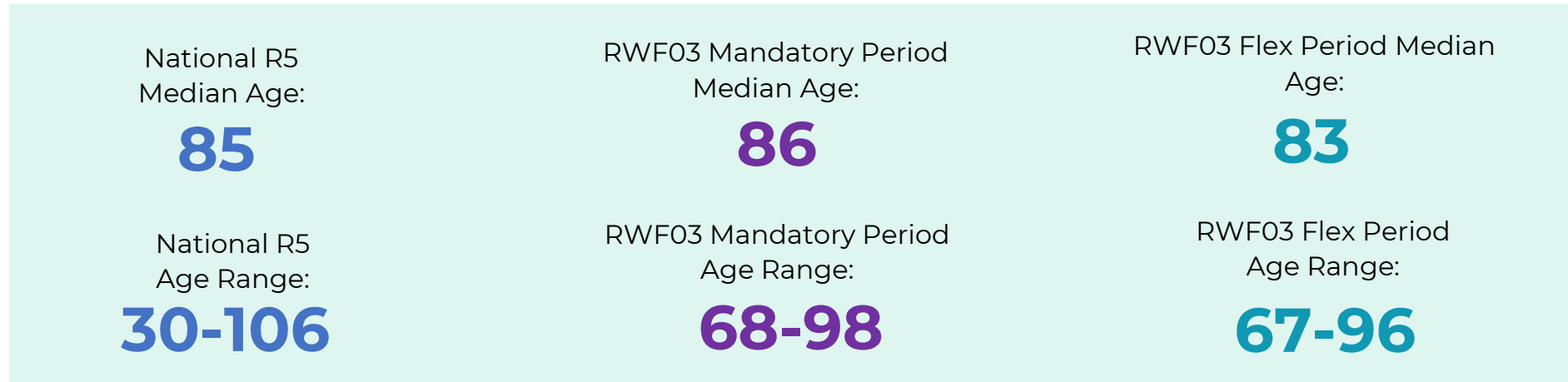


Figure 1: Gender

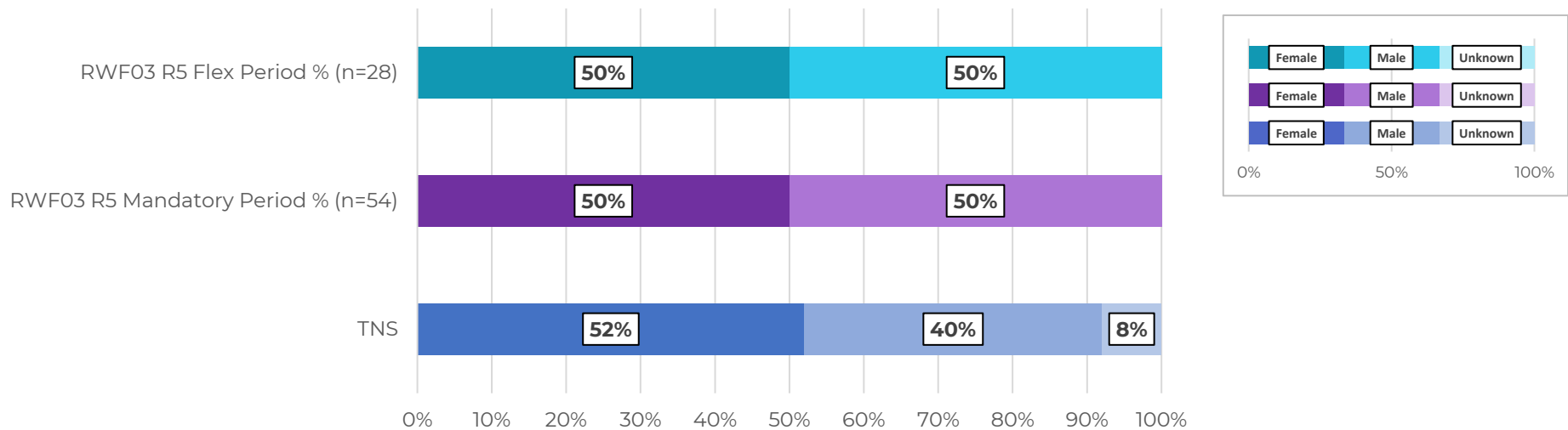


Figure 2: Ethnicity

This data has been suppressed due to identifiable information. Please see appendices tables for full data

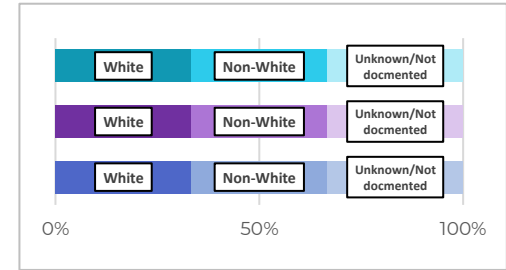
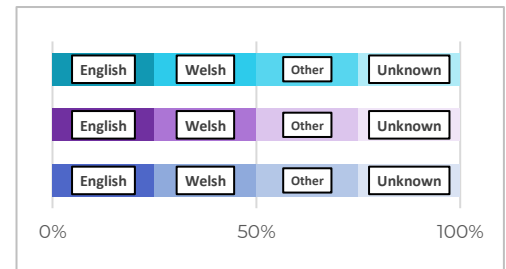


Figure 3: First Language

This data has been suppressed due to identifiable information. Please see appendices tables for full data

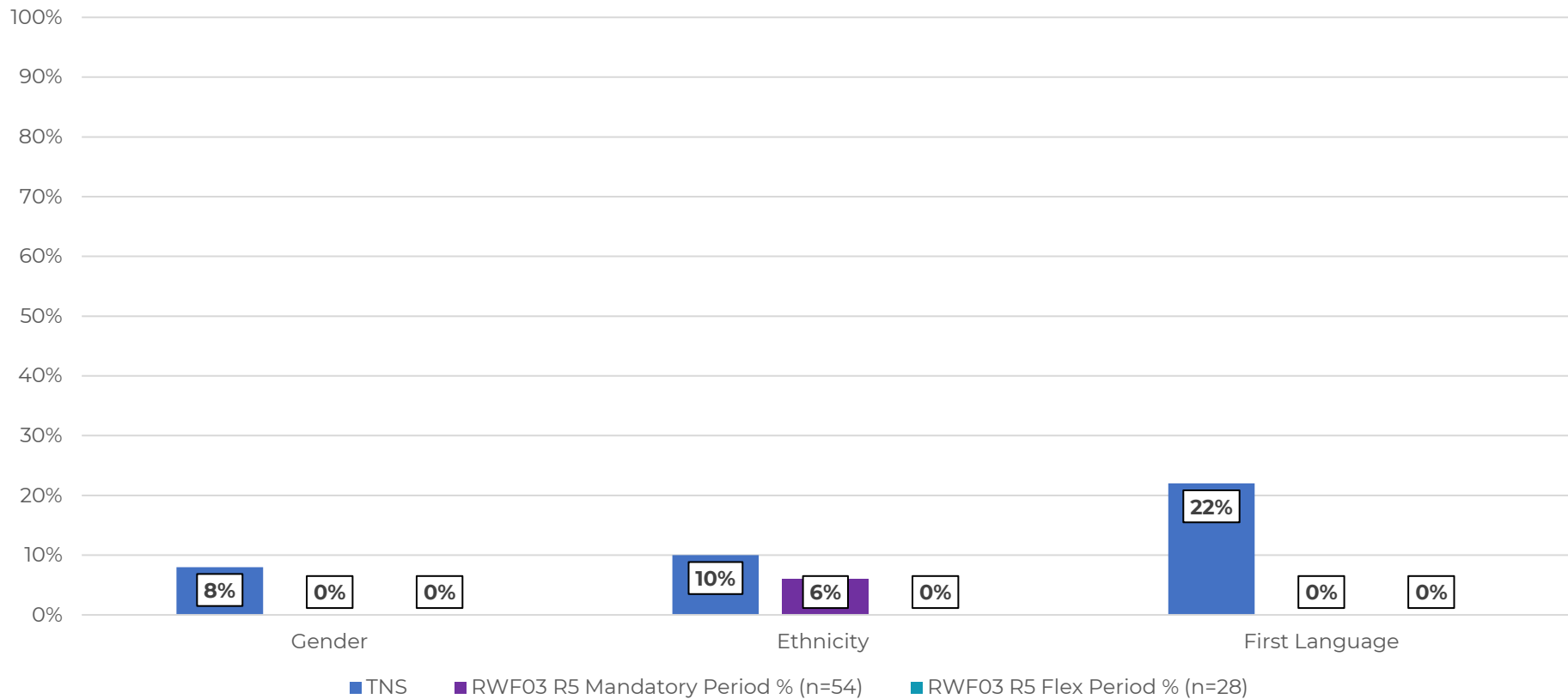


Unrecorded Demographic Information QI Point

Demographic information returned as part of the casenote audit showed a significant proportion of casenotes where 'Unknown' was returned for ethnicity, first language or gender. You can see what proportion of your sample was affected by this in the graph below.

During analysis for the National Report we looked at whether age or ethnicity had any impact on length of stay and outlying status (see [R5 Appendix](#) p49 and 53). This was simple analysis on the national dataset, and we did not discern any significant differences. Better recording of demographic data will help to support exploration of health inequality outcomes.

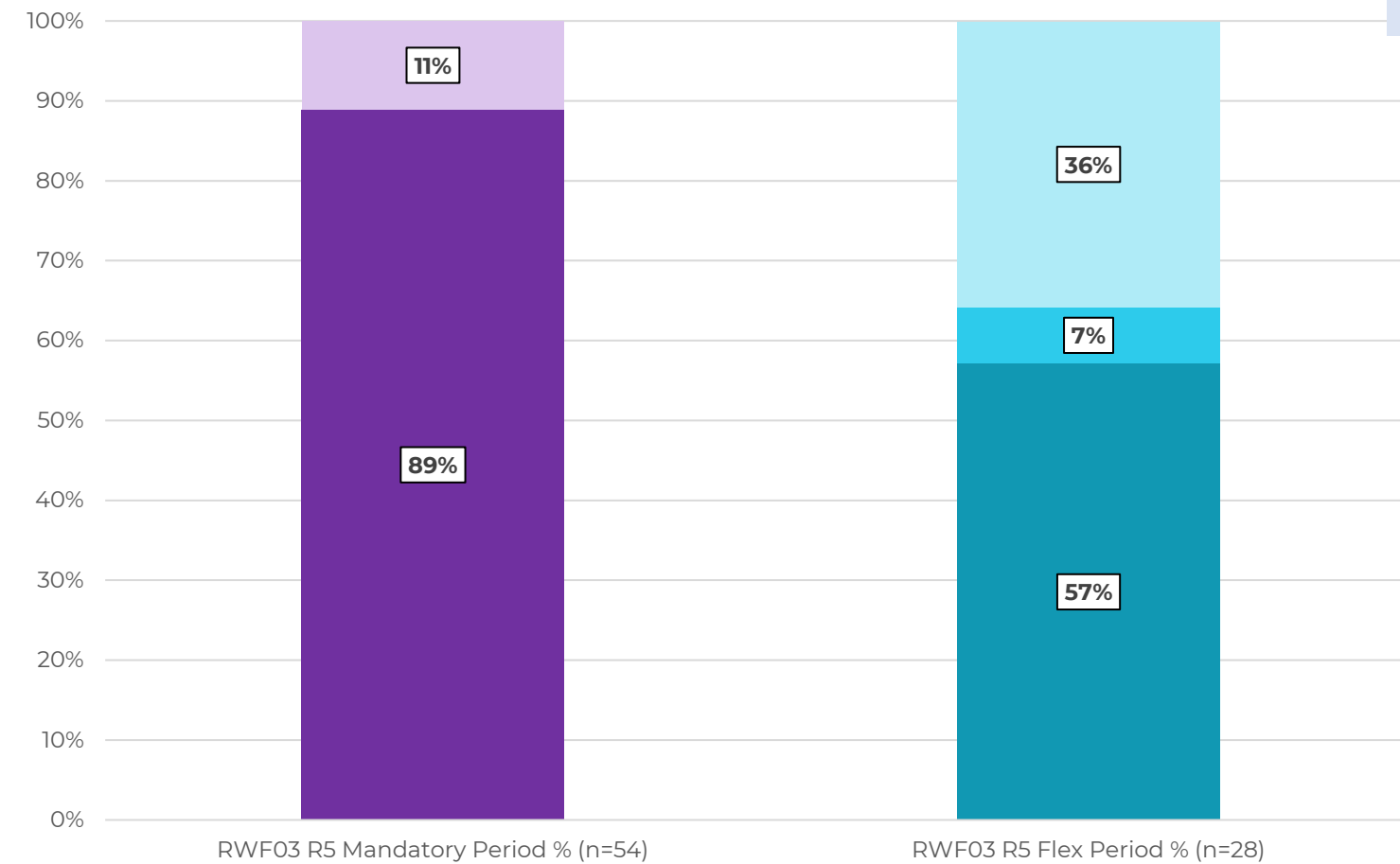
Figure 4: Proportion of Sample with 'Unknown' returned for Ethnicity, First Language, or Gender



