

**NAD**  
NATIONAL AUDIT  
OF DEMENTIA

**National Audit of Dementia**  
**Care in General Hospitals Round 5**  
Local Report August 2023

**New Cross Hospital**

The Royal Wolverhampton NHS Trust

GR

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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](http://www.hqip.org.uk/national-programmes)

If citing this report, please reference it as: Royal College of Psychiatrists (2023) National Audit of Dementia care in general hospitals 2022-23: Round 5 audit local report. London: Healthcare Quality Improvement Partnership. Available from:

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

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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

Round 5 of NAD collected data between September 2022-January 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 this round. Round 5 used a new sampling methodology and reduced casenote dataset, and revised organisational dataset (see [National Report](#) p11).

Participating hospitals were asked to complete:

- Prospective identification of people with dementia or suspected dementia admitted to the hospital from 19 September – 14 October 2022
- A casenote audit of the first 40-80 of these patients (some hospitals extended their identification period to achieve their sample)
- A survey of carer experience of the quality of care
- Data submission of hospital level information relating to training, resources and planning care, collated with key metrics from the casenote audit and carer questionnaire into the Annual Dementia Statement (ADS) for each hospital.

Hospital were also asked to use a newly developed tool to collect data from patients with dementia admitted to the hospital (3-5 patients per month, once fit for discharge). This data is reported back separately every 6 months. Data validation and evaluation will take place after the first twelve months of collection.

## Results in this report

This report contains:

- Summary graphs/graphics showing key results from the prospective casenote audit and the carer questionnaire, including where possible comparison with Round 4 results
- Appendix tables with a full breakdown of Round 5 results for the casenote audit, carer questionnaire, and ADS.

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

### **Your Data**

Comparison of key metrics across all hospitals is available in National Report [Appendix XI](#).

The full National Report dataset and the post outlier analysis dataset are available at [here](#).

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

### **Data verification, analysis and outlier 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.

Following outlier analysis of this dataset, hospital sites notified of negative outlier status were given a further opportunity to check their data and submit amendments. Key metrics results post outlier amendments are shown in [appendix IV](#) and in the final dataset accessible [here](#).

### **Recommendations**

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

## Summary

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 ADS poster and [appendices tables](#). **NB:** 25 casenote audit returns and 10 carer questionnaire returns were minimum requirements for inclusion in local reporting.

**RL403**  
**Total Patients Identified:**  
**83**

**RL403**  
**Total Selected Sample:**  
**83**

**RL403**  
**Total Carer Questionnaires:**  
**1**

**National Total Patients Identified:**  
**14,888**

**National Total Selected Sample:**  
**10,642**

**National Total Carer Questionnaires:**  
**2,223**

**RL403 Total Casenotes within Admission Period:**  
**71**

**RL403 Total Casenotes outside Admission Period:**  
**12**

**National Total Casenotes within Admission Period:**  
**14,626**

**National Total Casenotes outside Admission Period:**  
**257**

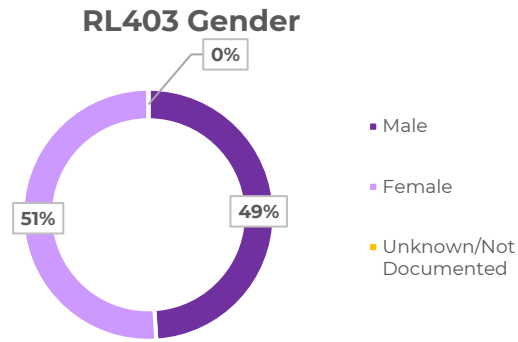
Table 1: Key Metrics and Summary Data

Key Metrics	National R5	RL403 R5
% Delirium screen (inc. noted on admission)	87%	88%
% Pain assessment	92%	99%
% Pain reassessment	92%	99%
% Pain tool – question only	61%	100%
% Initiation of discharge plan in first 24 hours*	45%	17%
Carer rating overall care quality	66%	100%
Carer rating communication	60%	100%
Summary Data	National R5	RL403 R5
% People with dementia admitted to hospital over previous year	Range between 0.1% - 15% Median: 3%	1%
% People with personal information document at bedside	46%	28.8%
Number of Lead Nurse for dementia in post	Ranged between 0 - 6	1
% Staff with Tier 1 training	86%	100%
% Staff with Tier 2 training	45%	63%

\*See [Discharge Planning](#).

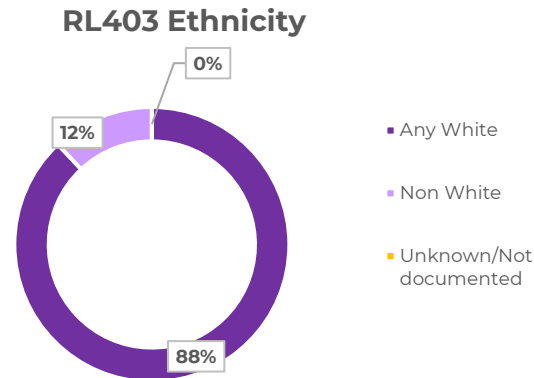
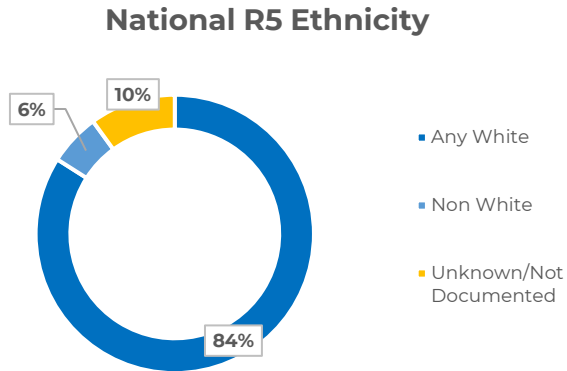


# Demographic Information from Casenote Audit



**National R5  
Median Age:**

**85**



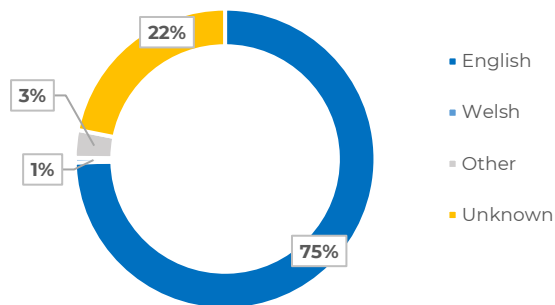
**RL403  
Median Age:**

**84**

**National R5  
Age Range:**

**30-106**

### National R5 First Language



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

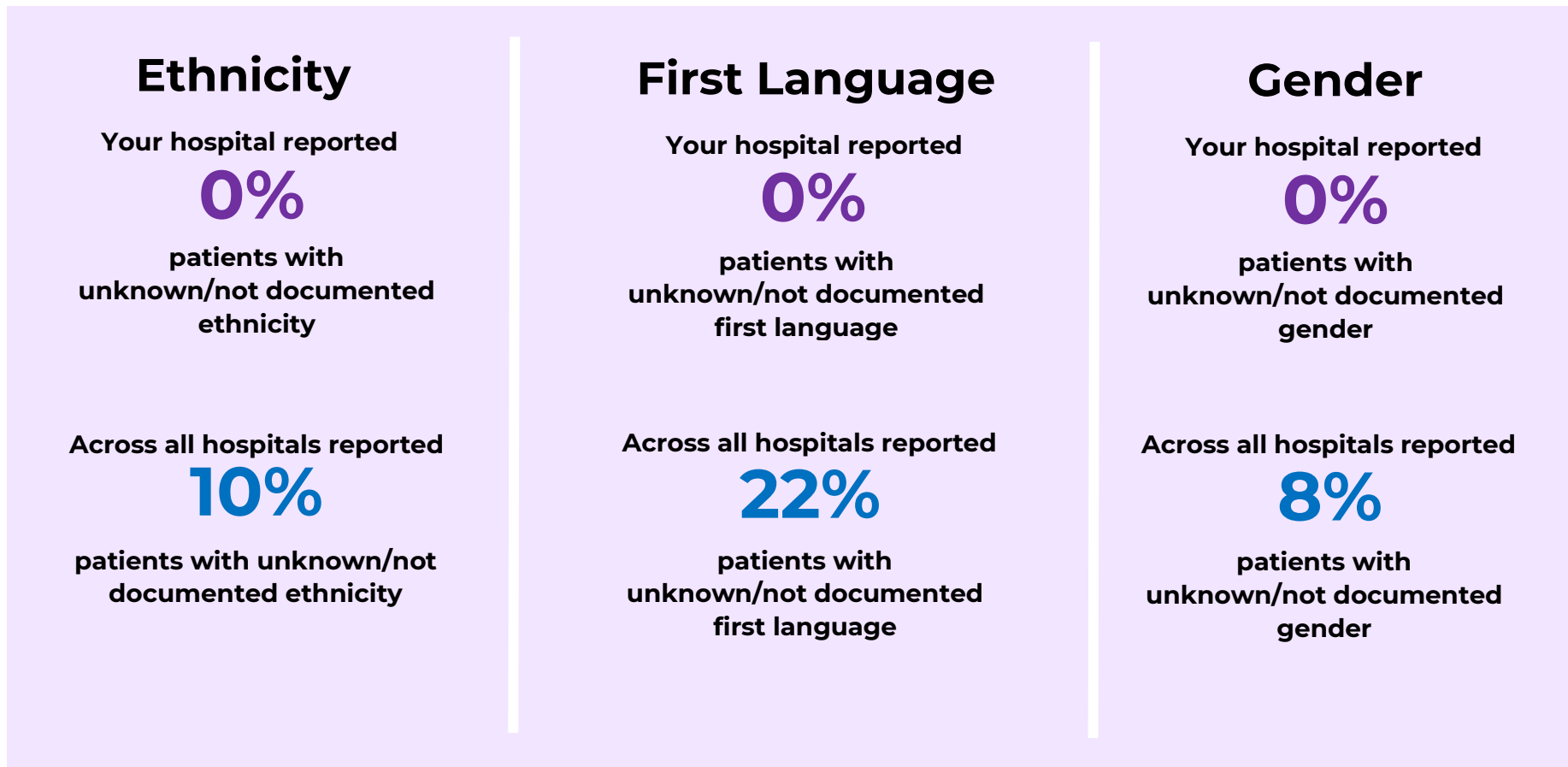
**RL403  
Age Range:**

**51-99**

## 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 graphic 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.



## 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 4: Initial Delirium Screening, including Delirium Noted on Admission (n=83)

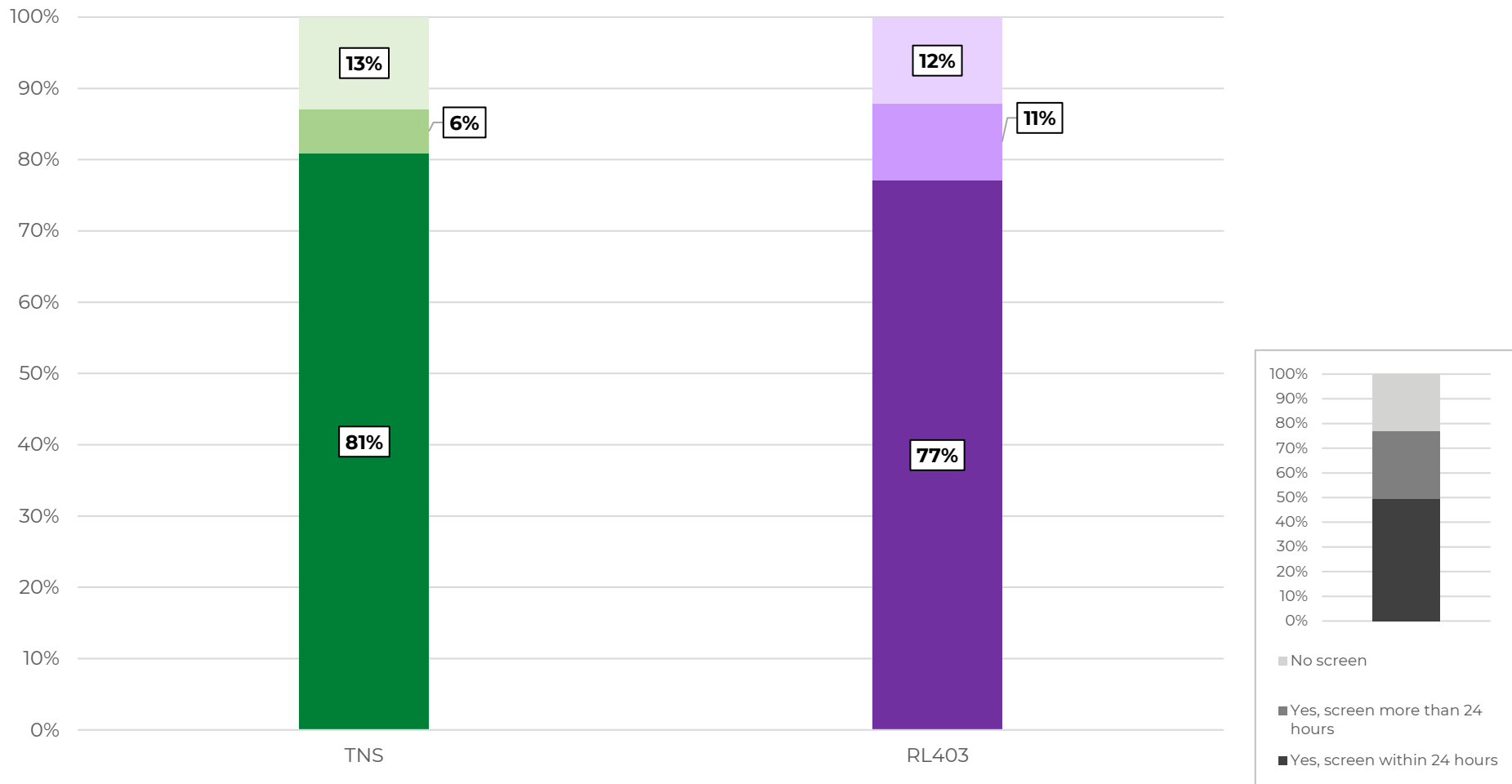


Figure 5: Delirium Screen Type Breakdown (n=83)

RL403 previous R4  
Any Initial Delirium Screen:  
**No Data**

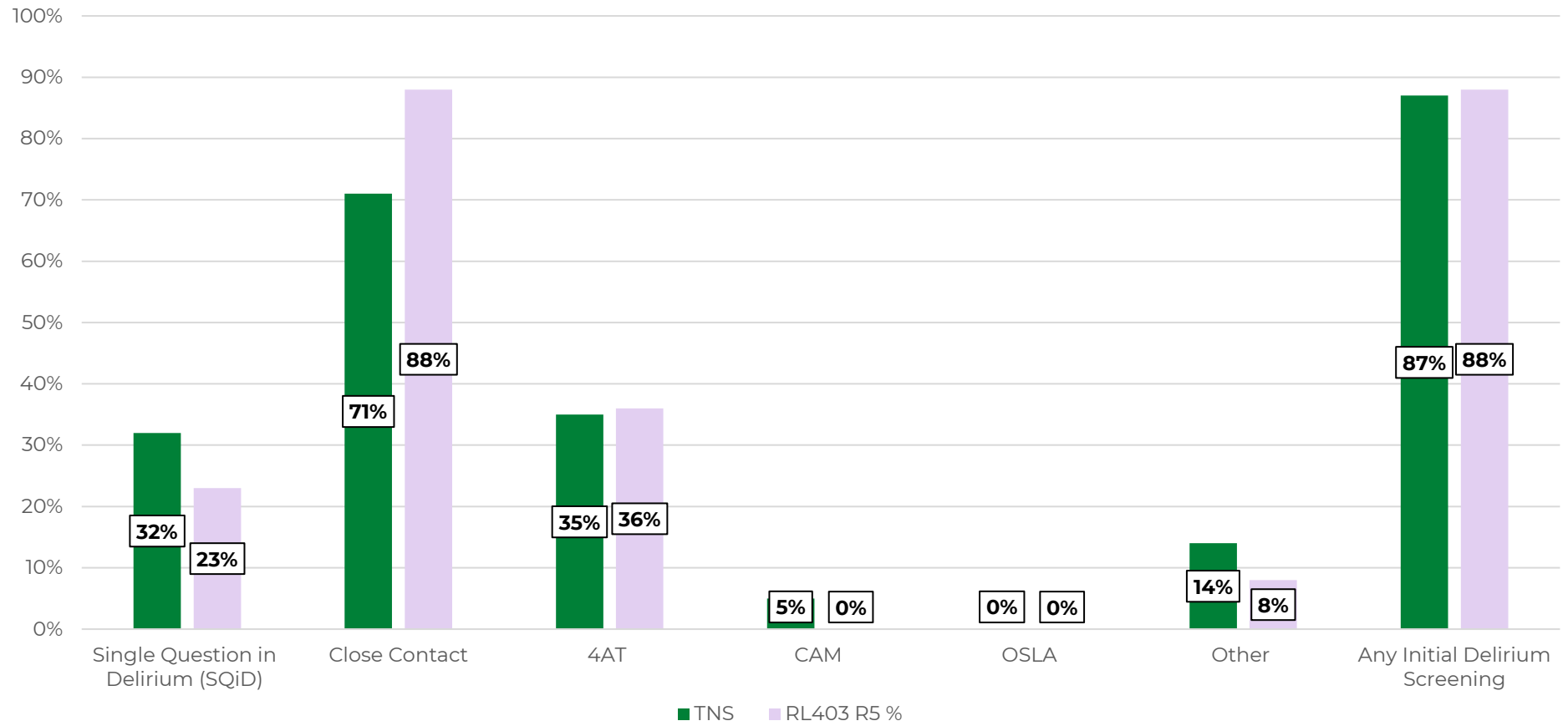


Table 2: Delirium Screening Date Range %

Delirium Screening Date Range %	National R5 % (N)	RL403 R5 %(N)
0-1 days	90.9% (8201)	90.4% (66)
2-3 days	5.5% (496)	8.2% (6)
4-6 days	1.8% (164)	0% (0)
7-13 days	0.9% (80)	0% (0)
14-20 days	0.3% (30)	0% (0)
21-27 days	0.2% (17)	0% (0)
28-34 days	0.2% (17)	1.4% (1)
35-69 days	0.2% (14)	0% (0)
70-140 days	0% (1)	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 (n=82)

Any Pain Assessment (excluding NA)	National R5 %	RL403 R5 %
Assessment within 24 hours	85%	88%
Assessment more than 24 hours	7%	11%
No pain assessment	8%	1%

RL403 previous R4  
Any Pain Assessment:  
**No Data**

Figure 6: Pain Assessment Tool Breakdown (n=81)

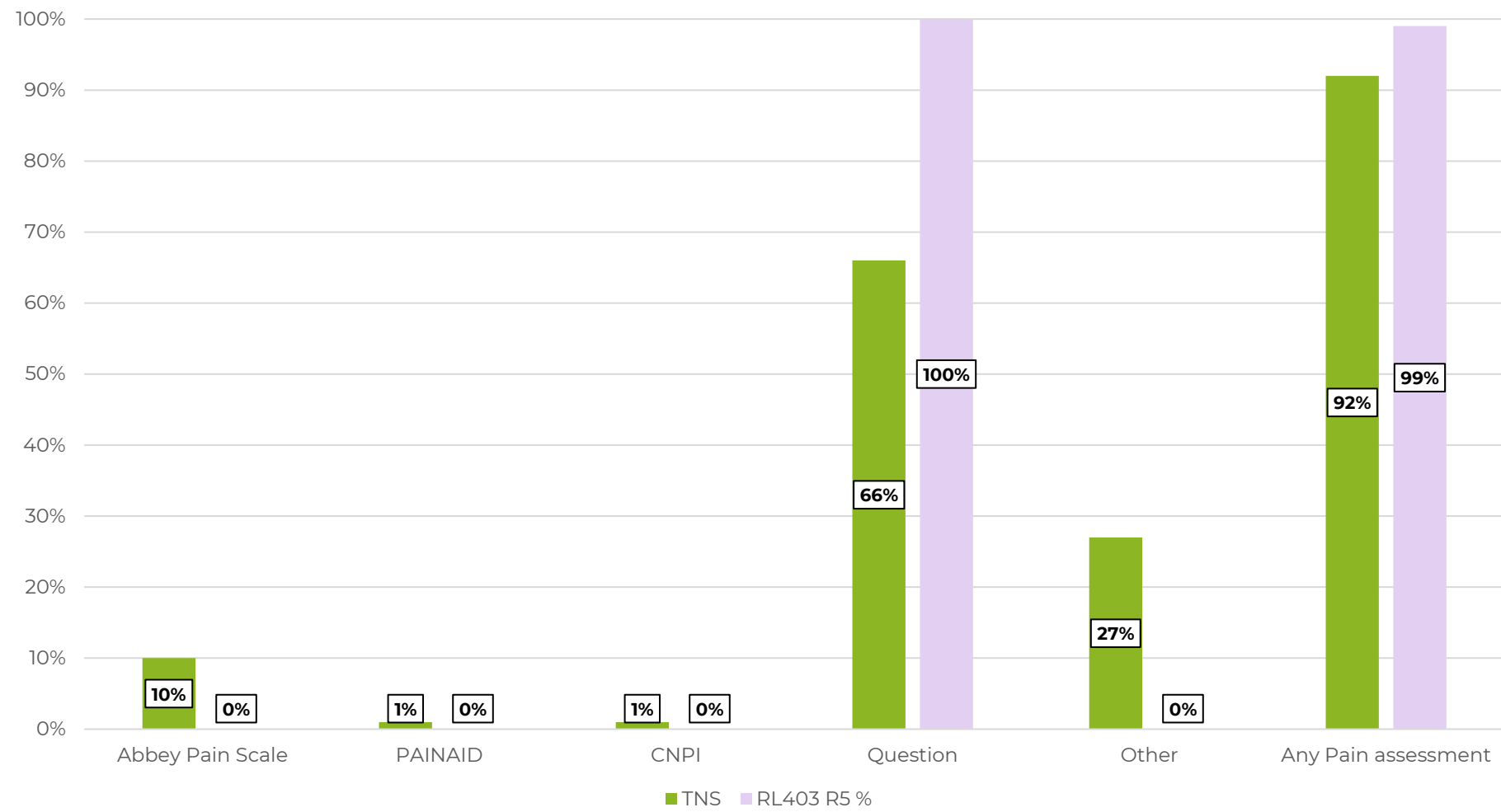


Table 4: Pain Assessment Date Range

Pain Assessment Date Range	National R5 % (N)	RL403 R5 %(N)
0-1 days	94.2% (9069)	91.4% (74)
2-3 days	3.7% (357)	6.2% (5)
4-6 days	1% (93)	0% (0)
7-13 days	0.5% (49)	1.2% (1)
14-20 days	0.2% (17)	0% (0)
21-27 days	0.1% (9)	0% (0)
28-34 days	0.1% (12)	1.2% (1)
35-69 days	0.1% (14)	0% (0)
70-140 days	0% (3)	0% (0)



Figure 7: Any Pain Reassessment (n=81)

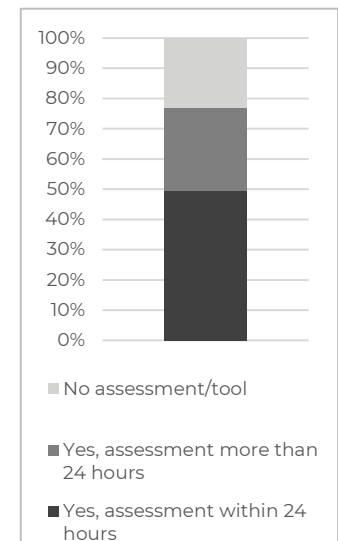
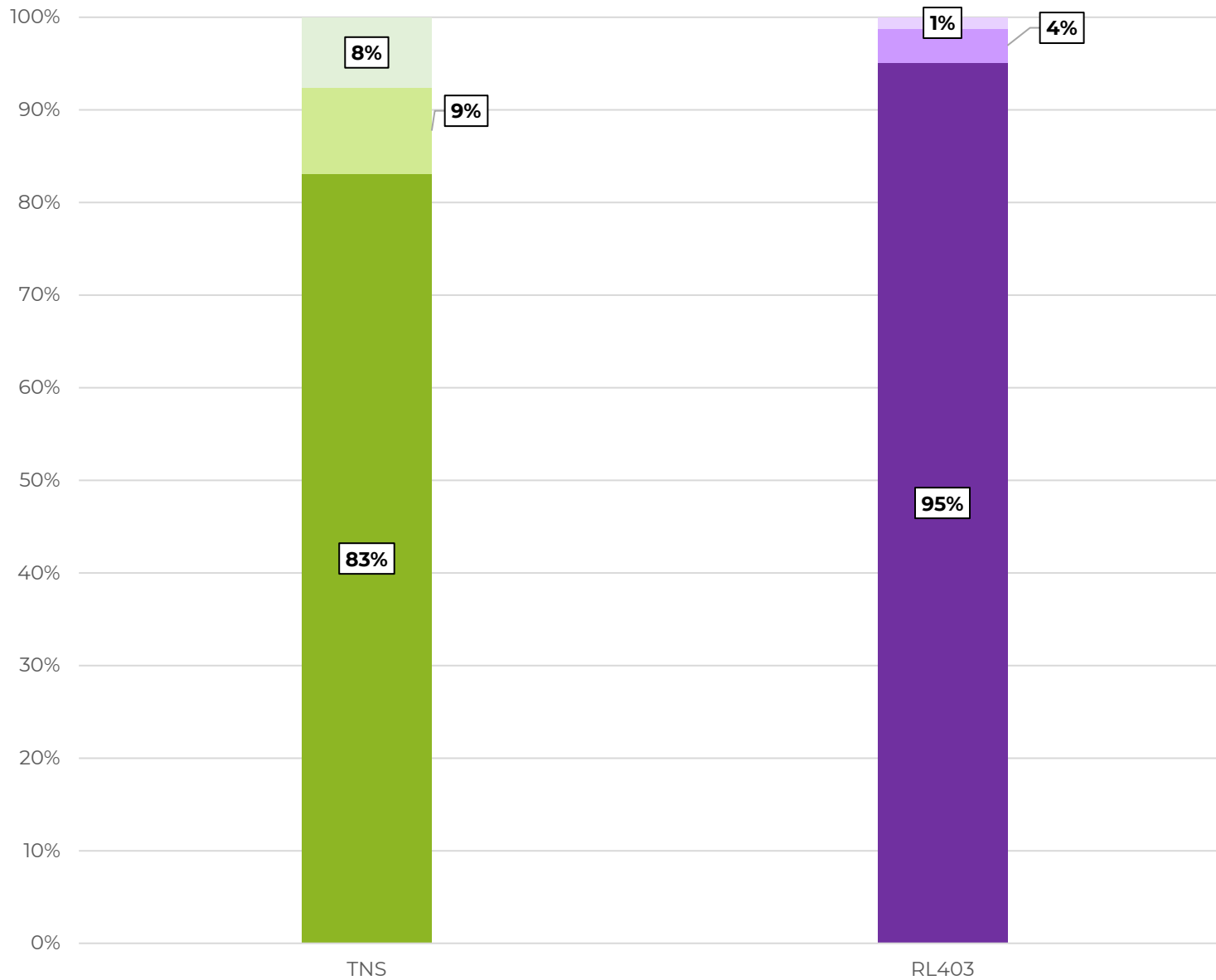