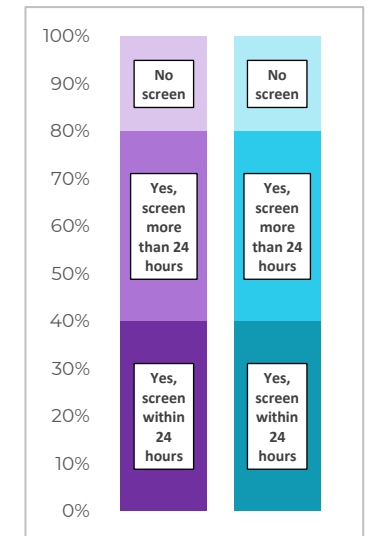
Delirium Screening and Assessment

People with dementia have a five-fold risk of developing delirium. The casenote audit asked about any screening for signs of delirium. If delirium had been noted on admission this was also taken into account. Figure 4 below shows all initial delirium screening, and Figure 5 the breakdown by screen type.

Figure 5: Initial Delirium Screening, including Delirium Noted on Admission



**National R5
Delirium Screen Within 24
Hours:
81%**



**National R5
Any Initial Delirium Screen:**

87%

Figure 6: Delirium Screen Type Breakdown

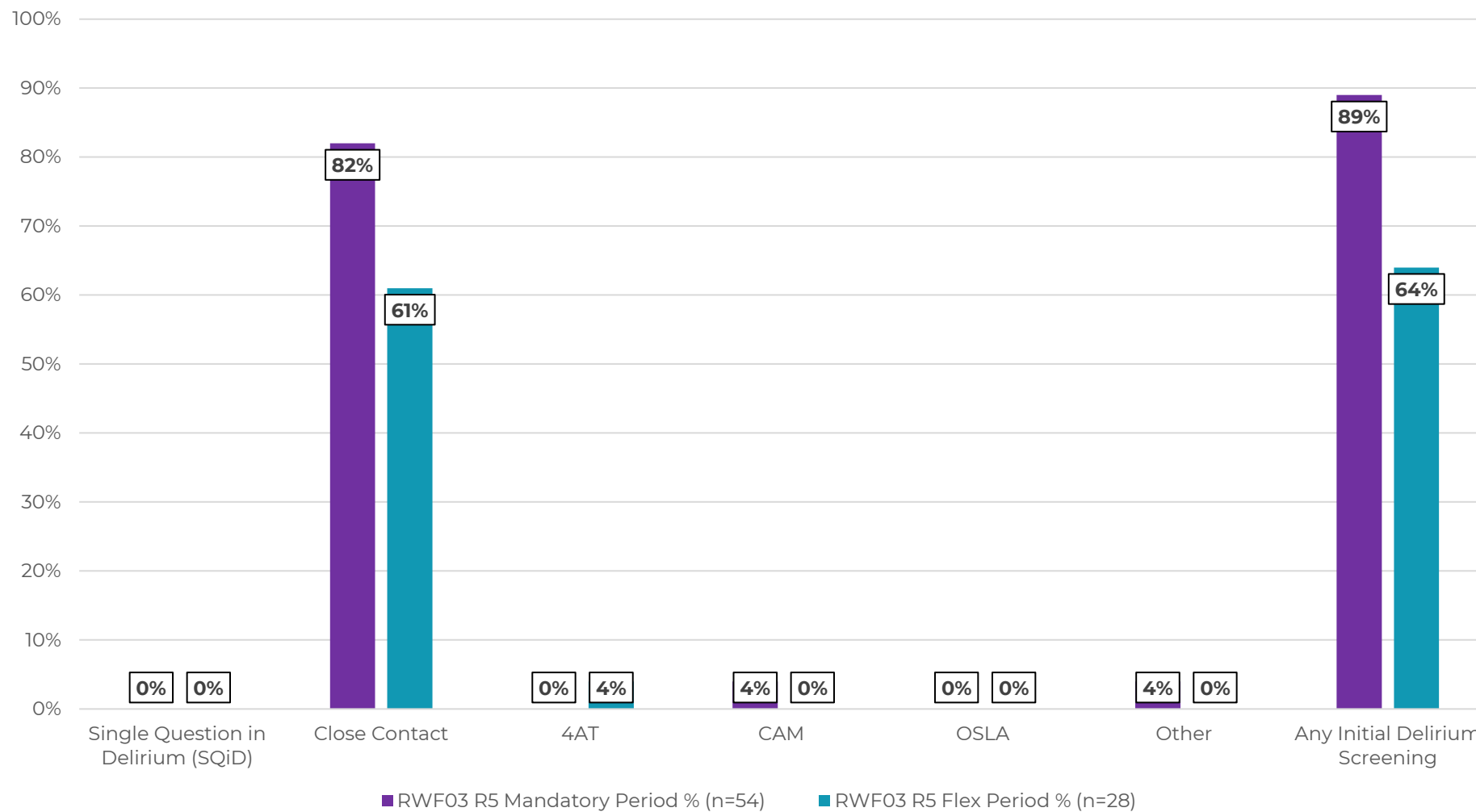


Table 2: Delirium Screening Date Range % (excluding delirium noted on admission)

| Delirium screen date range | National R5 % | RWF03 R5 Mandatory Period % | RWF03 R5 Flex Period % |
|----------------------------|---------------|-----------------------------|------------------------|
| 0-1 days | 90.9% (8201) | 100% (46) | 94.1% (16) |
| 2-3 days | 5.5% (496) | 0% (0) | 0% (0) |
| 4-6 days | 1.8% (164) | 0% (0) | 5.9% (1) |
| 7-13 days | 0.9% (80) | 0% (0) | 0% (0) |
| 14-20 days | 0.3% (30) | 0% (0) | 0% (0) |
| 21-27 days | 0.2% (17) | 0% (0) | 0% (0) |
| 28-34 days | 0.2% (17) | 0% (0) | 0% (0) |
| 35-69 days | 0.2% (14) | 0% (0) | 0% (0) |
| 70-140 days | 0% (1) | 0% (0) | 0% (0) |

Pain Assessment and Reassessment

As some symptoms of dementia may mean that people living with the condition are unable to report pain, or respond appropriately to questions about it, NICE recommends that use of a structured tool is always considered. The figures and table below show any pain assessment, including question only, then the breakdown by assessment type. Pain reassessment is shown in figures 8 and 9. The casenote audit tool allows the response “N/A for recorded reasons” and these responses have been excluded from totals.

Table 3: Any Pain Assessment

| Any Pain Assessment (excluding NA) | National R5 % | RWF03 R5 Mandatory Period % | RWF03 R5 Flex Period % |
|---|----------------------|------------------------------------|-------------------------------|
| Assessment within 24 hours | 85% | 100% | 100% |
| Assessment more than 24 hours | 7% | 0% | 0% |
| No pain assessment | 8% | 0% | 0% |

Figure 7: Pain Assessment Tool Breakdown

**National R5
Any Pain Assessment:
92%**

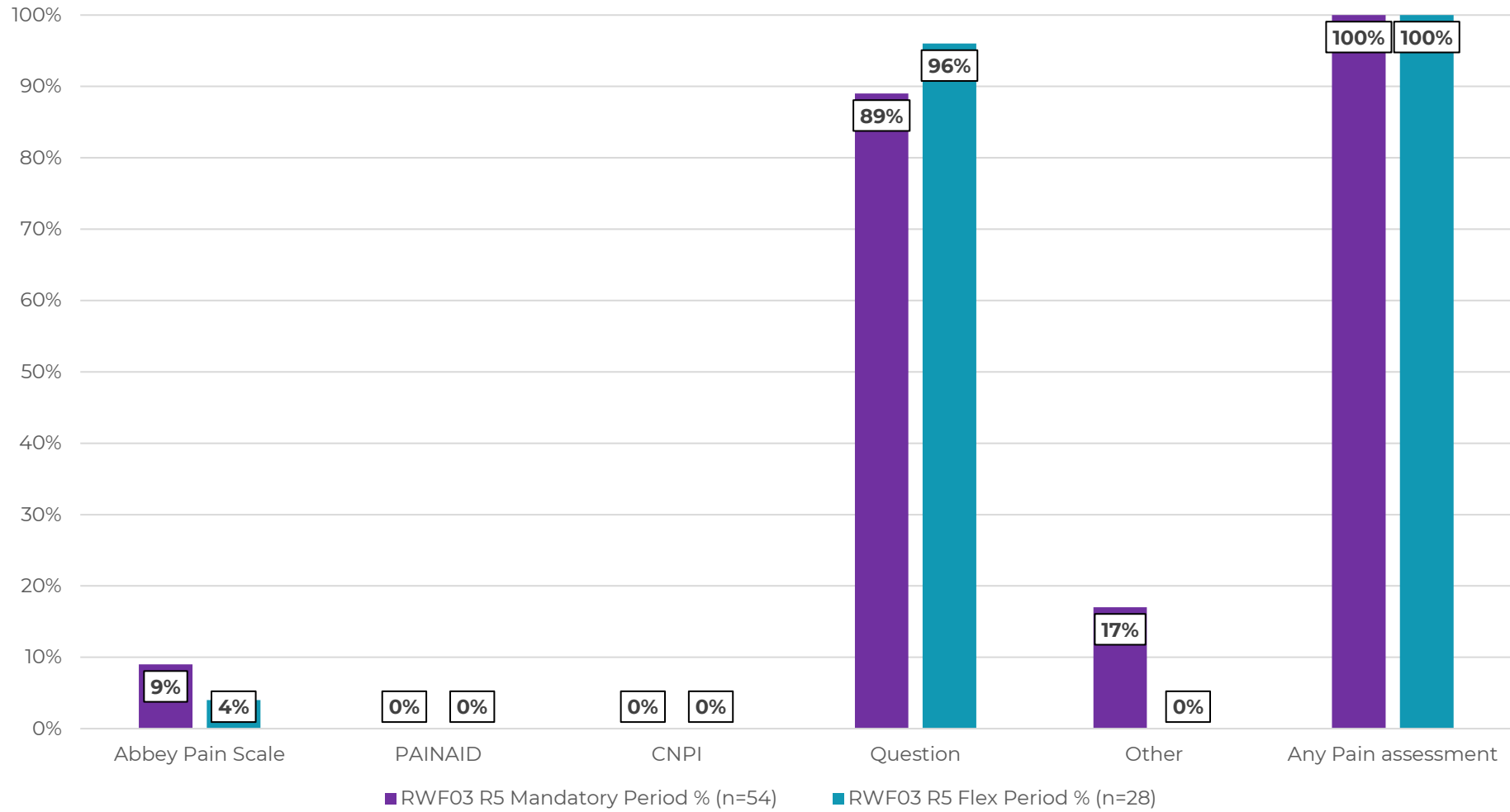
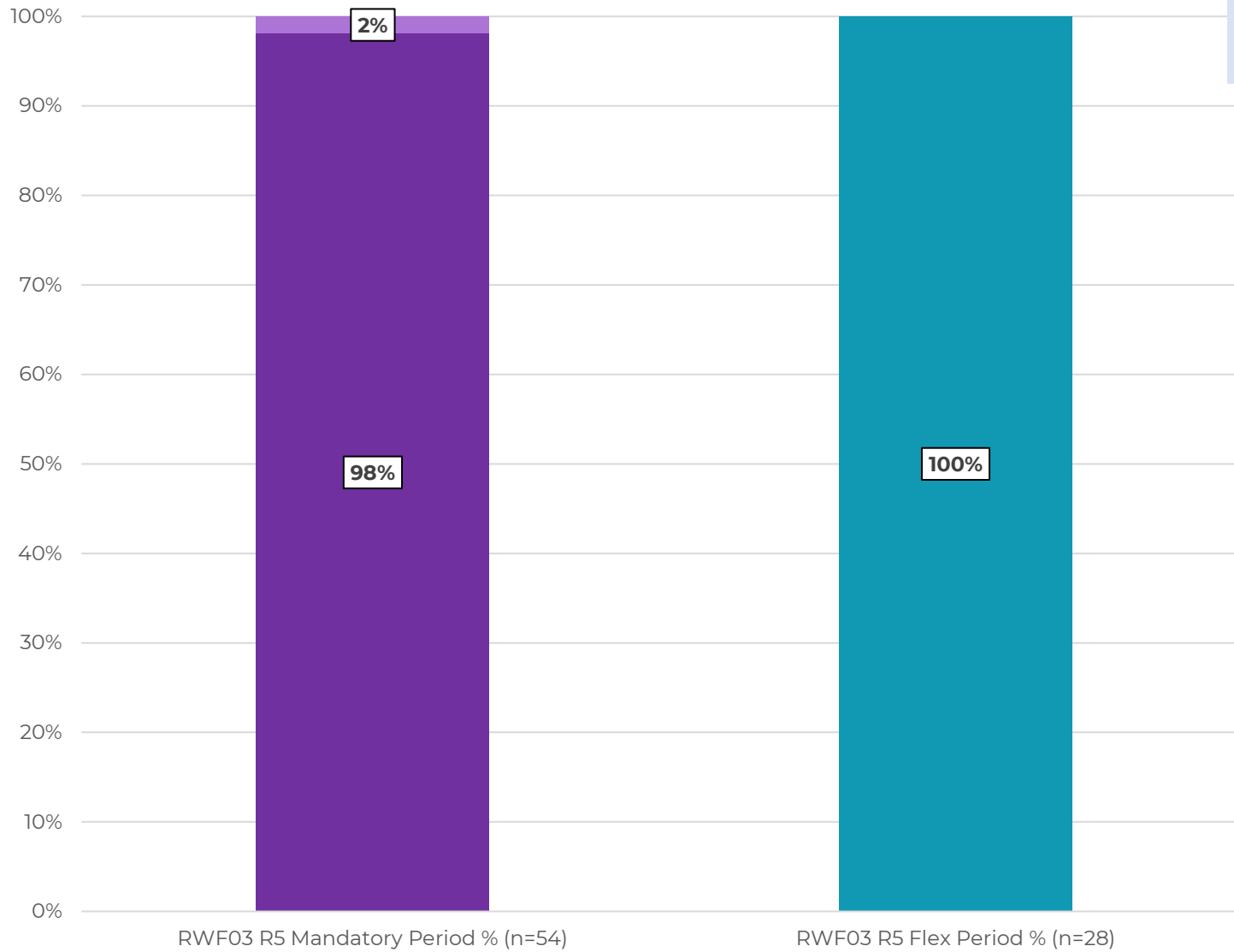


Table 4: Pain Assessment Date Range

| Pain Assessment Date Range | National R5 % (N) | RWF03 R5 Mandatory Period % | RWF03 R5 Flex Period % |
|----------------------------|-------------------|-----------------------------|------------------------|
| 0-1 days | 94.2% (9069) | 100% (54) | 100% (28) |
| 2-3 days | 3.7% (357) | 0% (0) | 0% (0) |
| 4-6 days | 1% (93) | 0% (0) | 0% (0) |
| 7-13 days | 0.5% (49) | 0% (0) | 0% (0) |
| 14-20 days | 0.2% (17) | 0% (0) | 0% (0) |
| 21-27 days | 0.1% (9) | 0% (0) | 0% (0) |
| 28-34 days | 0.1% (12) | 0% (0) | 0% (0) |
| 35-69 days | 0.1% (14) | 0% (0) | 0% (0) |
| 70-140 days | 0% (3) | 0% (0) | 0% (0) |