Figure 8: Pain Reassessment Tool Breakdown (n=80)

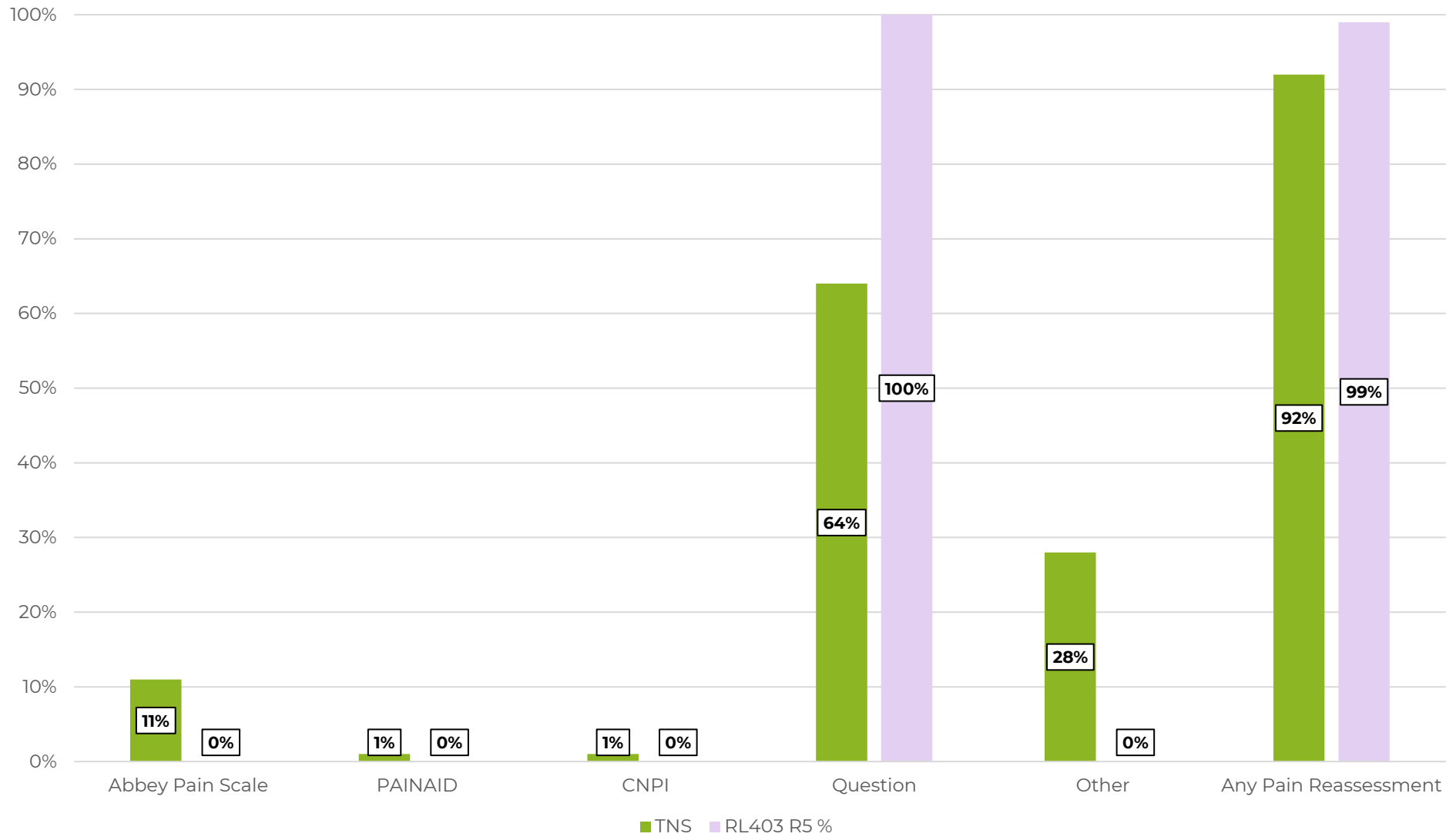


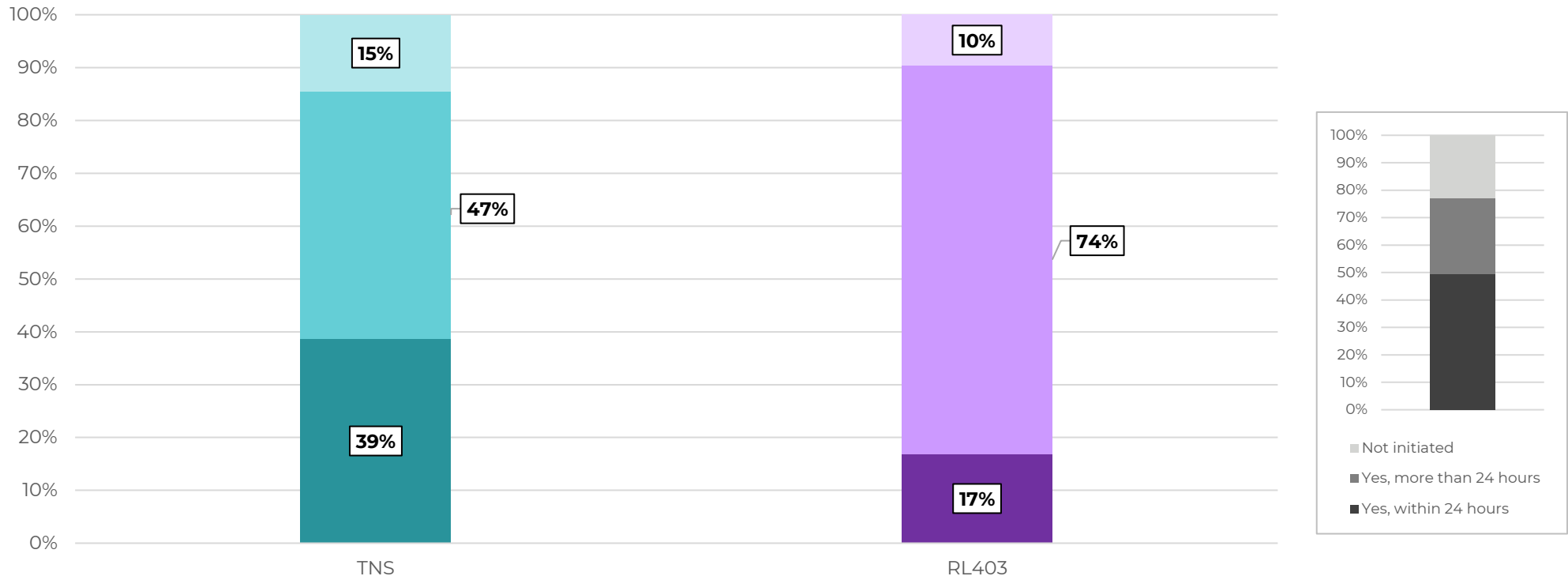
Table 5: Pain Reassessment Date Range

Pain Reassessment Date Range	National R5 % (N)	RL403 R5 % (N)
0-1 days	93% (8267)	100% (80)
2-3 days	4.9% (436)	0% (0)
4-6 days	1.3% (117)	0% (0)
7-13 days	0.5% (46)	0% (0)
14-20 days	0.1% (9)	0% (0)
21-27 days	0.1% (5)	0% (0)
28-34 days	0.1% (8)	0% (0)
35-69 days	0% (1)	0% (0)
70-140 days	0% (1)	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 9: Discharge Planning Initiated (n=83)



### Reasons Plan Not Initiated and Outlier Analysis

When these responses are taken into account as N/A, discharge planning within 24 hours rises to 83.5% (4084/4891) nationally. At a local level this was the result used for outlier analysis (see post outlier dataset [Appendix IV](#))

Figure 10: Expected Date of Discharge Recorded (n=83)

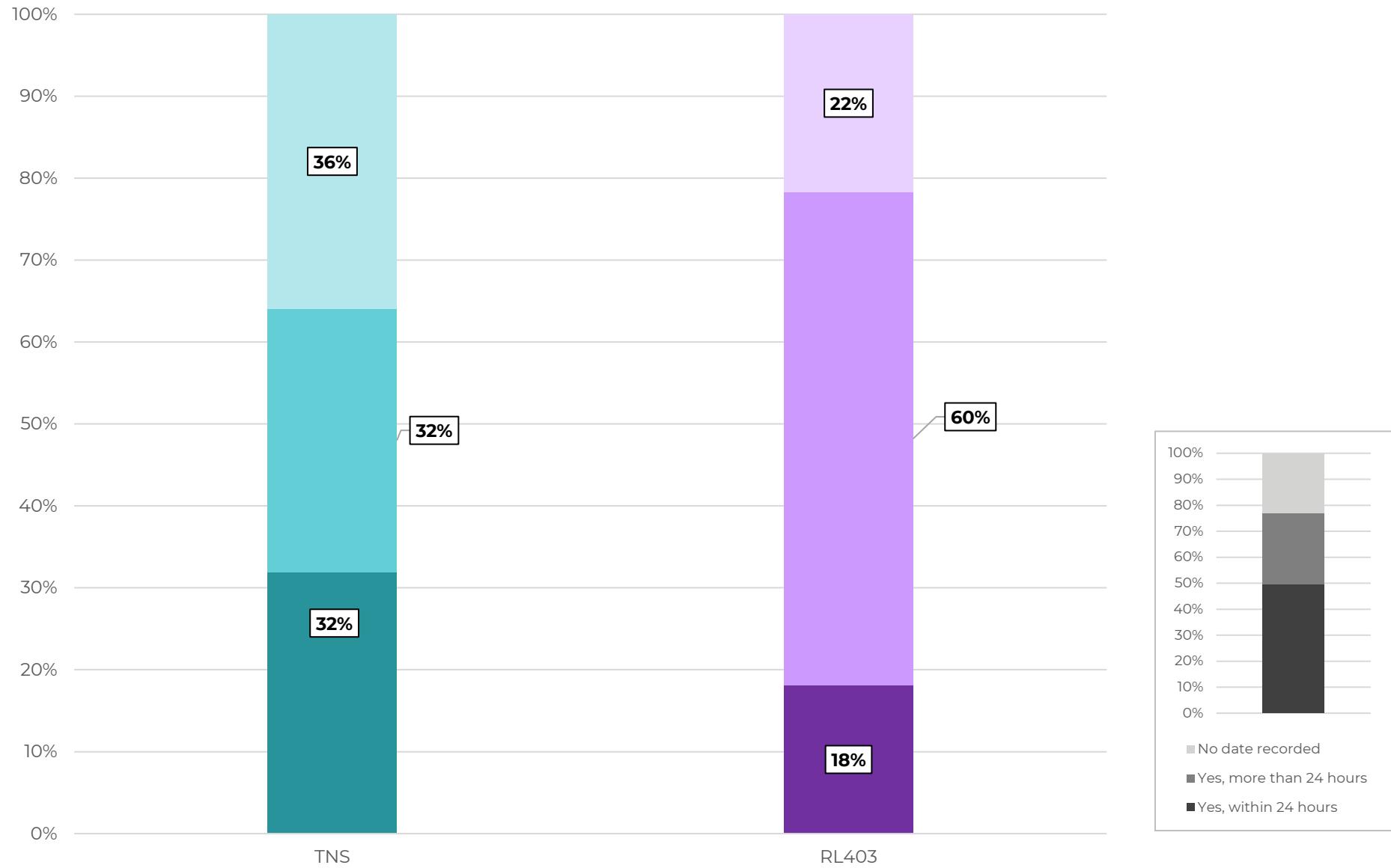


Figure 11: Named member of staff (n=83)

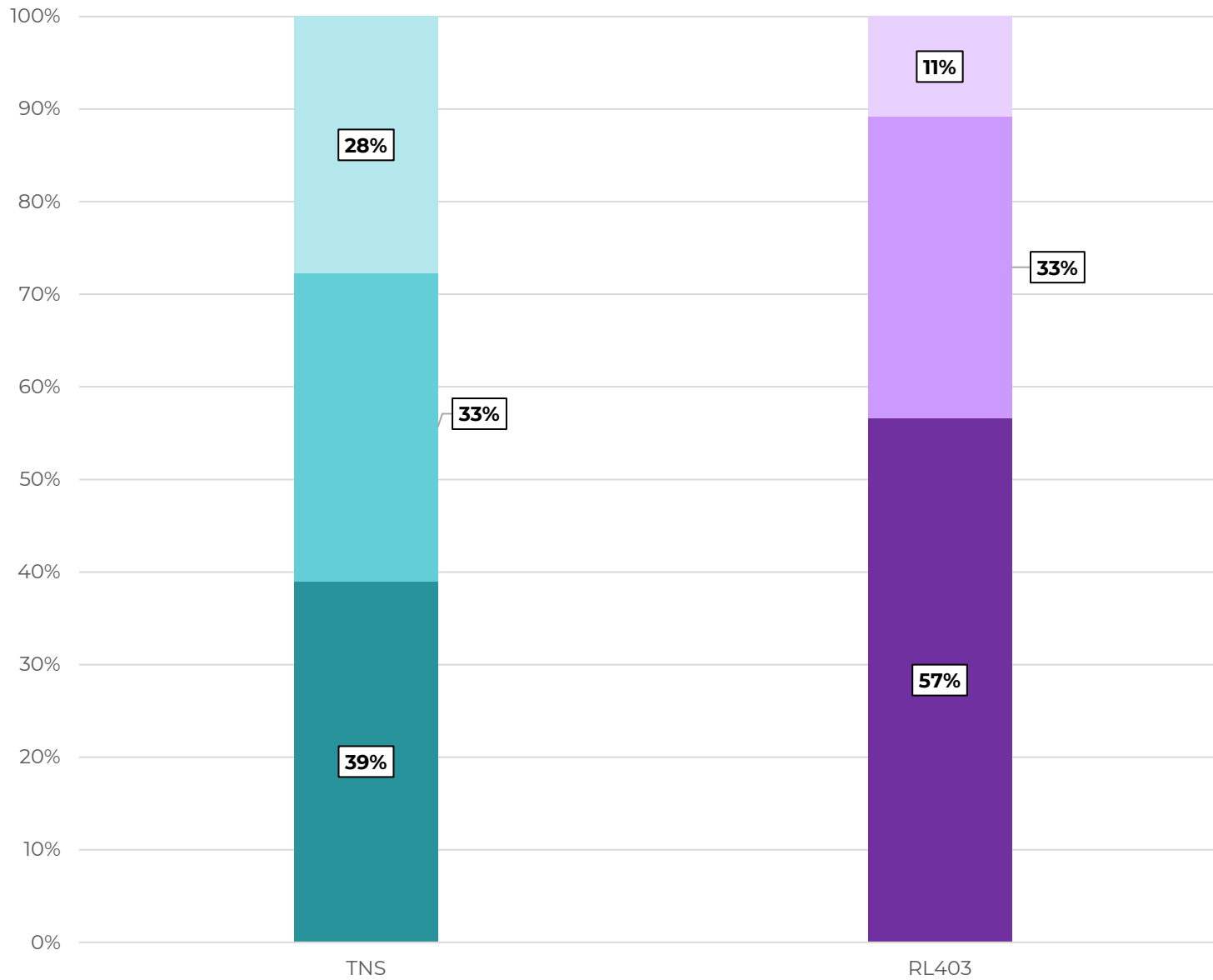
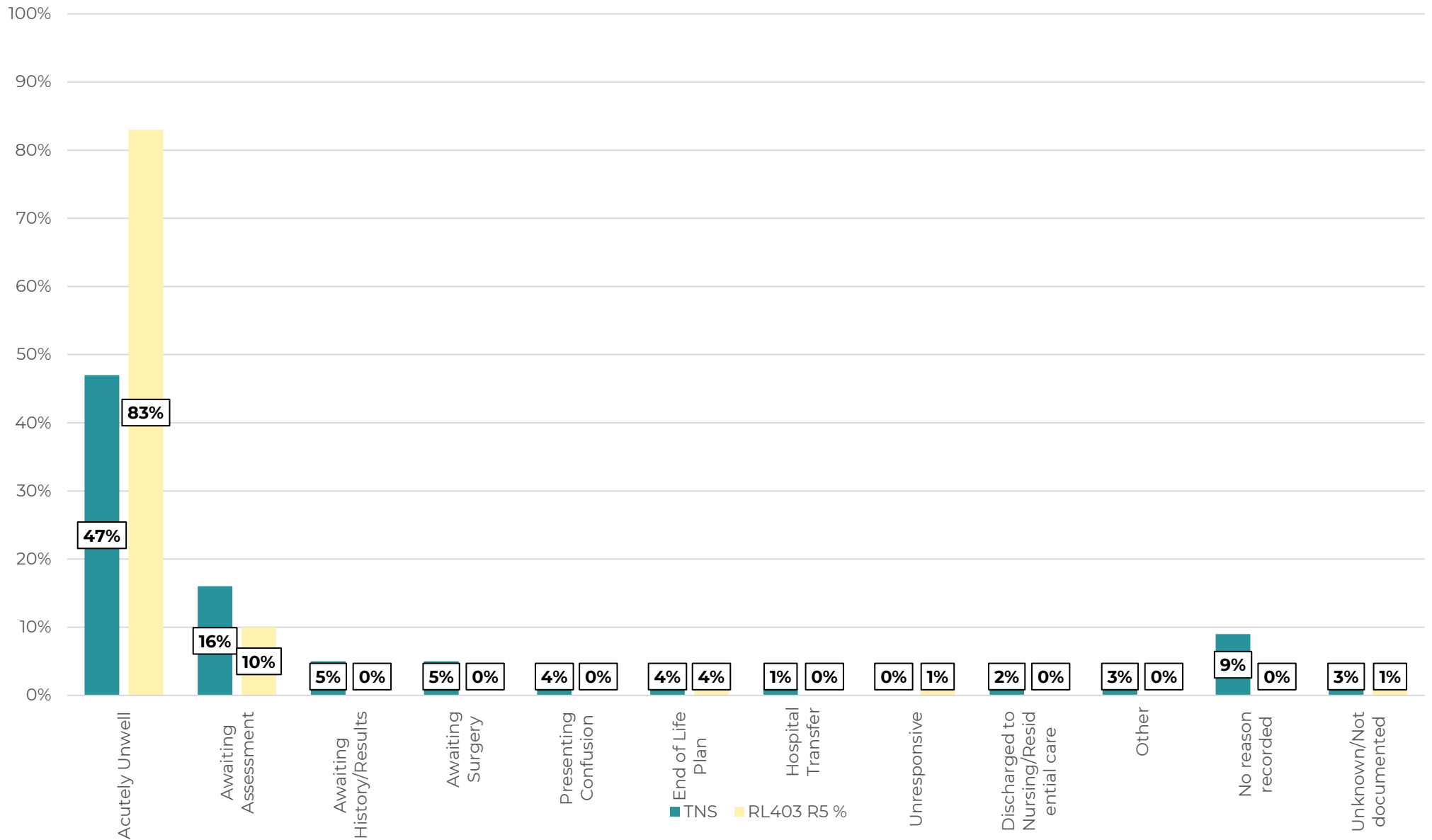


Figure 12: Reasons discharge planning was not initiated within 24 hours of admission (n=69)



## Discharge Information

**National R5  
Median Length of Stay (days):**

**10**

**RL403 R5  
Median Length of Stay (days):**

**12**

**National R5  
Patients discharged by  
end of audit period:**

**86.4%**

**RL403 R5  
Patients discharged by  
end of audit period:**

**88%**

**National R5  
Patients were on the  
right ward:**

**92.5%**

**RL403 R5  
Patients were on the  
right ward:**

**98.8%**

**National R5  
Patients who received  
an end of life care plan:**

**80.6%**

**RL403 R5  
Patients who received  
an end of life care plan:**

**100%**

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



Figure 13: Length of Stay in Weeks (n=83)

As the sampling methodology changed between Rounds 4 and 5 we have not presented a comparison of Length of Stay between rounds.

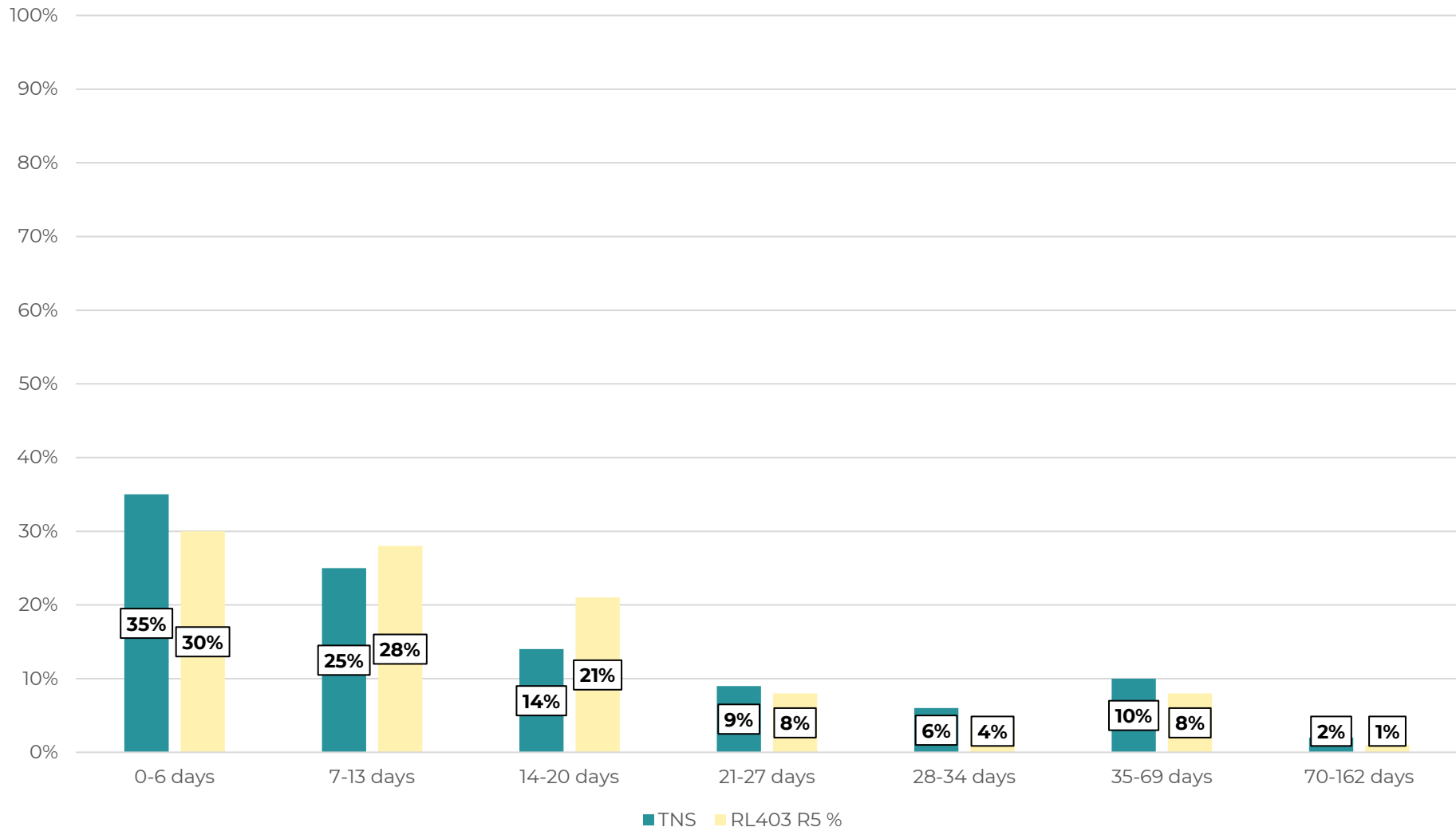
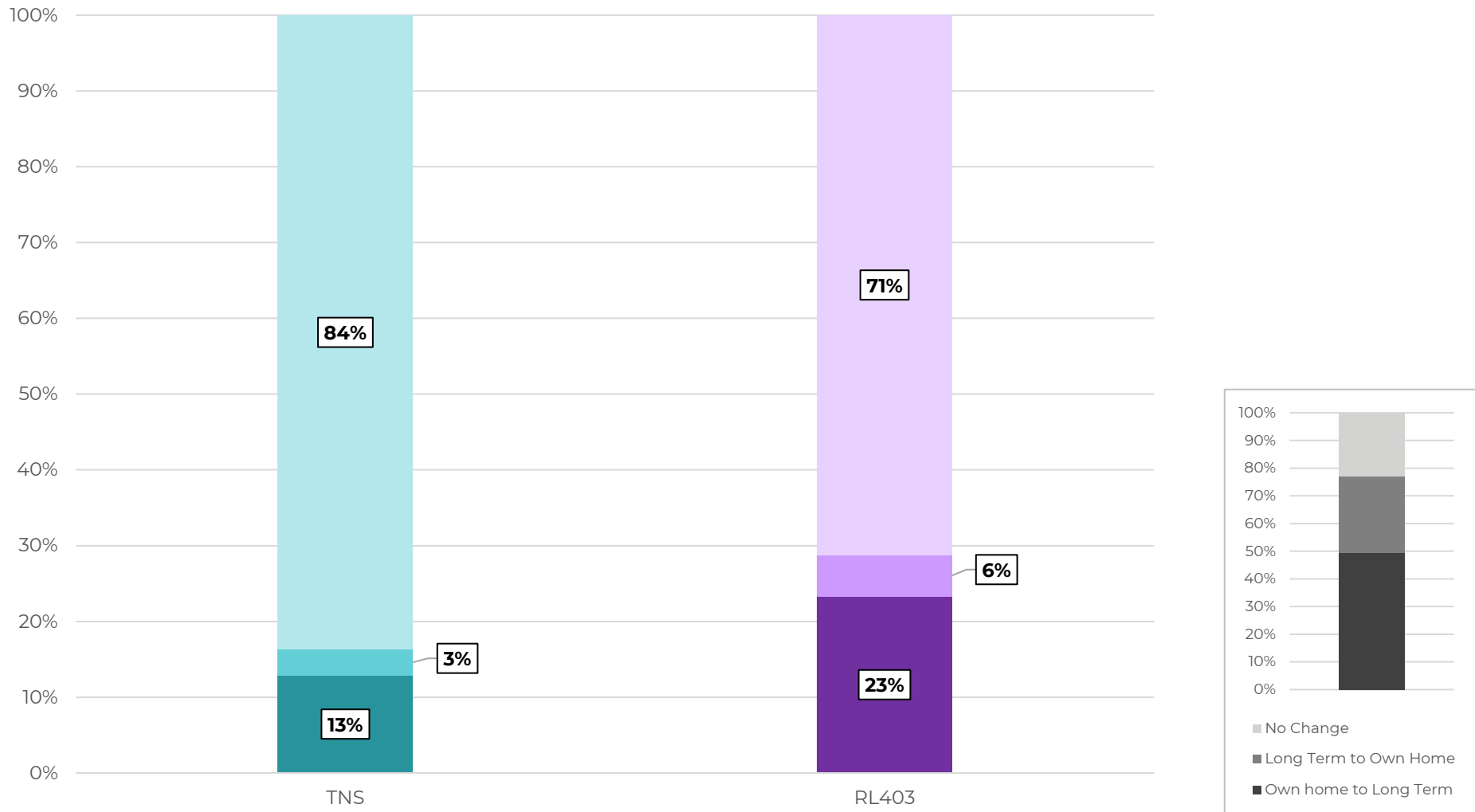


Figure 14: Change in Place of Care (n=73)

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.