Figure 8: Any Pain Reassessment



**National R5
Pain Reassessment Within
24 Hours:**
83%

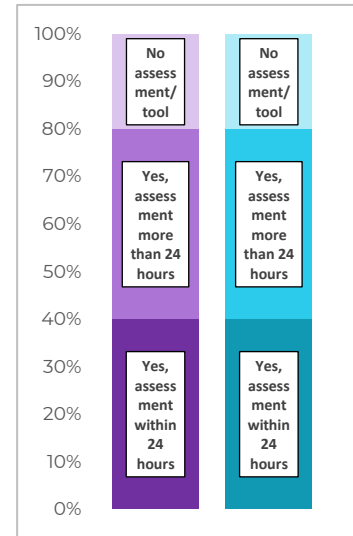


Figure 9: Pain Reassessment Tool Breakdown

**National R5
Any Pain Reassessment:
92%**

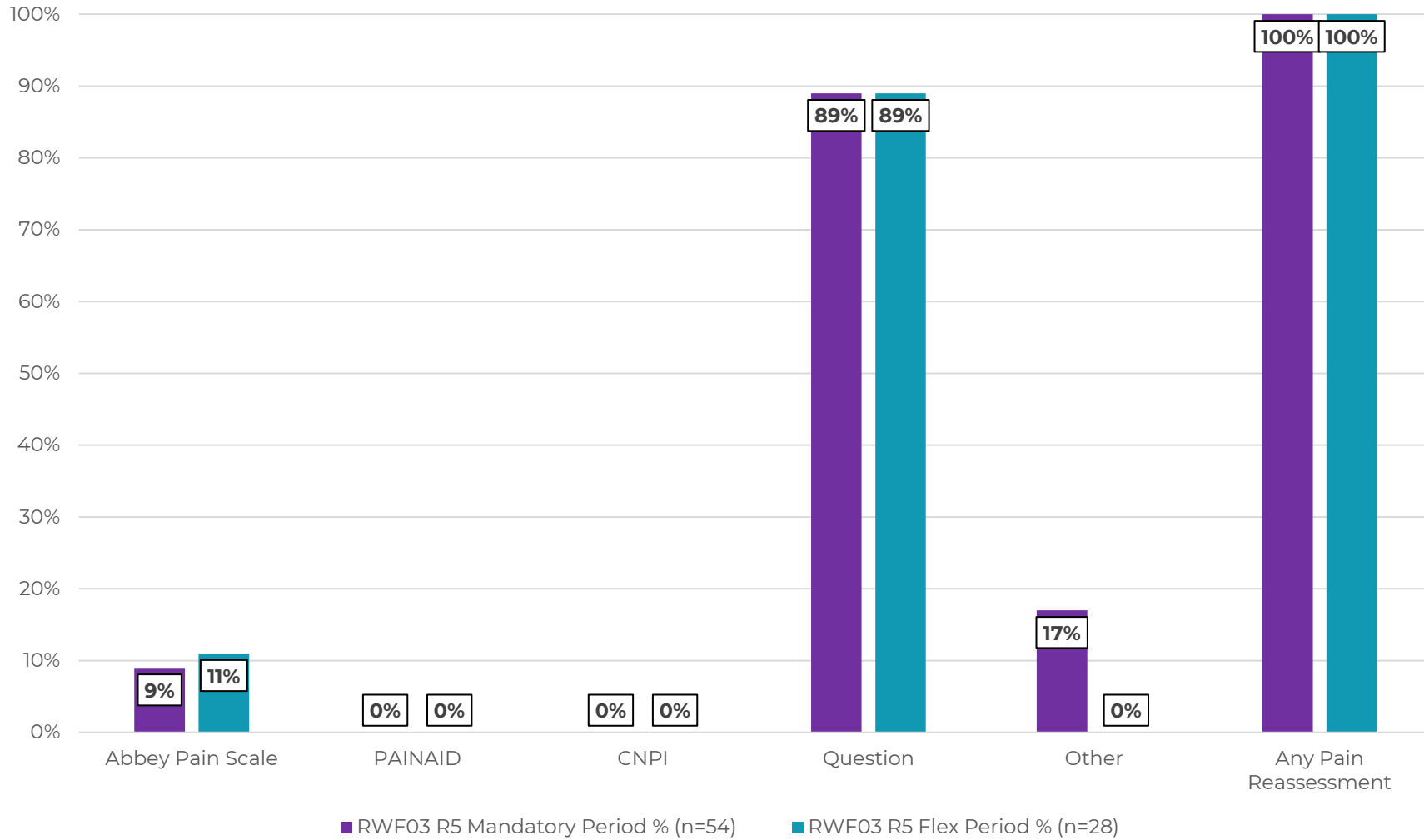


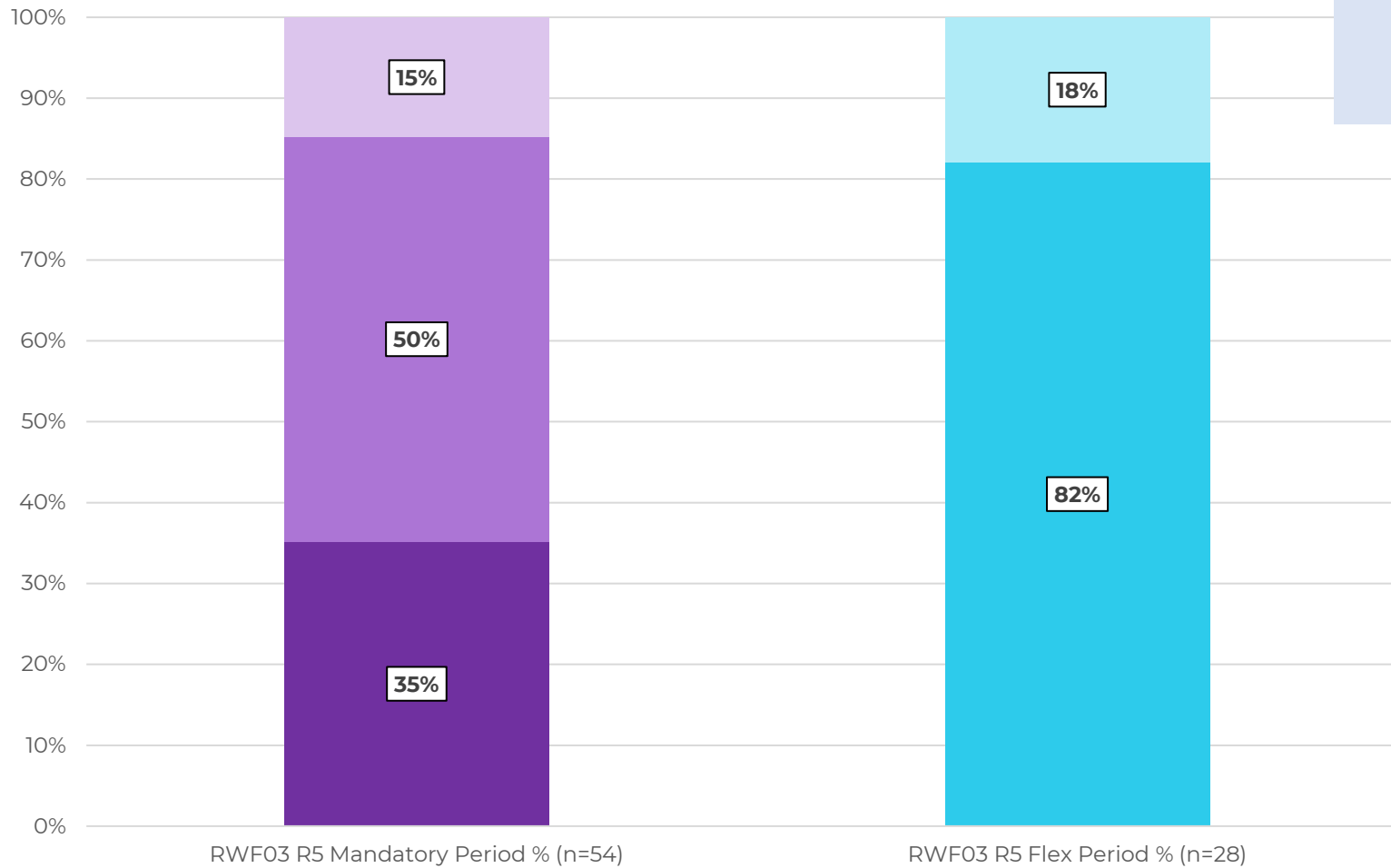
Table 5: Pain Reassessment Date Range

| Pain Reassessment Date Range | National R5 % (N) | RWF03 R5 Mandatory Period % | RWF03 R5 Flex Period % |
|------------------------------|-------------------|-----------------------------|------------------------|
| 0-1 days | 93% (8267) | 100% (54) | 100% (28) |
| 2-3 days | 4.9% (436) | 0% (0) | 0% (0) |
| 4-6 days | 1.3% (117) | 0% (0) | 0% (0) |
| 7-13 days | 0.5% (46) | 0% (0) | 0% (0) |
| 14-20 days | 0.1% (9) | 0% (0) | 0% (0) |
| 21-27 days | 0.1% (5) | 0% (0) | 0% (0) |
| 28-34 days | 0.1% (8) | 0% (0) | 0% (0) |
| 35-69 days | 0% (1) | 0% (0) | 0% (0) |
| 70-140 days | 0% (1) | 0% (0) | 0% (0) |

Discharge Planning

NHS England [Principles for Reducing Length of Stay](#) highlight the importance of early discharge planning. Figure 10 shows all responses on discharge planning and point of initiation. The audit tool also allowed respondents to indicate any reasons for later initiation of discharge, including awaiting results or surgical outcomes, and the acuity of the patient's condition.

Figure 10: Discharge Planning Initiated



**National R5
Discharge Planning Initiated
Within 24 Hours:
39%**

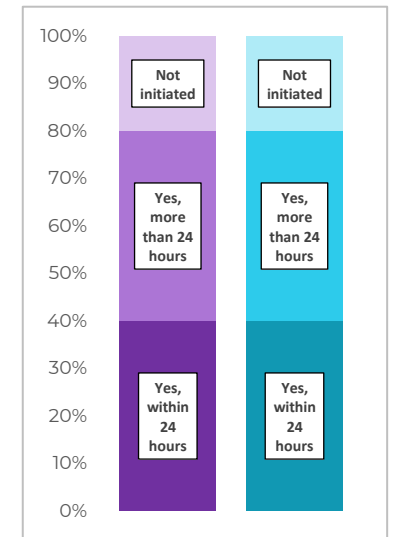
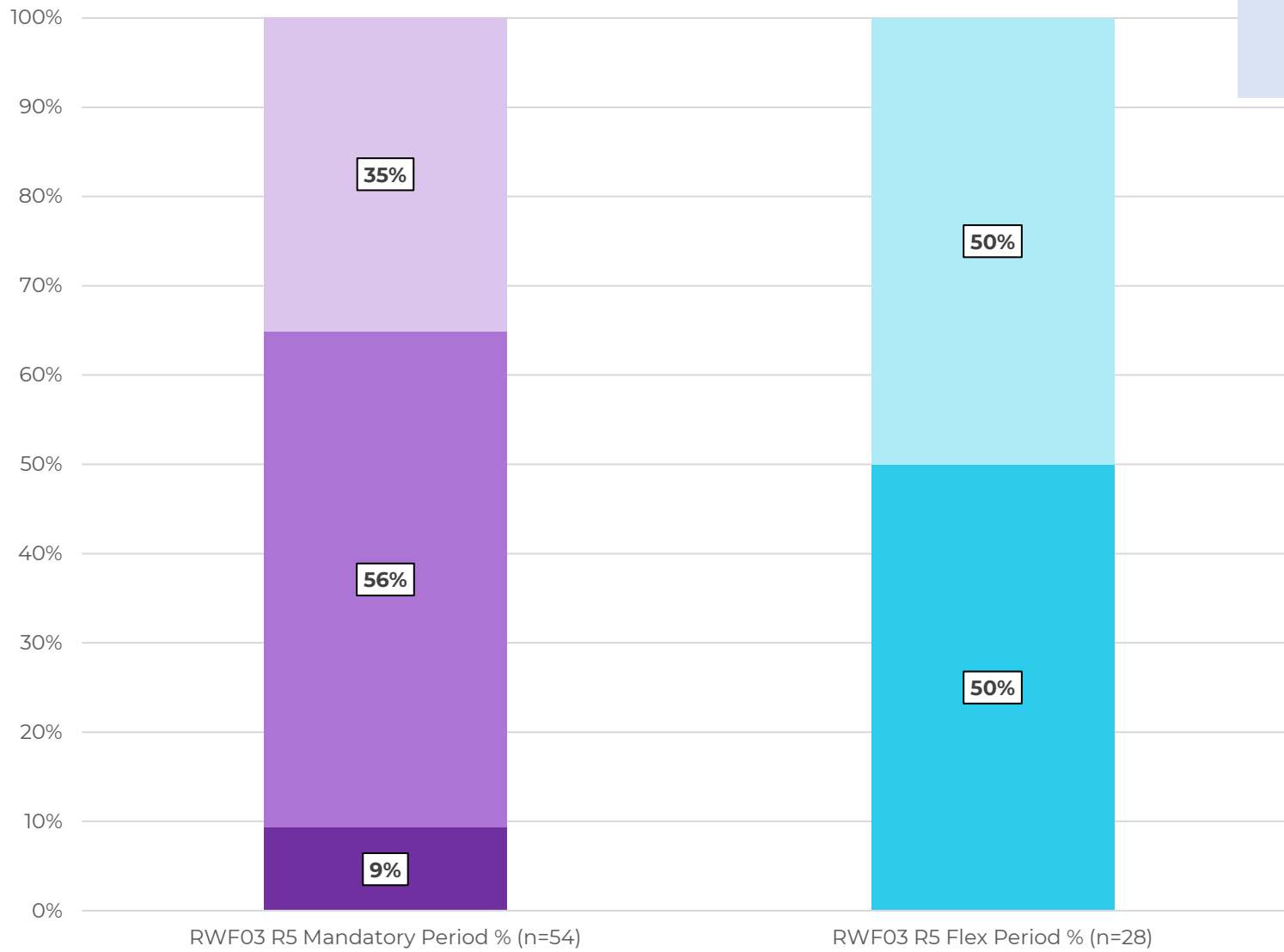


Figure 11: Expected Date of Discharge Recorded



**National R5
Expected Date of Discharge
Recorded Within 24 Hours:
32%**

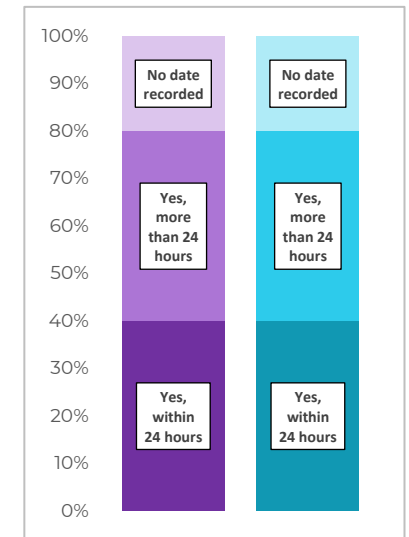
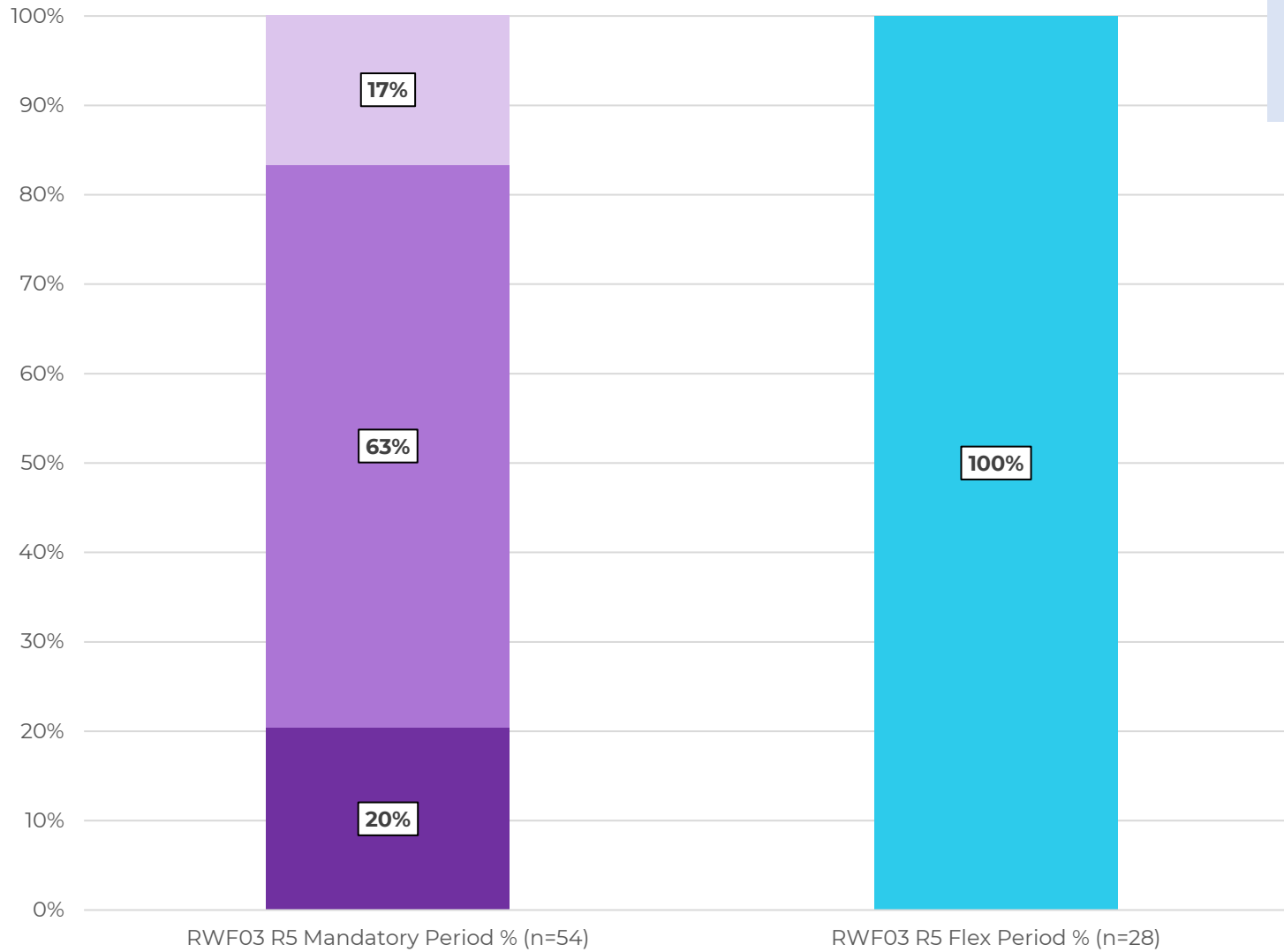


Figure 12: Named Member of Staff Identified to Coordinate Discharge



**National R5
Named Member of Staff
Within 24 Hours:**
39%

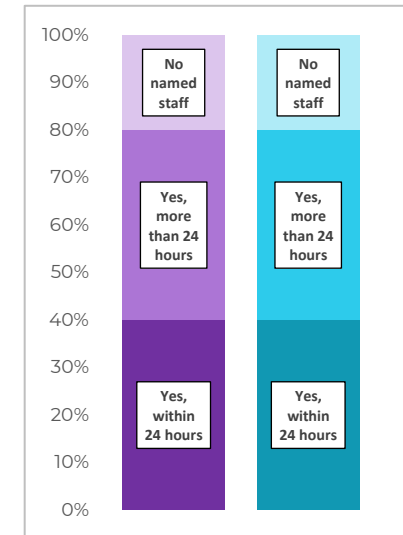
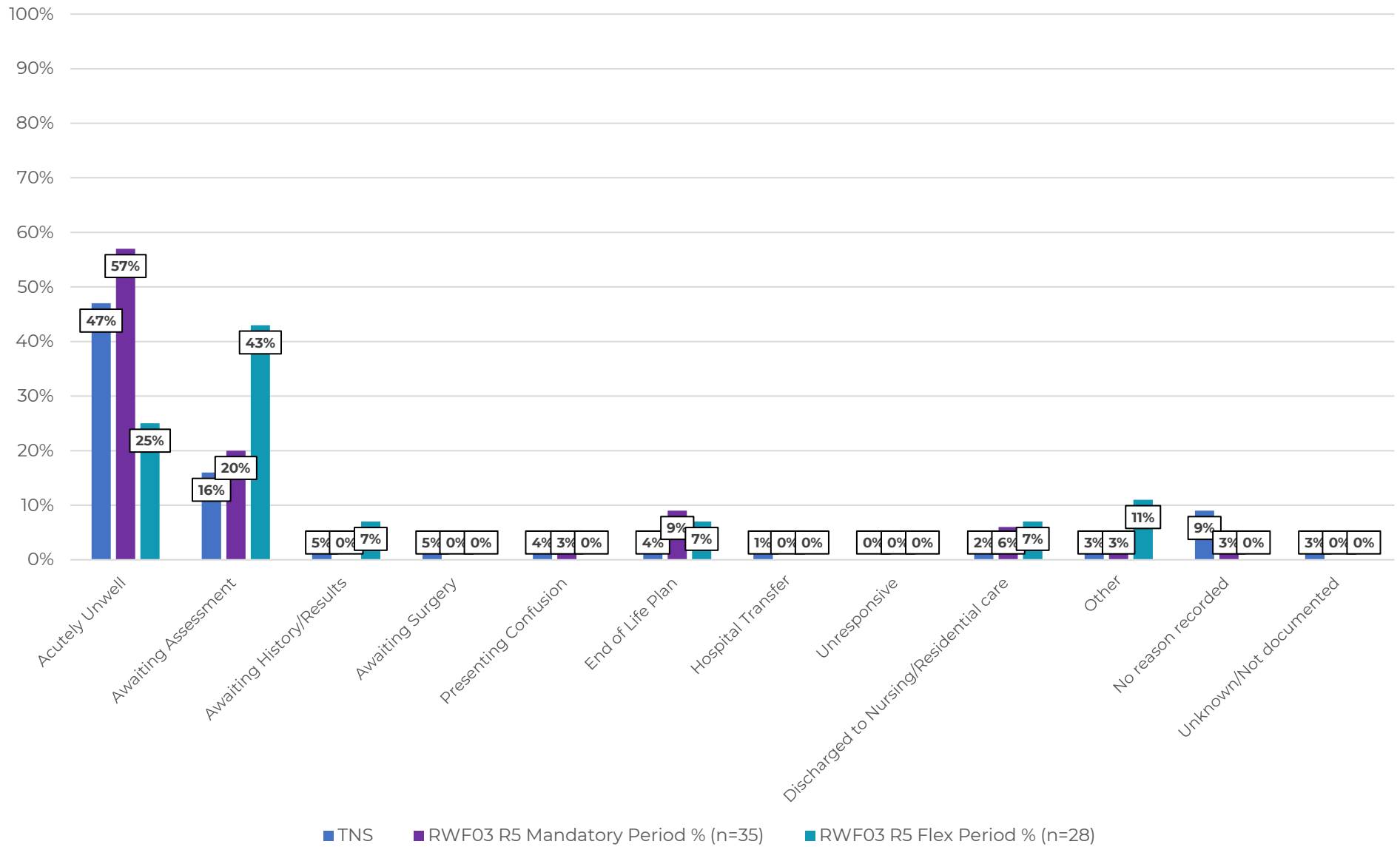


Figure 13: Reasons Discharge Planning was not Initiated within 24 hours of Admission



Discharge Information

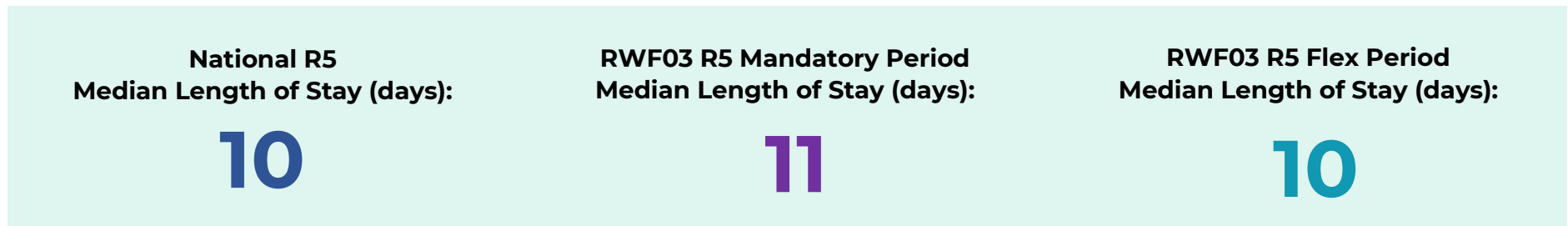
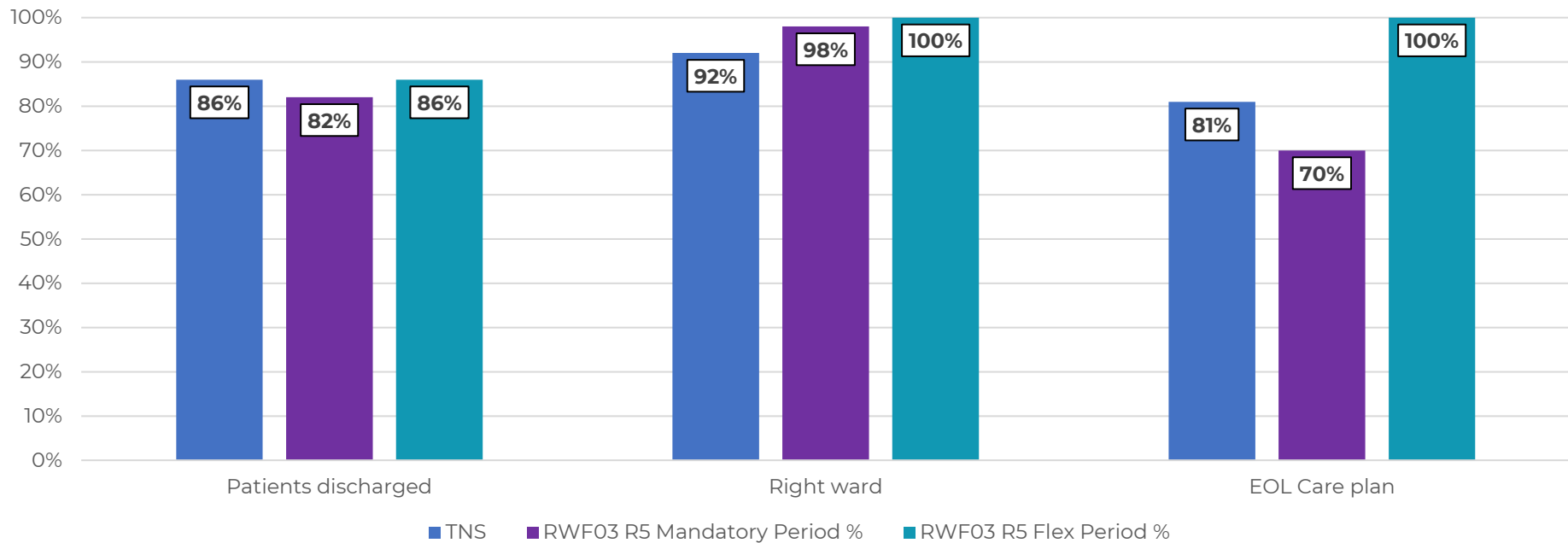


Figure 14: Discharge Information (n=fig14_valueA)



NB. EOL care plan information was only collected for patients who died during admission.