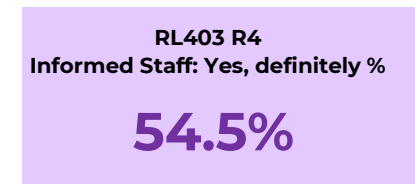


## Feedback from Carers

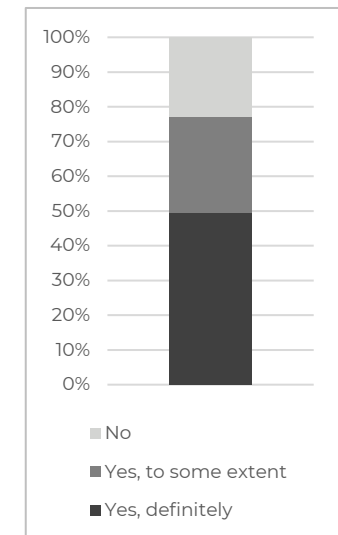
Figures below show a full breakdown of the carer questionnaire responses. Your Round 4 carer questionnaire results are shown above each graph. NB this data is only shown for sites with 10 or more carer questionnaires.

Carer ratings for overall quality of care and for communication can be found in [Appendix XI](#) of the national Report, and on your ADS poster on [CaseCapture](#).

Figure 15: Informed Staff (n=1)

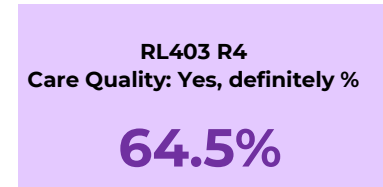


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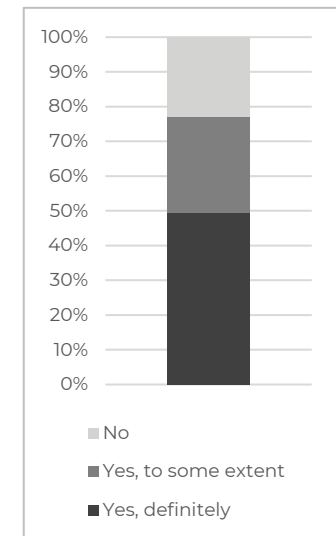


Do you feel that hospital staff were well informed and understood the needs of the person you look after?

Figure 16: Quality of care from staff (n=1)

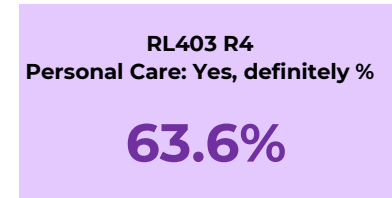


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Do you feel confident that hospital staff delivered high quality care that was appropriate to the needs of the person you look after?

Figure 17: Personal Care (n=1)

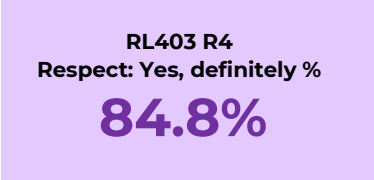


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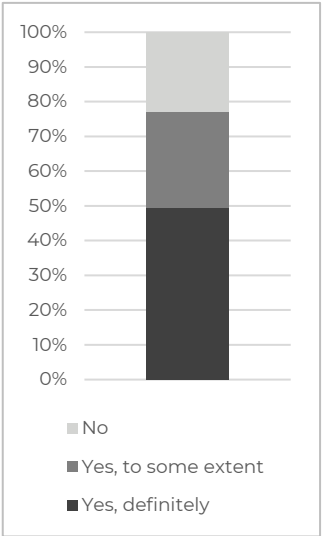


Was the person you look after given enough help with personal care from hospital staff? For example, eating, drinking, washing and using the toilet.

Figure 18: Respect (n=1)

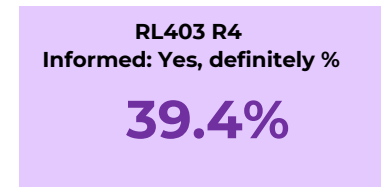


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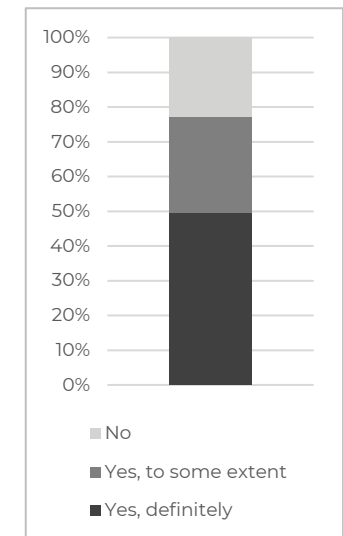


Was the person you look after treated with respect by hospital staff?

Figure 19: Informed about Care (n=1)

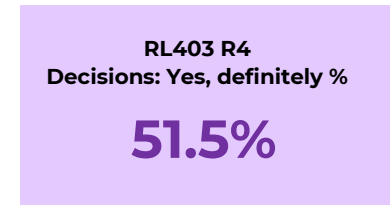


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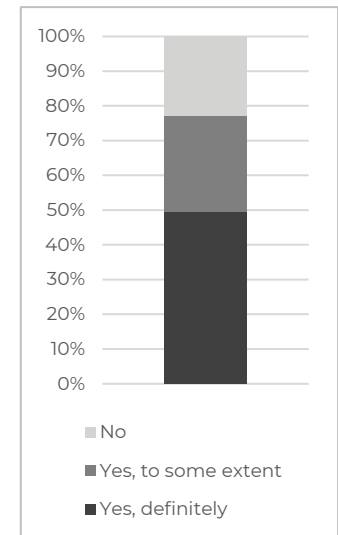


Were you (or the patient, where appropriate) kept clearly informed about their care and progress during the hospital stay?  
For example, about plans for treatment and discharge

Figure 20: Involved Decisions (n=1)



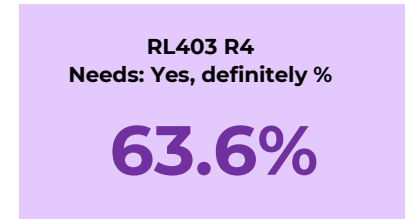
This data has been suppressed due to number of records. Please see appendices tables for full data



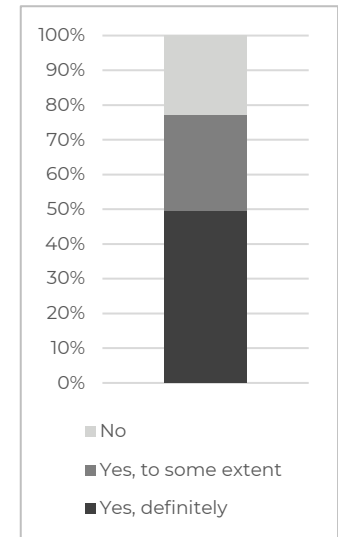
Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care?



Figure 21: Needs (n=1)



This data has been suppressed due to number of records. Please see appendices tables for full data

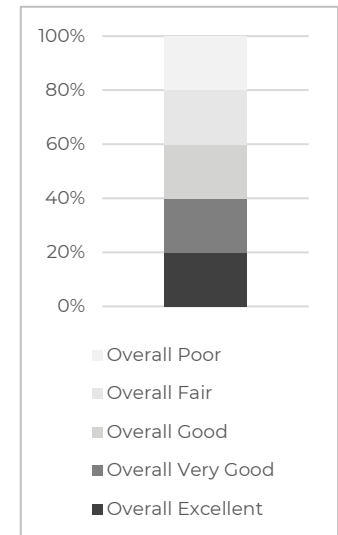


Did hospital staff ask you about the needs of the person you look after to help plan their care?

Figure 22: Overall Carer Rating (n=1)

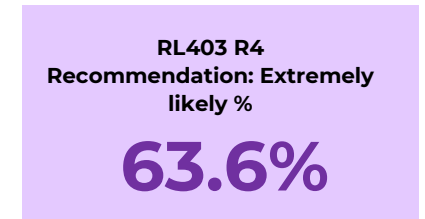


This data has been suppressed due to number of records. Please see appendices tables for full data

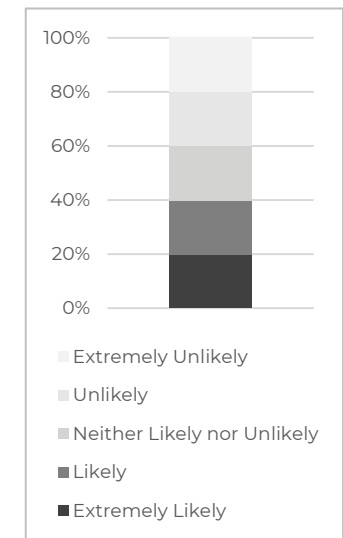


Overall, how would you rate the care received by the person you look after during the hospital stay?

Figure 23: Recommend (n=1)



This data has been suppressed due to number of records. Please see appendices tables for full data

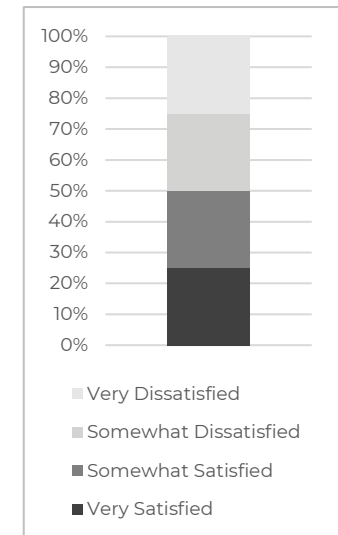


How likely would you be to recommend the service to friends and family if they needed similar care or treatment?

Figure 24: Carer Satisfaction (n=1)



This data has been suppressed due to number of records. Please see appendices tables for full data



Overall, how satisfied are you with the support you have received from this hospital to help you in your role as a carer?

## Carer Comments

Carers were able to make comments on the questionnaire. The table below shows a summary overview of comments by theme sorted by positive/ negative. (Sites were returned all their comments with identifying details removed in January).

Your hospital received a total of **1** carer comments.

Table 6: Carer Comments by Category\*

*\*In Hospital Adverse Events can only have negative comments*

<b>Staff Training</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	2	0
Negative	39	0
<b>Treatment of Patients</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	198	0
Negative	154	0
<b>In-hospital Adverse Incidents</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Negative	11	0
<b>Communication</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	57	0
Negative	233	0

<b>Perceptions of Staff</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	307	0
Negative	51	0
<b>Staffing Levels</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	1	0
Negative	103	0
<b>Discharge/Care Transfer</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	9	0
Negative	68	0
<b>Environment</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	8	0
Negative	26	0
<b>Support for Carers</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>
Positive	30	0
Negative	16	0
<b>Overall/Other</b>	<b>National R5 (N)</b>	<b>RL403 R5 (N)</b>

Positive	111	1
Negative	30	0

## Appendices

### Appendix I: Casenote Audit

#### Information about the patient

NB: Sampling method differed between R4 and R5, including sample size. Information from both datasets is shown and comparison should be made with caution.