Figure 15: Length of Stay in Weeks

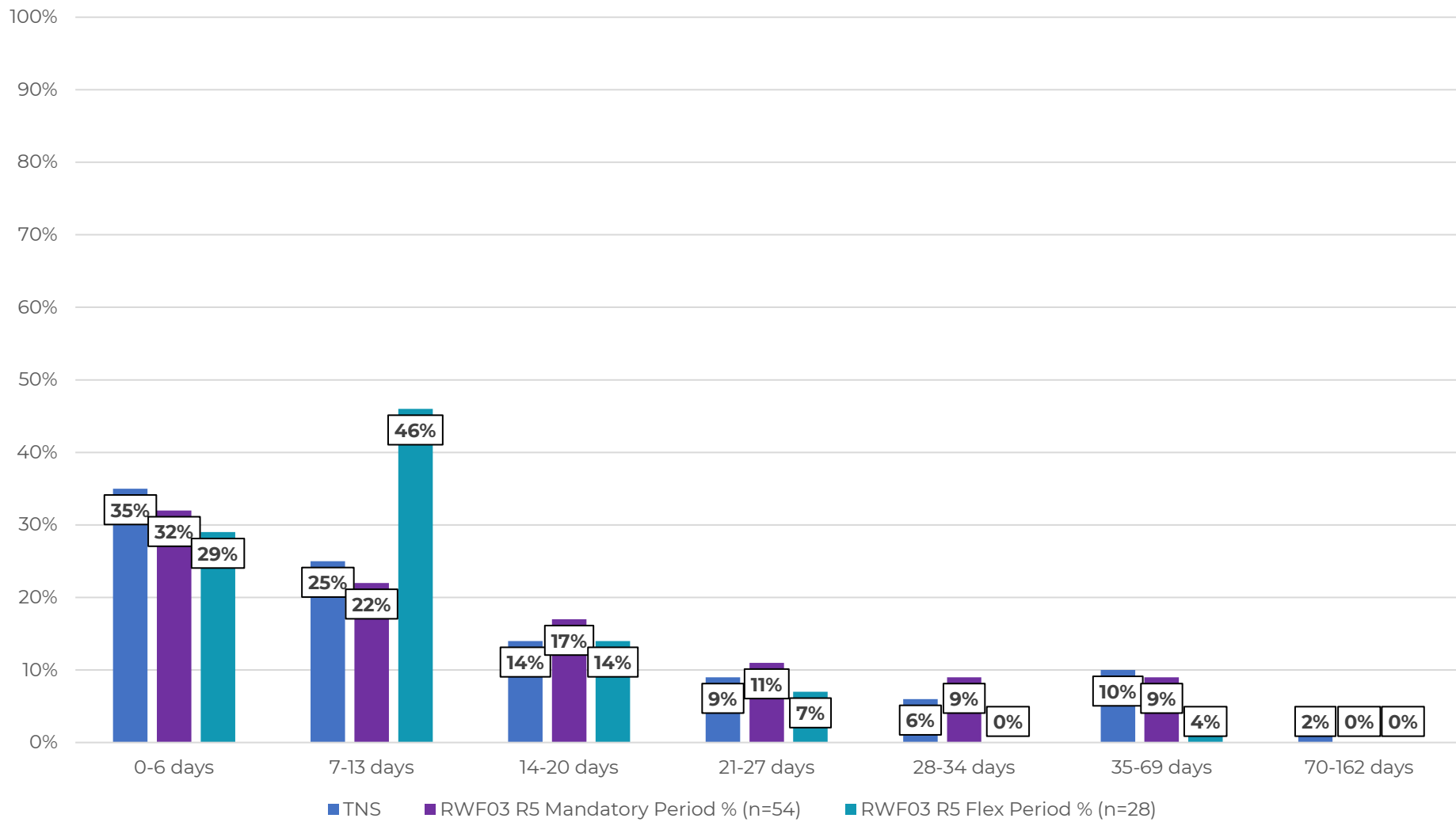
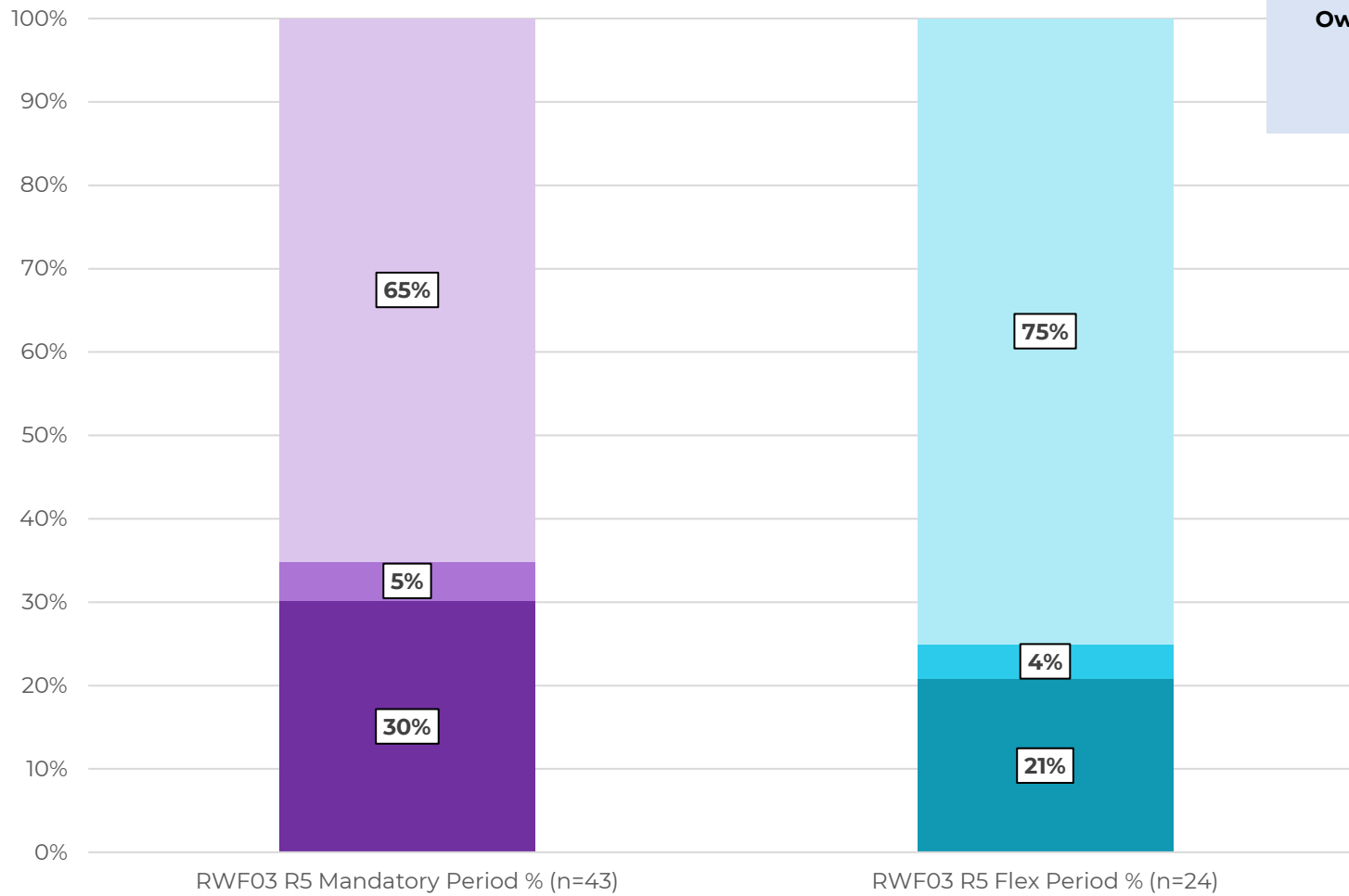
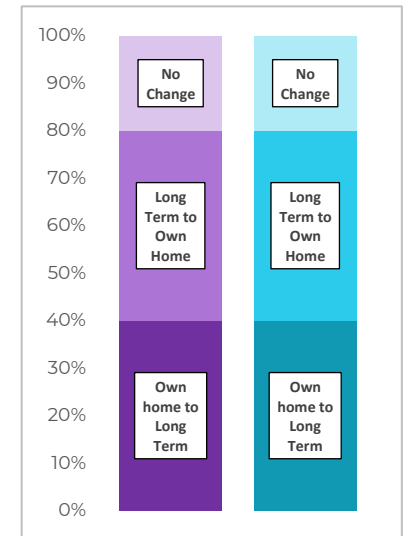


Figure 16: Change in Place of Care

This figure shows the proportion of patients who moved from own home or place of short term care (respite, carer's home, intermediate, rehab, another hospital) to residential, nursing or long stay care post discharge. It also shows the proportion of patients who moved from long term care to their own home or short term care, as well as patients who's place of care did not change.



**National R5
Change in Place of Care from
Own Home to Long Term:
13%**



Appendices

Appendix I: Casenote Audit

Information about the patient

† Excludes NA responses

Information about the patient

| Age | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
|---------|--------------------------------|-------------------------------|---------------------------------------|
| Min-65 | 2% (304/14888) | 0% (0) | 0% (0) |
| 66-80 | 27.3% (4060/14888) | 35.7% (10) | 18.5% (10) |
| 81-100 | 70.4% (10480/14888) | 64.3% (18) | 81.5% (44) |
| 101-108 | 0.3% (44/14888) | 0% (0) | 0% (0) |
| Unknown | 0% (0/14888) | 0% (0) | 0% (0) |
| Minimum | 30 | 67 | 68 |
| Maximum | 106 | 96 | 98 |
| Mean | 84 | 82.8 | 85.9 |

| Sex | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
|------------------------|--------------------------------|---------------------------------------|--|
| Female | 54.9% (8172/14888) | 50% (14) | 50% (27) |
| Male | 42.9% (6383/14888) | 50% (14) | 50% (27) |
| Unknown/Not documented | 2.2% (333/14888) | 0% (0) | 0% (0) |
| Gender | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Female | 51.6% (7675/14888) | 50% (14) | 50% (27) |
| Male | 40.3% (6003/14888) | 50% (14) | 50% (27) |
| Non-binary/Other | 0% (0/14888) | 0% (0) | 0% (0) |
| Unknown/Not documented | 8.1% (1210/14888) | 0% (0) | 0% (0) |
| Ethnicity | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| White | 83.9% (12485/14888) | 96.4% (27) | 94.4% (51) |
| Asian/Asian British | 2.5% (379/14888) | *% (*) | 0% (0) |

| | | | |
|---|--------------------------------|---------------------------------------|--|
| Black/ Black British | 2.1% (311/14888) | 0% (0) | 0% (0) |
| Mixed | 0.7% (100/14888) | 0% (0) | 0% (0) |
| Other | 1.1% (162/14888) | 0% (0) | 0% (0) |
| Unknown/Not documented | 9.7% (1451/14888) | 0% (0) | *% (*) |
| First Language | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| English | 75.0% (11161/14888) | 92.9% (26) | 100% (54) |
| Welsh | 0.5% (71/14888) | 0% (0) | 0% (0) |
| Other European Language | 0.7% (106/14888) | *% (*) | 0% (0) |
| Any Asian Language | 1.4% (208/14888) | *% (*) | 0% (0) |
| Other | 0.5% (67/14888) | 0% (0) | 0% (0) |
| Unknown/Not Documented | 22% (3275/14888) | 0% (0) | 0% (0) |
| Primary diagnosis/cause of admission | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Cancer | 0.3% (42/14888) | 0% (0) | 0% (0) |

| | | | |
|--|---------------------------|-----------|------------|
| Cardiac/vascular/ chest pain | 4.4% (653/14888) | *% (*) | *% (*) |
| Dehydration/ nutrition | 1.4% (215/14888) | *% (*) | *% (*) |
| Delirium/ confusion/ cognitive impairment | 10.8% (1614/14888) | 21.4% (6) | 11.1% (6) |
| Dementia | 1% (144/14888) | 0% (0) | *% (*) |
| Endocrine/ metabolic condition | 1% (144/14888) | *% (*) | 0% (0) |
| Fall | 23.2% (755/14888) | 21.4% (6) | 18.5% (10) |
| Gastrointestinal | 5.1% (755/14888) | 0% (0) | *% (*) |
| Haematology related | 0.6% (90/14888) | 0% (0) | *% (*) |
| Hepatology/liver related | 0.2% (31/14888) | 0% (0) | 0% (0) |
| Hip fracture/ dislocation | 3.5% (514/14888) | 0% (0) | 0% (0) |
| Other Fracture/ dislocation | 1.2% (186/14888) | 0% (0) | *% (*) |
| Impaired consciousness/ reduced responsiveness/ drowsiness or dizziness | 2.4% (359/14888) | *% (*) | *% (*) |
| Neurological problem/seizure/ head injury/ headache | 2.8% (415/14888) | 0% (0) | *% (*) |

| | | | |
|--|--------------------------------|---------------------------------------|--|
| Psychiatric/ psychological/ behavioural problems | 0.5% (76/14888) | *% (*) | 0% (0) |
| Respiratory | 12.9% (1927/14888) | *% (*) | *% (*) |
| Sepsis | 4.2% (632/14888) | 0% (0) | *% (*) |
| Skin problems/ lacerations/lesions | 1% (148/14888) | *% (*) | 0% (0) |
| Stroke or related | 2.4% (354/14888) | *% (*) | 13% (7) |
| Surgical/non-surgical procedure | 1% (152/14888) | 0% (0) | 0% (0) |
| Urinary/ urogenital/renal | 5.7% (843/14888) | 0% (0) | *% (*) |
| Unable to cope/ frailty | 1.9% (278/14888) | 0% (0) | *% (*) |
| Other – please specify | 11.5% (1717/14888) | 0% (0) | 0% (0) |
| Unknown/Not documented | 1% (152/14888) | 0% (0) | 0% (0) |
| Elective or emergency admission | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Elective | 0.9% (140/14888) | 0% (0) | 0% (0) |
| Emergency | 99.1% (14748/14888) | 100% (28) | 100% (54) |

| Was delirium noted as part of the admitting condition? | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
|---|----------------------------|----------------------------|---------------------------------|
| No | 66.3% (9868/14888) | 57.1% (16) | 61.1% (33) |
| Yes | 33.7% (5020/14888) | 42.9% (12) | 38.9% (21) |
| Dementia status | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Known dementia | 74.6% (11100/14888) | 82.1% (23) | 88.9% (48) |
| Probably dementia/ Concerns about cognition | 25.4% (3788/14888) | *% (*) | 11.1% (6) |
| What is the subtype of dementia? | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Alzheimer's Disease (F00, G30) | 33.2% (3683/11100) | 43.5% (10) | 43.8% (21) |
| Dementia in Alzheimer's disease, atypical or mixed type (F00.2) | 8.6% (956/11100) | *% (*) | 12.5% (6) |
| Vascular Dementia (F01) | 18.9% (2099/11100) | *% (*) | 25% (12) |
| Dementia with Lewy bodies (G31.9) | 2.5% (282/11100) | *% (*) | *% (*) |
| Fronto-temporal Dementia (G31.8) | 0.7% (79/11100) | *% (*) | 0% (0) |

| | | | |
|--|----------------------------|-----------------------------------|--|
| Dementia in Parkinson's disease (F02.3) | 2.2% (248/11100) | *% (*) | *% (*) |
| Delirium due to known psychological condition, including delirium superimposed on dementia | 0.5% (51/11100) | 0% (0) | 0% (0) |
| Unspecified dementia (F03) | 16.1 (1792/11100) | *% (*) | 12.5% (6) |
| Dementia subtype Unknown/not documented | 17.2% (1910/11100) | 0% (0) | 0% (0) |
| Place of care before admission | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Own home | 67.5% (10045/14887) | 64.3% (18) | 57.4% (31) |
| Respite care | 0.4% (60/14887) | 0% (0) | *% (*) |
| Rehabilitation ward | 0.2% (32/14887) | 0% (0) | *% (*) |
| Psychiatric ward | 0.3% (43/14887) | 0% (0) | 0% (0) |
| Carer's home | 1.9% (290/14887) | *% (*) | *% (*) |
| Intermediate/ community rehabilitation care | 0.4% (55/14887) | 0% (0) | 0% (0) |
| Residential care | 15.7% (2334/14887) | *% (*) | 13% (7) |

| | | | |
|------------------------------|--------------------------------|---------------------------------------|--|
| Nursing home | 13% (1940/14887) | *% (*) | 20.4% (11) |
| Palliative care | 0% (2/14887) | 0% (0) | 0% (0) |
| Transfer to another hospital | 0.3% (45/14887) | 0% (0) | *% (*) |
| Long stay care | 0.3% (41/14887) | 0% (0) | 0% (0) |
| Ward | National R5 % (N/D) | RWF03 R5 Flex Period % (N) | RWF03 R5 Mandatory Period % (N) |
| Care of the elderly | 30.2% (4490/14888) | 46.4% (13) | 31.5% (17) |
| Oncology | 0.1% (20/14888) | 0% (0) | 0% (0) |
| Cardiac | 1.8% (267/14888) | 0% (0) | 0% (0) |
| Orthopaedics | 6% (891/14888) | 0% (0) | 0% (0) |
| Critical care | 0.3% (43/14888) | 0% (0) | 0% (0) |
| Stroke | 2.8% (417/14888) | *% (*) | 16.7% (9) |
| General medical | 27.3% (4066/14888) | 21.4% (6) | 24.1% (13) |
| Surgical | 5.4% (804/14888) | 0% (0) | 0% (0) |

| | | | |
|-------------------------|---------------------------|--------|------------|
| Nephrology | 0.5% (69/14888) | 0% (0) | *% (*) |
| Other medical | 13.1% (1946/14888) | *% (*) | 0% (0) |
| Obstetrics/ gynaecology | 0.2% (37/14888) | 0% (0) | 0% (0) |
| Other | 12.3% (1836/14888) | *% (*) | 25.9% (14) |
| Unknown/Not documented | 0% (2/14888) | 0% (0) | 0% (0) |

Delirium Screening and Assessment

| Delirium Screening Assessments | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|---|----------------------------|-------------------------------------|--|
| Single Question in Delirium (SQiD) | 32.4% (3449/10642) | 0% (0/28) | 0% (0/54) |
| History taken from someone who knows the patient well in which they were asked about any recent changes in cognition/ behaviour | 70.8% (7539/10642) | 60.7% (17/28) | 81.5% (44/54) |
| 4AT | 35% (3730 (10642) | 3.6% (1/28) | 0% (0/54) |
| CAM | 5.3% (563/10642) | 0% (0/28) | 3.7% (2/54) |
| OSLA | 0.4% (47/10642) | 0% (0/28) | 0% (0/54) |

| | | | |
|---|----------------------------|-------------------------------------|--|
| Other | 13.6% (1446/10642) | 0% (0/28) | 3.7% (2/54) |
| Any Initial Delirium Screen | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, within 24 hours | 80.9% (8605/10642) | 57.1% (16/28) | 88.9% (48/54) |
| Yes, more than 24 hours | 6.2% (664/10642) | 7.1% (2/28) | 0% (0/54) |
| No | 12.9% (1373/10642) | 35.7% (10/28) | 11.1% (6/54) |
| Any Initial Delirium Screen | 87.1% (9269/10642) | 64.3% (18/28) | 88.9% (48/54) |
| Days from admission to delirium screen | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| 0-1 days | 90.9% (8201/9020) | 94.1% (16/17) | 100% (46/46) |
| 2-3 days | 5.5% (496/9020) | 0% (0/17) | 0% (0/46) |
| 4-6 days | 1.8% (164/9020) | 5.9% (1/17) | 0% (0/46) |
| 7-13 days | 0.9% (80/9020) | 0% (0/17) | 0% (0/46) |
| 14-20 days | 0.3% (30/9020) | 0% (0/17) | 0% (0/46) |
| 21-27 days | 0.2% (17/9020) | 0% (0/17) | 0% (0/46) |

| | | | |
|--|----------------------------|-------------------------------------|--|
| 28-34 days | 0.2% (17/9020) | 0% (0/17) | 0% (0/46) |
| 35-69 days | 0.2% (14/9020) | 0% (0/17) | 0% (0/46) |
| 70-140 days | 0% (1/9020) | 0% (0/17) | 0% (0/46) |
| Delirium assessment | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, delirium may be present | 48.1% (4342/9032) | 70.6% (12/17) | 41.3% (19/46) |
| No evidence of delirium | 51.8% (4677/9032) | 29.4% (5/17) | 58.7% (27/46) |
| Delirium Confirmed | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, the patient was diagnosed with delirium | 71.5% (3106/4342) | 91.7% (11/12) | 57.9% (11/19) |
| No, it was confirmed the patient did not have delirium | 15.2% (661/4342) | 0% (0/12) | 26.3% (5/19) |
| No further investigation took place | 13.2% (575/4342) | 8.3% (1/12) | 15.8% (3/19) |
| Delirium Management Plan | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes | 92.5% (2872/3106) | 100% (11/11) | 90.9% (10/11) |

| | | | |
|---------------------------|----------------------------|-------------------------------------|--|
| No | 7.5% (234/3106) | 0% (0/11) | 9.1% (1/11) |
| Delirium Care Plan | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes | 50% (1552/3106) | 36.4% (4/11) | 18.2% (2/11) |
| No | 50% (1554/3106) | 63.6% (7/11) | 81.8% (9/11) |