† Excludes NA responses

#### Information about the patient

Age	National R5 % (N/D)	RL403 R5 % (N)	RL403 R4 % (N)
Min-65	<b>2% (304/14888)</b>	*% (*)	No Data
66-80	<b>27.3% (4060/14888)</b>	27.7% (23)	No Data
81-100	<b>70.4% (10480/14888)</b>	68.7% (57)	No Data
101-108	<b>0.3% (44/14888)</b>	0% (0)	No Data
Unknown	<b>0% (0/14888)</b>	0% (0)	No Data
Minimum	<b>30</b>	51	No Data
Maximum	<b>106</b>	99	No Data
Mean	<b>84</b>	82.6	No Data



<b>Sex</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Female	<b>54.9% (8172/14888)</b>	50.6% (42)	New to R5
Male	<b>42.9% (6383/14888)</b>	49.4% (41)	New to R5
Unknown/Not documented	<b>2.2% (333/14888)</b>	0% (0)	New to R5
<b>Gender</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Female	<b>51.6% (7675/14888)</b>	50.6% (42)	No Data
Male	<b>40.3% (6003/14888)</b>	49.4% (41)	No Data
Non-binary/Other	<b>0% (0/14888)</b>	0% (0)	New to R5
Unknown/Not documented	<b>8.1% (1210/14888)</b>	0% (0)	New to R5
<b>Ethnicity</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
White	<b>83.9% (12485/14888)</b>	88% (73)	No Data
Asian/Asian British	<b>2.5% (379/14888)</b>	*% (*)	No Data
Black/ Black British	<b>2.1% (311/14888)</b>	*% (*)	No Data

Mixed	<b>0.7% (100/14888)</b>	*% (*)	No Data
Other	<b>1.1% (162/14888)</b>	0% (0)	No Data
Unknown/Not documented	<b>9.7% (1451/14888)</b>	0% (0)	No Data
<b>First Language</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
English	<b>75.0% (11161/14888)</b>	94% (78)	No Data
Welsh	<b>0.5% (71/14888)</b>	0% (0)	No Data
Other European Language	<b>0.7% (106/14888)</b>	*% (*)	No Data
Any Asian Language	<b>1.4% (208/14888)</b>	*% (*)	No Data
Other	<b>0.5% (67/14888)</b>	0% (0)	No Data
Unknown/Not Documented	<b>22% (3275/14888)</b>	0% (0)	No Data
<b>Primary diagnosis/cause of admission</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Cancer	<b>0.3% (42/14888)</b>	0% (0)	No Data
Cardiac/vascular/ chest pain	<b>4.4% (653/14888)</b>	8.4% (7)	No Data

Dehydration/ nutrition	<b>1.4% (215/14888)</b>	0% (0)	No Data
Delirium/ confusion/ cognitive impairment	<b>10.8% (1614/14888)</b>	8.4% (7)	No Data
Dementia	<b>1% (144/14888)</b>	0% (0)	No Data
Endocrine/ metabolic condition	<b>1% (144/14888)</b>	0% (0)	No Data
Fall	<b>23.2% (755/14888)</b>	27.7% (23)	No Data
Gastrointestinal	<b>5.1% (755/14888)</b>	*% (*)	No Data
Haematology related	<b>0.6% (90/14888)</b>	0% (0)	No Data
Hepatology/liver related	<b>0.2% (31/14888)</b>	0% (0)	No Data
Hip fracture/ dislocation	<b>3.5% (514/14888)</b>	*% (*)	No Data
Other Fracture/ dislocation	<b>1.2% (186/14888)</b>	0% (0)	No Data
Impaired consciousness/ reduced responsiveness/ drowsiness or dizziness	<b>2.4% (359/14888)</b>	8.4% (7)	No Data
Neurological problem/seizure/ head injury/ headache	<b>2.8% (415/14888)</b>	*% (*)	No Data
Psychiatric/ psychological/ behavioural problems	<b>0.5% (76/14888)</b>	0% (0)	No Data

Respiratory	<b>12.9% (1927/14888)</b>	8.4% (7)	No Data
Sepsis	<b>4.2% (632/14888)</b>	*% (*)	No Data
Skin problems/ lacerations/lesions	<b>1% (148/14888)</b>	*% (*)	No Data
Stroke or related	<b>2.4% (354/14888)</b>	*% (*)	No Data
Surgical/non-surgical procedure	<b>1% (152/14888)</b>	0% (0)	No Data
Urinary/ urogenital/renal	<b>5.7% (843/14888)</b>	*% (*)	No Data
Unable to cope/ frailty	<b>1.9% (278/14888)</b>	10.8% (9)	No Data
Other – please specify	<b>11.5% (1717/14888)</b>	*% (*)	No Data
Unknown/Not documented	<b>1% (152/14888)</b>	0% (0)	No Data
<b>Elective or emergency admission</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Elective	<b>0.9% (140/14888)</b>	*% (*)	New to R5
Emergency	<b>99.1% (14748/14888)</b>	98.8% (82)	New to R5
<b>Was delirium noted as part of the admitting condition?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>

No	<b>66.3%</b> <b>(9868/14888)</b>	83.1% (69)	New to R5
Yes	<b>33.7%</b> <b>(5020/14888)</b>	16.9% (14)	New to R5
<b>Dementia status</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Known dementia	<b>74.6%</b> <b>(11100/14888)</b>	86.7% (72)	New to R5
Probably dementia/ Concerns about cognition	<b>25.4%</b> <b>(3788/14888)</b>	13.3% (11)	New to R5
<b>What is the subtype of dementia?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Alzheimer's Disease (F00, G30)	<b>33.2% (3683/11100)</b>	22.2% (16)	New to R5
Dementia in Alzheimer's disease, atypical or mixed type (F00.2)	<b>8.6% (956/11100)</b>	27.8% (20)	New to R5
Vascular Dementia (F01)	<b>18.9% (2099/11100)</b>	33.3% (24)	New to R5
Dementia with Lewy bodies (G31.9)	<b>2.5% (282/11100)</b>	*% (*)	New to R5
Fronto-temporal Dementia (G31.8)	<b>0.7% (79/11100)</b>	0% (0)	New to R5
Dementia in Parkinson's disease (F02.3)	<b>2.2% (248/11100)</b>	*% (*)	New to R5
Delirium due to known psychological condition, including delirium superimposed on dementia	<b>0.5% (51/11100)</b>	*% (*)	New to R5

Unspecified dementia (F03)	<b>16.1 (1792/11100)</b>	*% (*)	New to R5
Dementia subtype Unknown/not documented	<b>17.2% (1910/11100)</b>	*% (*)	New to R5
<b>Place of care before admission</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Own home	<b>67.5% (10045/14887)</b>	54.2% (45)	No Data
Respite care	<b>0.4% (60/14887)</b>	*% (*)	No Data
Rehabilitation ward	<b>0.2% (32/14887)</b>	0% (0)	No Data
Psychiatric ward	<b>0.3% (43/14887)</b>	0% (0)	No Data
Carer's home	<b>1.9% (290/14887)</b>	*% (*)	No Data
Intermediate/ community rehabilitation care	<b>0.4% (55/14887)</b>	0% (0)	No Data
Residential care	<b>15.7% (2334/14887)</b>	41% (34)	No Data
Nursing home	<b>13% (1940/14887)</b>	*% (*)	No Data
Palliative care	<b>0% (2/14887)</b>	0% (0)	No Data

Transfer to another hospital	<b>0.3% (45/14887)</b>	0% (0)	No Data
Long stay care	<b>0.3% (41/14887)</b>	0% (0)	No Data
<b>Ward</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
Care of the elderly	<b>30.2% (4490/14888)</b>	12% (10)	No Data
Oncology	<b>0.1% (20/14888)</b>	0% (0)	No Data
Cardiac	<b>1.8% (267/14888)</b>	*% (*)	No Data
Orthopaedics	<b>6% (891/14888)</b>	14.5% (12)	No Data
Critical care	<b>0.3% (43/14888)</b>	0% (0)	No Data
Stroke	<b>2.8% (417/14888)</b>	*% (*)	No Data
General medical	<b>27.3% (4066/14888)</b>	43.4% (36)	No Data
Surgical	<b>5.4% (804/14888)</b>	*% (*)	No Data
Nephrology	<b>0.5% (69/14888)</b>	*% (*)	No Data
Other medical	<b>13.1% (1946/14888)</b>	14.5% (12)	No Data
Obstetrics/ gynaecology	<b>0.2% (37/14888)</b>	0% (0)	No Data

Other	<b>12.3% (1836/14888)</b>	*% (*)	No Data
Unknown/Not documented	<b>0% (2/14888)</b>	0% (0)	New to R5



## Delirium Screening and Assessment

Delirium Screening Assessments	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Single Question in Delirium (SQiD)	<b>32.4% (3449/10642)</b>	22.9% (19/83)	No Data
History taken from someone who knows the patient well in which they were asked about any recent changes in cognition/ behaviour	<b>70.8% (7539/10642)</b>	88% (73/83)	No Data
4AT	<b>35% (3730 /10642)</b>	36.1% (30/83)	No Data
CAM	<b>5.3% (563/10642)</b>	0% (0/83)	No Data
OSLA	<b>0.4% (47/10642)</b>	0% (0/83)	New to R5
Other	<b>13.6% (1446/10642)</b>	8.4% (7/83)	No Data
Any Initial Delirium Screen	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes, within 24 hours	<b>80.9% (8605/10642)</b>	77.1% (64/83)	New to R5
Yes, more than 24 hours	<b>6.2% (664/10642)</b>	10.8% (9/83)	New to R5
No	<b>12.9% (1373/10642)</b>	12% (10/83)	New to R5
Any Initial Delirium Screen	<b>87.1% (9269/10642)</b>	88% (73/83)	No Data

Days from admission to delirium screen	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
0-1 days	<b>90.9% (8201/9020)</b>	90.4% (66/73)	New to R5
2-3 days	<b>5.5% (496/9020)</b>	8.2% (6/73)	New to R5
4-6 days	<b>1.8% (164/9020)</b>	0% (0/73)	New to R5
7-13 days	<b>0.9% (80/9020)</b>	0% (0/73)	New to R5
14-20 days	<b>0.3% (30/9020)</b>	0% (0/73)	New to R5
21-27 days	<b>0.2% (17/9020)</b>	0% (0/73)	New to R5
28-34 days	<b>0.2% (17/9020)</b>	1.4% (1/73)	New to R5
35-69 days	<b>0.2% (14/9020)</b>	0% (0/73)	New to R5
70-140 days	<b>0% (1/9020)</b>	0% (0/73)	New to R5
Delirium assessment	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes, delirium may be present	<b>48.1% (4342/9032)</b>	43.8% (32/73)	No Data
No evidence of delirium	<b>51.8% (4677/9032)</b>	56.2% (41/73)	No Data

<b>Delirium Confirmed</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, the patient was diagnosed with delirium	<b>71.5% (3106/4342)</b>	65.6% (21/32)	No Data
No, it was confirmed the patient did not have delirium	<b>15.2% (661/4342)</b>	15.6% (5/32)	New to R5
No further investigation took place	<b>13.2% (575/4342)</b>	18.8% (6/32)	New to R5
<b>Delirium Management Plan</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes	<b>92.5% (2872/3106)</b>	95.2% (20/21)	New to R5
No	<b>7.5% (234/3106)</b>	4.8% (1/21)	New to R5
<b>Delirium Care Plan</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes	<b>50% (1552/3106)</b>	95.2% (20/21)	New to R5
No	<b>50% (1554/3106)</b>	4.8% (1/21)	New to R5

## Pain Assessment

Pain Assessment	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes, within 24 hours	<b>85.1% (8936/10505)</b>	87.8% (72/82)	New to R5
Yes, more than 24 hours	<b>6.5% (687/10505)</b>	11% (9/82)	New to R5
No	<b>8.4% (882/10505)</b>	1.2% (1/82)	New to R5
Yes	<b>91.6% (9623/10505)</b>	98.8% (81/82)	No Data
Days from admission to pain assessment	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
0-1 days	<b>94.2% (9069/9623)</b>	91.4% (74/81)	New to R5
2-3 days	<b>3.7% (357/9623)</b>	6.2% (5/81)	New to R5
4-6 days	<b>1% (93/9623)</b>	0% (0/81)	New to R5
7-13 days	<b>0.5% (49/9623)</b>	1.2% (1/81)	New to R5
14-20 days	<b>0.2% (17/9623)</b>	0% (0/81)	New to R5
21-27 days	<b>0.1% (9/9623)</b>	0% (0/81)	New to R5

28-34 days	<b>0.1% (12/9623)</b>	1.2% (1/81)	New to R5
35-69 days	<b>0.1% (14/9623)</b>	0% (0/81)	New to R5
70-140 days	<b>0% (3/9623)</b>	0% (0/81)	New to R5
<b>Pain Assessment Tools Used</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
The Abbey Pain scale	<b>10.3% (991/9623)</b>	0% (0/81)	New to R5
Pain assessment in advanced dementia (PAINAID)	<b>1.3% (125/9623)</b>	0% (0/81)	New to R5
Checklist of nonverbal pain indicators (CNPI) observation score	<b>1% (98/9623)</b>	0% (0/81)	New to R5
Question only	<b>65.9% (6338/9623)</b>	100% (81/81)	New to R5
None	<b>0% (3/9623)</b>	0% (0/81)	New to R5
Other	<b>26.6% (2561/9623)</b>	0% (0/81)	New to R5
Patients who had questioning as their only pain assessment	<b>61.1% (5580/9623)</b>	100% (81/81)	New to R5
<b>Pain Reassessment</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, within 24 hours	<b>83.1% (7995/9623)</b>	95.1% (77/81)	New to R5

Yes, more than 24 hours	<b>9.3% (895/9623)</b>	3.7% (3/81)	New to R5
No	<b>7.6% (733/9623)</b>	1.2% (1/81)	New to R5
Yes	<b>92.4% (8890/9623)</b>	98.8% (80/81)	New to R5
<b>Days from first pain assessment to pain reassessment</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
0-1 days	<b>93% (8267/8890)</b>	100% (80/80)	New to R5
2-3 days	<b>4.9% (436/8890)</b>	0% (0/80)	New to R5
4-6 days	<b>1.3% (117/8890)</b>	0% (0/80)	New to R5
7-13 days	<b>0.5% (46/8890)</b>	0% (0/80)	New to R5
14-20 days	<b>0.1% (9/8890)</b>	0% (0/80)	New to R5
21-27 days	<b>0.1% (5/8890)</b>	0% (0/80)	New to R5
28-34 days	<b>0.1% (8/8890)</b>	0% (0/80)	New to R5
35-69 days	<b>0% (0/8890)</b>	0% (0/80)	New to R5
70-140 days	<b>0% (1/8890)</b>	0% (0/80)	New to R5

<b>Pain Reassessment Tools Used</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
The Abbey Pain scale	<b>11.1% (987/8890)</b>	0% (0/80)	New to R5
Pain assessment in advanced dementia (PAINAID)	<b>1% (91/8890)</b>	0% (0/80)	New to R5
Checklist of nonverbal pain indicators (CNPI) observation score	<b>0.8% (68/8890)</b>	0% (0/80)	New to R5
Question only	<b>64.1% (5697/8890)</b>	100% (80/80)	New to R5
None	<b>0% (0/8890)</b>	0% (0/80)	New to R5
Other	<b>28.2% (2505/8890)</b>	0% (0/80)	New to R5
Patients who had questioning as their only repeat pain assessment	<b>59.5% (5288/8890)</b>	100% (80/80)	New to R5

## Discharge Planning

Were the required actions to prepare for discharge identified?	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes, within 24 hours of admission	<b>38.7% (4118/10642)</b>	16.9% (14/83)	No Data
Yes, more than 24 hours after admission	<b>46.8% (4981/10642)</b>	73.5% (61/83)	New to R5
No	<b>14.5% (1541/10642)</b>	9.6% (8/83)	New to R5
Yes (combined)	<b>85.5% (9099/10642)</b>	90.4% (75/83)	New to R5
Expected date of discharge been recorded	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes, within 24 hours of admission	<b>31.9% (3391/10642)</b>	18.1% (15/83)	New to R5
Yes, more than 24 hours after admission	<b>32.2% (3427/10642)</b>	60.2% (50/83)	New to R5
No	<b>35.9% (3822/10642)</b>	21.7% (18/83)	New to R5
Yes (combined)	<b>64.1% (6818/10642)</b>	78.3% (65/83)	New to R5
Days from admission to discharge plan	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
0-1 days	<b>48.6% (4423/9097)</b>	37.3% (28/75)	New to R5



2-3 days	<b>22.1% (2007/9097)</b>	38.7% (29/75)	New to R5
4-6 days	<b>14.1% (1286/9097)</b>	10.7% (8/75)	New to R5
7-13 days	<b>9.8% (893/9097)</b>	8% (6/75)	New to R5
14-20 days	<b>2.9% (264/9097)</b>	2.7% (2/75)	New to R5
21-27 days	<b>1.2% (106/9097)</b>	1.3% (1/75)	New to R5
28-34 days	<b>0.7% (65/9097)</b>	1.3% (1/75)	New to R5
35-69 days	<b>0.5% (50/9097)</b>	0% (0/75)	New to R5
70-140 days	<b>0% (3/9097)</b>	0% (0/75)	New to R5
<b>Was a named member of staff (nurse/consultant/discharge coordinator) or named team responsible clearly identified to coordinate discharge?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, within 24 hours of admission	<b>39% (4152/10642)</b>	56.6% (47/83)	New to R5
Yes, more than 24 hours after admission	<b>33.2% (3538/10642)</b>	32.5% (27/83)	New to R5
No	<b>27.7% (2949/10642)</b>	10.8% (9/83)	New to R5
Yes (combined)	<b>72.2% (7690/10642)</b>	89.2% (74/83)	No Data

<b>If the discharge planning was not initiated within 24 hours of admission, please select the recorded reason why?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Patient acutely unwell	<b>46.9% (3067/6540)</b>	82.6% (57/69)	No Data
Patient awaiting assessment	<b>15.8 (1035/6540)</b>	10.1% (7/69)	No Data
Patient awaiting history/results	<b>4.9% (320/6540)</b>	0% (0/69)	No Data
Patient awaiting surgery	<b>5.4% (355/6540)</b>	0% (0/69)	No Data
Patient presenting confusion	<b>3.9% (256/6540)</b>	0% (0/69)	No Data
Patient on end of life plan	<b>4.4% (288/6540)</b>	4.3% (3/69)	No Data
Patient transferred to another hospital	<b>0.7% (43/6540)</b>	0% (0/69)	No Data
Patient unresponsive	<b>0.3% (20/6540)</b>	1.4% (1/69)	No Data
Patient being discharged to nursing/residential care	<b>2.1% (139/6540)</b>	0% (0/69)	No Data
Other (please specify)	<b>3.4% (224/6540)</b>	0% (0/69)	No Data
No reason recorded	<b>9.4% (612/6540)</b>	0% (0/69)	New to R5
Unknown/Not documented	<b>2.8% (181/6540)</b>	1.4% (1/69)	New to R5

## Discharge Information

Has the patient been discharged?	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Yes	<b>86.4% (9164/10601)</b>	88% (73/83)	New to R5
No, the patient died	<b>11.5% (1224/10601)</b>	12% (10/83)	New to R5
No, still an inpatient	<b>2% (213/10601)</b>	0% (0/83)	New to R5
Length of stay in days	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
Minimum	<b>0</b>	2	New to R5
Maximum	<b>153</b>	79	New to R5
Median	<b>10</b>	12	New to R5
Length of stay in weeks	National R5 % (N/D)	RL403 R5 % (N/D)	RL403 R4 % (N/D)
0-6 days	<b>34.7% (3589/10347)</b>	30.1% (25/83)	New to R5
7-13 days	<b>25.4% (2631/10347)</b>	27.7% (23/83)	New to R5
14-20 days	<b>13.8% (1426/10347)</b>	20.5% (17/83)	New to R5

21-27 days	<b>8.7% (898/10347)</b>	8.4% (7/83)	New to R5
28-34 days	<b>5.8% (595/10347)</b>	3.6% (3/83)	New to R5
35-69 days	<b>9.7% (999/10347)</b>	8.4% (7/83)	New to R5
70-162 days	<b>2% (209/10347)</b>	1.2% (1/83)	New to R5
<b>Place in which the person was living or receiving care after discharge</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Own home	<b>50.7% (4650/9164)</b>	37% (27/73)	New to R5
Respite care	<b>0.6% (55/9126)</b>	0% (0/73)	New to R5
Rehabilitation ward	<b>2.1% (192/9164)</b>	0% (0/73)	New to R5
Psychiatric ward	<b>0.5% (47/9164)</b>	0% (0/73)	New to R5
Carer's home	<b>1.7% (152/9164)</b>	0% (0/73)	New to R5
Intermediate/Community rehabilitation care	<b>3.3% (305/9126)</b>	1.4% (1/73)	New to R5
Residential care	<b>17.6% (1610/9164)</b>	28.8% (21/73)	New to R5
Nursing home	<b>20.9% (1914/9164)</b>	30.1% (22/73)	New to R5

Palliative care	<b>0.7% (68/9164)</b>	2.7% (2/73)	New to R5
Transfer to another hospital	<b>1.3% (120/9164)</b>	0% (0/73)	New to R5
Long stay care	<b>0.1% (13/9164)</b>	0% (0/73)	New to R5
Unknown/Not documented	<b>0.4% (38/9164)</b>	0% (0/73)	New to R5
<b>Change in place of care from admission to discharge</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Own home/short term to long term care	<b>12.9% (1156/8981)</b>	23.3% (17/73)	New to R5
Long term to own home/short term care	<b>3.4% (309/8981)</b>	5.5% (4/73)	New to R5
No change	<b>83.7% (7516/8981)</b>	71.2% (52/73)	New to R5
<b>At the point of discharge was the patient based on the right ward for the responsible consultant specialty?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes	<b>92% (9558/10388)</b>	98.8% (82/83)	New to R5
No	<b>7.6% (788/10388)</b>	1.2% (1/83)	New to R5
Unknown/Not documented	<b>0.4% (42/10388)</b>	0% (0/83)	New to R5

<b>(If still an inpatient) is the patient based on the right ward for the responsible consultant specialty?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes	<b>96.7% (206/213)</b>	-	New to R5
No	<b>2.8% (6/213)</b>	-	New to R5
Unknown/Not documented	<b>0.5% (1/213)</b>	-	New to R5
<b>Overall percentage of outliers</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Patient not on right ward	<b>7.5% (794/10558)</b>	1.2% (1/83)	New to R5
<b>(If the patient died) Was the patient receiving end of life care/on an end of life care plan?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes	<b>80.6% (987/1224)</b>	100% (10/10)	New to R5
No	<b>19% (233/1224)</b>	0% (0/10)	New to R5
Unknown/Not documented	<b>0.3% (4/1224)</b>	0% (0/10)	New to R5

## Appendix II: Annual Dementia Statement

NB: The tool and questions differed between R4 and R5. Information from both datasets is shown and comparison should be made with caution.

### Admissions

Admissions	National R5	RL403 R5	RL403 R4
Number of overall admissions to the hospital in the past year	<b>60,432 (Median)</b>	159202	New to R5
Number of dementia admissions to the hospital within the past year	<b>1,871 (Median)</b>	1669	New to R5
Percentage of people with dementia admitted to the hospital	<b>3% (Median)</b>	1%	New to R5
Do dementia leads in the hospital think most people with dementia are identified during admission	National R5 % (N/D)	RL403 R5	RL403 R4
Yes	<b>62.5% (105/168)</b>	Yes	New to R5
No	<b>33.9% (57/168)</b>	-	New to R5
Not Known/ Undocumented	<b>3.6% (6/168)</b>	-	New to R5
Can you estimate a proportion of people with dementia who may not be identified during admission?	National R5 % (N/D)	RL403 R5	RL403 R4
Less than 5%	<b>28.6% (48/168)</b>	-	New to R5
Up to 10%	<b>10.1% (17/168)</b>	-	New to R5

Up to 15%	<b>8.3% (14/168)</b>	-	New to R5
Up to 20%	<b>6.5% (11/168)</b>	-	New to R5
Up to 25%	<b>8.3% (14/168)</b>	-	New to R5
An unknown number	<b>38.1% (64/168)</b>	An unknown number	New to R5



## Feedback about the care provided to people with dementia

<b>Do you collect feedback on a regular basis from people with dementia admitted to the hospital?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>35.7% (60/168)</b>	Yes	New to R5
No	<b>58.9% (99/168)</b>	-	New to R5
Not Known/ Undocumented	<b>5.4% (9/168)</b>	-	New to R5
<b>Based on the past six months, what is the average number of people with dementia per month providing feedback? *If 'Yes' to 4.3</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
1	<b>16.7% (10/60)</b>	1	New to R5
2	<b>10% (6/60)</b>	-	New to R5
3	<b>11.7% (7/60)</b>	-	New to R5
4	<b>10% (6/60)</b>	-	New to R5
5	<b>20% (12/60)</b>	-	New to R5
6	<b>0% (0/60)</b>	-	New to R5
7	<b>1.7% (1/60)</b>	-	New to R5

8	<b>6.7% (4/60)</b>	-	New to R5
9	<b>0% (0/60)</b>	-	New to R5
10	<b>6.7% (4/60)</b>	-	New to R5
More than 10	<b>16.7% (10/60)</b>	-	New to R5

## Governance

Personal information document or Scheme	National R5 % (N/D)	RL403 R5	RL403 R4
All about Me	<b>8.3% (14/168)</b>	All About Me	New to R5
Butterfly Scheme	<b>6% (10/168)</b>	-	New to R5
Forget me not	<b>7.7% (13/168)</b>	-	New to R5
Getting to know me	<b>4.8% (8/168)</b>	-	New to R5
Hospital passport	<b>1.8% (3/168)</b>	-	New to R5
More than one	<b>10.7% (18/168)</b>	-	New to R5
This is Me	<b>42.9% (72/168)</b>	-	New to R5
Other	<b>14.9% (25/168)</b>	-	New to R5
None	<b>3% (5/168)</b>	-	New to R5
Bedside Check and Personal information document or Scheme	National R5	RL403 R5	RL403 R4
Number of people with dementia who had a bedside check	<b>10 (Median)</b>	80	9
Number of people with dementia who had an up to date document with their personal information at their bedside	<b>5 (Median)</b>	23	8

Percentage of people with an up-to-date document with their personal information at their bedside	<b>46.2% (Mean)</b>	28.8%	88.9%
<b>Does your DATIX or other monitoring system identify the proportion of people with dementia who have been affected within the totals over the past year for: In hospital falls</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>63.7% (107/168)</b>	-	-
No	<b>31.5% (53/168)</b>	No	No
Not known/ Undocumented	<b>4.8% (8/168)</b>	-	New to R5
<b>Is this information presented to the Board/ responsible sub committee/ oversight committee for review with an improvement plan every: *If 'Yes' to 5.4</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Quarter	<b>59.8% (64/107)</b>	-	New to R5
Six Months	<b>7.5% (8/107)</b>	-	New to R5
Year	<b>2.8% (3/107)</b>	-	New to R5
Not specified	<b>12.1% (13/107)</b>	-	New to R5
No	<b>15.9% (17/107)</b>	-	New to R5
Not known/ Undocumented	<b>1.9% (2/107)</b>	-	New to R5

<b>Does your CAMIS or other monitoring system identify the proportion of people with dementia who have been affected within the totals over the past year for: readmissions within 30 days</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>46.4% (78/168)</b>	Yes	-
No	<b>49.4% (83/168)</b>	-	No
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is this information presented to the Board/ responsible sub committee/ oversight committee for review with an improvement plan every: *If 'Yes' to 5.5</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Quarter	<b>43.6% (34/78)</b>	-	New to R5
Six Months	<b>9% (7/78)</b>	-	New to R5
Year	<b>5.1% (4/78)</b>	-	New to R5
Not specified	<b>20.5% (16/78)</b>	Not specified	New to R5
No	<b>19.2% (15/78)</b>	-	New to R5
Not known/ Undocumented	<b>2.6% (2/78)</b>	-	New to R5