Pain Assessment

| Pain Assessment | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|---|----------------------------|-------------------------------------|--|
| Yes, within 24 hours | 85.1% (8936/10505) | 100% (28/28) | 100% (54/54) |
| Yes, more than 24 hours | 6.5% (687/10505) | 0% (0/28) | 0% (0/54) |
| No | 8.4% (882/10505) | 0% (0/28) | 0% (0/54) |
| Yes | 91.6% (9623/10505) | 100% (28/28) | 100% (54/54) |
| Days from admission to pain assessment | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| 0-1 days | 94.2% (9069/9623) | 100% (28/28) | 100% (54/54) |

| | | | |
|---|--------------------------------|---|--|
| 2-3 days | 3.7% (357/9623) | 0% (0/28) | 0% (0/54) |
| 4-6 days | 1% (93/9623) | 0% (0/28) | 0% (0/54) |
| 7-13 days | 0.5% (49/9623) | 0% (0/28) | 0% (0/54) |
| 14-20 days | 0.2% (17/9623) | 0% (0/28) | 0% (0/54) |
| 21-27 days | 0.1% (9/9623) | 0% (0/28) | 0% (0/54) |
| 28-34 days | 0.1% (12/9623) | 0% (0/28) | 0% (0/54) |
| 35-69 days | 0.1% (14/9623) | 0% (0/28) | 0% (0/54) |
| 70-140 days | 0% (3/9623) | 0% (0/28) | 0% (0/54) |
| Pain Assessment Tools Used | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| The Abbey Pain scale | 10.3% (991/9623) | 3.6% (1/28) | 9.3% (5/54) |
| Pain assessment in advanced dementia (PAINAID) | 1.3% (125/9623) | 0% (0/28) | 0% (0/54) |
| Checklist of nonverbal pain indicators (CNPI) observation score | 1% (98/9623) | 0% (0/28) | 0% (0/54) |
| Question | 65.9% (6338/9623) | 96.4% (27/28) | 88.9% (48/54) |

| | | | |
|---|--------------------------------|---|--|
| None | 0% (3/9623) | 0% (0/28) | 0% (0/54) |
| Other | 26.6% (2561/9623) | 0% (0/28) | 16.7% (9/54) |
| Patients who had questioning as their only pain assessment | 61.1% (5580/9623) | 96.4% (27/28) | 74.1% (40/54) |
| Pain Reassessment | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, within 24 hours | 83.1% (7995/9623) | 100% (28/28) | 98.1% (53/54) |
| Yes, more than 24 hours | 9.3% (895/9623) | 0% (0/28) | 1.9% (1/54) |
| No | 7.6% (733/9623) | 0% (0/28) | 0% (0/54) |
| Yes | 92.4% (8890/9623) | 100% (28/28) | 100% (54/54) |
| Days from first pain assessment to pain reassessment | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| 0-1 days | 93% (8267/8890) | 100% (28/28) | 100% (54/54) |
| 2-3 days | 4.9% (436/8890) | 0% (0/28) | 0% (0/54) |
| 4-6 days | 1.3% (117/8890) | 0% (0/28) | 0% (0/54) |

| | | | |
|---|--------------------------------|---|--|
| 7-13 days | 0.5% (46/8890) | 0% (0/28) | 0% (0/54) |
| 14-20 days | 0.1% (9/8890) | 0% (0/28) | 0% (0/54) |
| 21-27 days | 0.1% (5/8890) | 0% (0/28) | 0% (0/54) |
| 28-34 days | 0.1% (8/8890) | 0% (0/28) | 0% (0/54) |
| 35-69 days | 0% (0/8890) | 0% (0/28) | 0% (0/54) |
| 70-140 days | 0% (1/8890) | 0% (0/28) | 0% (0/54) |
| Pain Reassessment Tools Used | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| The Abbey Pain scale | 11.1% (987/8890) | 10.7% (3/28) | 9.3% (5/54) |
| Pain assessment in advanced dementia (PAINAID) | 1% (91/8890) | 0% (0/28) | 0% (0/54) |
| Checklist of nonverbal pain indicators (CNPI) observation score | 0.8% (68/8890) | 0% (0/28) | 0% (0/54) |
| Question | 64.1% (5697/8890) | 89.3% (25/28) | 88.9% (48/54) |
| None | 0% (0/8890) | 0% (0/28) | 0% (0/54) |
| Other | 28.2% (2505/8890) | 0% (0/28) | 16.7% (9/54) |

| | | | |
|---|--------------------------|---------------|---------------|
| Patients who had questioning as their only repeat pain assessment | 59.5% (5288/8890) | 89.3% (25/28) | 74.1% (40/54) |
|---|--------------------------|---------------|---------------|

Discharge Planning

| Were the required actions to prepare for discharge identified? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|--|---------------------------|------------------------------|-----------------------------------|
| Yes, within 24 hours of admission | 38.7% (4118/10642) | 0% (0/28) | 35.2% (19/54) |
| Yes, more than 24 hours after admission | 46.8% (4981/10642) | 82.1% (23/28) | 50% (27/54) |
| No | 14.5% (1541/10642) | 17.9% (5/28) | 14.8% (8/54) |
| Yes (combined) | 85.5% (9099/10642) | 82.1% (23/28) | 85.2% (46/54) |
| Expected date of discharge recorded | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, within 24 hours of admission | 31.9% (3391/10642) | 0% (0/28) | 9.3% (5/54) |
| Yes, more than 24 hours after admission | 32.2% (3427/10642) | 50% (14/28) | 55.6% (30/54) |
| No | 35.9% (3822/10642) | 50% (14/28) | 35.2% (19/54) |
| Yes (combined) | 64.1% (6818/10642) | 50% (14/28) | 64.8% (35/54) |

| Days from admission to discharge plan | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|--|------------------------------------|---------------------------------|---|
| 0-1 days | 48.6% (4423/9097) | 8.7% (2/23) | 43.5% (20/46) |
| 2-3 days | 22.1% (2007/9097) | 43.5% (10/23) | 19.6% (9/46) |
| 4-6 days | 14.1% (1286/9097) | 26.1% (6/23) | 19.6% (9/46) |
| 7-13 days | 9.8% (893/9097) | 17.4% (4/23) | 10.9% (5/46) |
| 14-20 days | 2.9% (264/9097) | 4.3% (1/23) | 2.2% (1/46) |
| 21-27 days | 1.2% (106/9097) | 0% (0/23) | 4.3% (2/46) |
| 28-34 days | 0.7% (65/9097) | 0% (0/23) | 0% (0/46) |
| 35-69 days | 0.5% (50/9097) | 0% (0/23) | 0% (0/46) |
| 70-140 days | 0% (3/9097) | 0% (0/23) | 0% (0/46) |
| Was a named member of staff (nurse/consultant/discharge coordinator) or named team responsible clearly identified to coordinate discharge? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes, within 24 hours of admission | 39% (4152/10642) | 0% (0/28) | 20.4% (11/54) |

| | | | |
|---|-------------------------------------|---|--|
| Yes, more than 24 hours after admission | 33.2% (3538/10642) | 100% (28/28) | 63% (34/54) |
| No | 27.7% (2949/10642) | 0% (0/28) | 16.7% (9/54) |
| Yes (combined) | 72.2% (7690/10642) | 100% (28/28) | 83.3% (45/54) |
| If the discharge planning was not initiated within 24 hours of admission, please select the recorded reason why? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Patient acutely unwell | 46.9% (3067/6540) | 25% (7/28) | 57.1% (20/35) |
| Patient awaiting assessment | 15.8 (1035/6540) | 42.9% (12/28) | 20% (7/35) |
| Patient awaiting history/results | 4.9% (320/6540) | 7.1% (2/28) | 0% (0/35) |
| Patient awaiting surgery | 5.4% (355/6540) | 0% (0/28) | 0% (0/35) |
| Patient presenting confusion | 3.9% (256/6540) | 0% (0/28) | 2.9% (1/35) |
| Patient on end of life plan | 4.4% (288/6540) | 7.1% (2/28) | 8.6% (3/35) |
| Patient transferred to another hospital | 0.7% (43/6540) | 0% (0/28) | 0% (0/35) |
| Patient unresponsive | 0.3% (20/6540) | 0% (0/28) | 0% (0/35) |
| Patient being discharged to nursing/residential care | 2.1% (139/6540) | 7.1% (2/28) | 5.7% (2/35) |

| | | | |
|------------------------|------------------------|--------------|-------------|
| Other (please specify) | 3.4% (224/6540) | 10.7% (3/28) | 2.9% (1/35) |
| No reason recorded | 9.4% (612/6540) | 0% (0/28) | 2.9% (1/35) |
| Unknown/Not documented | 2.8% (181/6540) | 0% (0/28) | 0% (0/35) |

Discharge Information

| Has the patient been discharged? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|----------------------------------|-------------------------------|---------------------------------|---|
| Yes | 86.4% (9164/10601) | 85.7% (24/28) | 81.5% (44/54) |
| No, the patient died | 11.5% (1224/10601) | 14.3% (4/28) | 18.5% (10/54) |
| No, still an inpatient | 2% (213/10601) | 0% (0/28) | 0% (0/54) |
| Length of stay in days | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Minimum | 0 | 2 | 1 |
| Maximum | 153 | 38 | 64 |
| Median | 10 | 10 | 11 |

| Length of stay in weeks | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|---|-------------------------------|---------------------------------|---|
| 0-6 days | 34.7% (3589/10347) | 28.6% (8/28) | 31.5% (17/54) |
| 7-13 days | 25.4% (2631/10347) | 46.4% (13/28) | 22.2% (12/54) |
| 14-20 days | 13.8% (1426/10347) | 14.3% (4/28) | 16.7% (9/54) |
| 21-27 days | 8.7% (898/10347) | 7.1% (2/28) | 11.1% (6/54) |
| 28-34 days | 5.8% (595/10347) | 0% (0/28) | 9.3% (5/54) |
| 35-69 days | 9.7% (999/10347) | 3.6% (1/28) | 9.3% (5/54) |
| 70-162 days | 2% (209/10347) | 0% (0/28) | 0% (0/54) |
| Place in which the person was living or receiving care after discharge | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Own home | 50.7% (4650/9164) | 50% (12/24) | 43.2% (19/44) |
| Respite care | 0.6% (55/9126) | 0% (0/24) | 2.3% (1/44) |
| Rehabilitation ward | 2.1% (192/9164) | 0% (0/24) | 0% (0/44) |
| Psychiatric ward | 0.5% (47/9164) | 0% (0/24) | 0% (0/44) |

| | | | |
|--|----------------------------|-------------------------------------|--|
| Carer's home | 1.7% (152/9164) | 0% (0/24) | 0% (0/44) |
| Intermediate/Community rehabilitation care | 3.3% (305/9126) | 4.2% (1/24) | 2.3% (1/44) |
| Residential care | 17.6% (1610/9164) | 12.5% (3/24) | 15.9% (7/44) |
| Nursing home | 20.9% (1914/9164) | 33.3% (8/24) | 34.1% (15/44) |
| Palliative care | 0.7% (68/9164) | 0% (0/24) | 2.3% (1/44) |
| Transfer to another hospital | 1.3% (120/9164) | 0% (0/24) | 0% (0/44) |
| Long stay care | 0.1% (13/9164) | 0% (0/24) | 0% (0/44) |
| Unknown/Not documented | 0.4% (38/9164) | 0% (0/24) | 0% (0/44) |
| Change in place of care from admission to discharge | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Own home/short term to long term care | 12.9% (1156/8981) | 20.8% (5/24) | 30.2% (13/43) |
| Long term to own home/short term care | 3.4% (309/8981) | 4.2% (1/24) | 4.7% (2/43) |
| No change | 83.7% (7516/8981) | 75% (18/24) | 65.1% (28/43) |

| At the point of discharge was the patient based on the right ward for the responsible consultant specialty? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
|---|-------------------------|------------------------------|-----------------------------------|
| Yes | 92% (9558/10388) | 100% (28/28) | 98.1% (53/54) |
| No | 7.6% (788/10388) | 0% (0/28) | 1.9% (1/54) |
| Unknown/Not documented | 0.4% (42/10388) | 0% (0/28) | 0% (0/54) |
| (If still an inpatient) is the patient based on the right ward for the responsible consultant specialty? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes | 96.7% (206/213) | - | - |
| No | 2.8% (6/213) | - | - |
| Unknown/Not documented | 0.5% (1/213) | - | - |
| Overall percentage of outliers | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Patient not on right ward | 7.5% (794/10558) | 0% (0/28) | 1.9% (1/54) |
| (If the patient died) Was the patient receiving end of life care/on an end of life care plan? | National R5 % (N/D) | RWF03 R5 Flex Period % (N/D) | RWF03 R5 Mandatory Period % (N/D) |
| Yes | 80.6% (987/1224) | 100% (4/4) | 70% (7/10) |

| | | | |
|------------------------|-----------------------|----------|------------|
| No | 19% (233/1224) | 0% (0/4) | 30% (3/10) |
| Unknown/Not documented | 0.3% (4/1224) | 0% (0/4) | 0% (0/10) |