<b>Does your CAMIS or other monitoring system identify the proportion of people with dementia who have been affected within the totals over the past year for: Delayed discharges or transfers of care</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>36.9% (62/168)</b>	-	-
No	<b>58.9% (99/168)</b>	No	No
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is this information presented to the Board/ responsible sub committee/ oversight committee for review with an improvement plan every: *If 'Yes' to 5.5</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Quarter	<b>41.9% (26/62)</b>	-	New to R5
Six Months	<b>6.5% (4/62)</b>	-	New to R5
Year	<b>1.6% (1/62)</b>	-	New to R5
Not specified	<b>30.6% (19/62)</b>	-	New to R5
No	<b>16.1% (10/62)</b>	-	New to R5
Not known/ Undocumented	<b>3.2% (2/62)</b>	-	New to R5

<b>Does your DATIX or other monitoring system identify the proportion of people with dementia who have been affected within the totals over the past year for: Newly developed in hospital pressure ulcers</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>49.4% (83/168)</b>	-	New to R5
No	<b>46.4% (78/168)</b>	No	New to R5
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is this information presented to the Board/ responsible sub committee/ oversight committee for review with an improvement plan every:*If 'Yes' to 5.7</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Quarter	<b>57.8% (48/83)</b>	-	New to R5
Six Months	<b>6% (5/83)</b>	-	New to R5
Year	<b>1.2% (1/83)</b>	-	New to R5
Not specified	<b>20.5% (17/83)</b>	-	New to R5
No	<b>12% (10/83)</b>	-	New to R5
Not known/ Undocumented	<b>2.4% (2/83)</b>	-	New to R5
<b>Does your DATIX or other monitoring system identify the proportion of people with dementia who have been affected within the totals over the past year for: incidents flagged as involving violence or aggression</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>

Yes	<b>58.3% (98/168)</b>	-	New to R5
No	<b>37.5% (63/168)</b>	No	New to R5
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is this information presented to the Board/ responsible sub committee/ oversight committee for review with an improvement plan every: *If 'Yes' to 5.8</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Quarter	<b>53.1% (52/98)</b>	-	New to R5
Six Months	<b>10.2% (10/98)</b>	-	New to R5
Year	<b>3.1% (3/98)</b>	-	New to R5
Not specified	<b>20.4% (20/98)</b>	-	New to R5
No	<b>11.2% (11/98)</b>	-	New to R5
Not known/ Undocumented	<b>2% (2/98)</b>	-	New to R5
<b>Do you have a dementia strategy group/working party?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>82.1% (138/168)</b>	Yes	Yes



No	<b>13.7% (23/168)</b>	-	-
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>How often do they meet? *If 'Yes' to 5.9</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Once a quarter or more	<b>88.4% (122/138)</b>	-	New to R5
Every 3-6 months	<b>8% (11/138)</b>	Every 3-6 months	New to R5
Every 6-12 months	<b>2.9% (4/138)</b>	-	New to R5
Every 18-24 months	<b>0.7% (1/138)</b>	-	New to R5
Not known/ Undocumented	<b>0% (0/138)</b>	-	New to R5
<b>Please indicate who is involved *If 'Yes' to 5.9</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Trust dementia leads	<b>100% (138/138)</b>	Yes	Yes
Patient/ public representatives	<b>44.9% (62/138)</b>	No	New to R5
Local Healthwatch	<b>20.3% (28/138)</b>	No	New to R5
People with dementia and carers	<b>35.5% (49/138)</b>	No	Yes

Local campaigning groups/ charities	<b>51.4% (71/138)</b>	No	Yes
<b>Distribution of Dementia strategy group involvement</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
No Dementia strategy group	<b>13.7% (23/168)</b>	-	New to R5
At least 1 group in strategy group	<b>75.6% (127/168)</b>	At least 1 group in the strategy group	New to R5
All groups involved	<b>6.5% (11/168)</b>	-	New to R5
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is the hospital signed up to: John's Campaign</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>87.5% (147/168)</b>	-	New to R5
No	<b>8.3% (14/168)</b>	No	New to R5
Not known/ Undocumented	<b>4.2% (7/168)</b>	-	New to R5
<b>Is the hospital signed up to: Dementia Friendly Hospitals Charter</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Yes	<b>85.1% (143/168)</b>	-	New to R5
No	<b>11.3% (19/168)</b>	No	New to R5
Not known/ Undocumented	<b>3.6% (6/168)</b>	-	New to R5

## Staff expertise and training

Staff Training	National R5	RL403 R5 %	RL403 R4 %
Number of lead nurses for dementia employed by your Trust (WTE)	<b>1 (Median)</b>	1	New to R5
Number of consultant physicians who are specialists for dementia employed by your Trust (WTE)	<b>1 (Median)</b>	3	New to R5
Number of Allied Healthcare Professionals who are specialists in dementia working in your Trust	<b>0 (Median)</b>	0	New to R5
Tier 1 dementia trained staff	National R5 %	RL403 R5 %	RL403 R4 %
Percentage of all staff employed by your hospital/Trust who have received Tier 1 dementia training	<b>86.4% (Median)</b>	100%	New to R5
What level is this reported at?	National R5 % (N/D)	RL403 R5 %	RL403 R4 %
Hospital	<b>14.8% (20/135)</b>	-	New to R5
Trust	<b>85.2% (115/135)</b>	Trust	New to R5
Staff Training	National R5 % (N/D)	RL403 R5 %	RL403 R4 %
Percentage of staff working on your adult wards OR across your Trust who have received Tier 2 dementia training	<b>45% (Median)</b>	63%	New to R5
What level is this reported at?	National R5 % (N/D)	RL403 R5 %	RL403 R4 %

Hospital	<b>14.4% (14/97)</b>	-	New to R5
Trust	<b>85.6% (83/97)</b>	Trust	New to R5
<b>Do you require contracts with external providers (for services such as catering and security) where staff come into contact with people with dementia to provide their staff with dementia awareness training?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 %</b>	<b>New to R5</b>
Yes	<b>40.5% (68/168)</b>	-	New to R5
No	<b>54.8% (92/168)</b>	No	New to R5
Not known/ Undocumented	<b>4.8% (8/168)</b>	-	New to R5
<b>Who is this for? *If 'Yes' to 6.6</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5 %</b>	<b>RL403 R4 %</b>
All contracted services	<b>50% (34/68)</b>	-	New to R5
All contracted services with staff working on adult wards	<b>13.2% (9/68)</b>	-	New to R5
Some contracted services	<b>36.8% (25/68)</b>	-	New to R5
Not known/ Undocumented	<b>0% (0/68)</b>	-	New to R5

## Nutrition and Environment

Nutrition	National R5	RL403 R5	RL403 R4
Total number of adult wards	<b>21 (Median)</b>	85	New to R5
Total number of adult wards where finger foods are available as meal options for each meal	<b>19 (Median)</b>	85	New to R5
Percentage of adult wards where finger foods are available as a meal option	<b>90% (Mean)</b>	100%	New to R5
Total number of adult wards where people with dementia can have snack foods as a meal replacement or at any time as a supplement	<b>20 (Median)</b>	83	New to R5
Percentage of adult wards where people with dementia can have snack foods as a meal replacement or at any time as a supplement	<b>95% (Mean)</b>	97.6%	New to R5
<b>Has the physical environment within the hospital been reviewed using an appropriate tool (for example, King's Fund Enhancing the Healing Environment; Patient Led Assessment of the Care Environment etc.) to establish whether it is 'dementia-friendly'?</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Taken place throughout the hospital	<b>35.7% (60/168)</b>	-	Taken place across hospital
Taken place on all adult wards and public areas	<b>8.9% (15/168)</b>	-	-
Taken place on all adult wards	<b>6% (10/168)</b>	-	New to R5
Taken place on all care of the elderly wards	<b>11.9% (20/168)</b>	-	-

Taken place on some wards	<b>26.8% (45/168)</b>	-	New to R5
Not taken place	<b>5.4% (9/168)</b>	Not taken place	-
Not Known/ Undocumented	<b>5.4% (9/168)</b>	-	New to R5
<b>Environmental changes based on the review are:</b>	<b>National R5 % (N/D)</b>	<b>RL403 R5</b>	<b>RL403 R4</b>
Completed	<b>11.9% (20/168)</b>	-	-
Underway	<b>52.4% (88/168)</b>	-	Underway
Planned but not yet underway	<b>8.3% (14/168)</b>	-	-
Planned but no funding has been identified	<b>7.1% (12/168)</b>	-	-
Not yet planned	<b>13.1% (22/168)</b>	Not yet planned	New to R5
Not Known/ Undocumented	<b>7.1% (12/168)</b>	-	New to R5

## Appendix III: Carer Questionnaire

### Demographics

Which of these best describes your relationship to the person you look after?	National R5 % (Num)	RL403 R5 % (N)	RL403 R4 % (N)
Spouse or partner	<b>36.3% (802)</b>	0% (0)	39.4% (13)
Family member	<b>52% (1151)</b>	*% (*)	48.5% (16)
Friend	<b>5.7% (125)</b>	0% (0)	*% (*)
Professional carer (health or social care)	<b>4.6% (102)</b>	0% (0)	*% (*)
Other	<b>1.4% (32)</b>	0% (0)	0% (0)
Are you one of the main carers for the person you look after? For example, family carer or key worker.	National R5 % (Num)	RL403 R5 % (N)	RL403 R4 % (N)
Yes	<b>79% (1564)</b>	*% (*)	83.3% (25)
No	<b>21% (417)</b>	0% (0)	No Data
Gender	TNS	RL403 R5 % (N)	RL403 R4 % (N)
Male	<b>31.8% (688)</b>	0% (0)	37.5% (12)
Female	<b>66.7% (1443)</b>	*% (*)	62.5% (20)

Other	<b>0.3% (7)</b>	0% (0)	0% (0)
Prefer not to say	<b>1.2% (25)</b>	0% (0)	0% (0)
<b>Age</b>	<b>National R5 % (Num)</b>	<b>RL403 R5 % (N)</b>	<b>RL403 R4 % (N)</b>
18-24 years	<b>0.4% (8)</b>	0% (0)	0% (0)
25-34 years	<b>1.9% (42)</b>	0% (0)	*% (*)
35-44 years	<b>5.3% (115)</b>	0% (0)	0% (0)
45-54 years	<b>15.5% (340)</b>	0% (0)	21.9% (7)
55-64 years	<b>23.9% (524)</b>	*% (*)	18.8% (6)
65-74 years	<b>18.9% (413)</b>	0% (0)	25% (8)
75-84 years	<b>23.9% (523)</b>	0% (0)	25% (8)
85 years and older	<b>8.7% (191)</b>	0% (0)	*% (*)
Prefer not to say	<b>1.5% (32)</b>	0% (0)	0% (0)



Ethnicity	National R5 % (Num)	RL403 R5 % (N)	RL403 R4 % (N)
White/White British	<b>85.8% (1852)</b>	*% (*)	87.5% (28)
Black/Black British	<b>4.3% (93)</b>	0% (0)	0% (0)
Asian/Asian British	<b>3.8% (82)</b>	0% (0)	*% (*)
Mixed	<b>2.6% (56)</b>	0% (0)	*% (*)
Other	<b>1.3% (27)</b>	0% (0)	0% (0)
Prefer not to say	<b>2.3% (49)</b>	0% (0)	*% (*)

## Carer Questionnaire Responses

<b>1. Do you feel that hospital staff were well informed and understood the needs of the person you look after?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>42% (901/2143)</b>	100% (1/1)	54.5% (18/33)
Yes, to some extent	<b>44.4% (952/2143)</b>	0% (0/1)	39.4% (13/33)
No	<b>13.5% (290/2143)</b>	0% (0/1)	6.1% (2/33)
<b>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>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>49.7% (1066/2144)</b>	100% (1/1)	64.5% (20/31)
Yes, to some extent	<b>39.2% (840/2144)</b>	0% (0/1)	29% (9/31)
No	<b>11.1% (238/2144)</b>	0% (0/1)	6.5% (2/31)
<b>3. Was the person you look after given enough help with personal care from hospital staff? For example, eating, drinking, washing and using the toilet.</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>48.2% (992/2058)</b>	100% (1/1)	63.6% (21/33)
Yes, to some extent	<b>37.6% (774/2058)</b>	0% (0/1)	33.3% (11/33)
No	<b>14.2% (292/2058)</b>	0% (0/1)	3% (1/33)

<b>4. Was the person you look after treated with respect by hospital staff?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>70.2% (1488/2119)</b>	100% (1/1)	84.8% (28/33)
Yes, to some extent	<b>25.8% (546/2119)</b>	0% (0/1)	15.2% (5/33)
No	<b>4% (85/2119)</b>	0% (0/1)	0% (0/33)
<b>5. Were you (or the patient, where appropriate) kept clearly informed about their care and progress during the hospital stay? For example, about plans for treatment and discharge.</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>38.7% (827/2138)</b>	100% (1/1)	39.4% (13/33)
Yes, to some extent	<b>39.7% (848/2138)</b>	0% (0/1)	48.5% (16/33)
No	<b>21.7% (463/2138)</b>	0% (0/1)	12.1% (4/33)
<b>6. Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>42.2% (898/2127)</b>	100% (1/1)	51.5% (17/33)
Yes, to some extent	<b>36.8% (782/2127)</b>	0% (0/1)	33.3% (11/33)
No	<b>21% (447/2127)</b>	0% (0/1)	15.2% (5/33)

<b>7. Did hospital staff ask you about the needs of the person you look after to help plan their care?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Yes, definitely	<b>42.9% (919/2144)</b>	100% (1/1)	63.6% (21/33)
Yes, to some extent	<b>32.8% (704/2144)</b>	0% (0/1)	24.2% (8/33)
No	<b>24.3% (521/2144)</b>	0% (0/1)	12.1% (4/33)
<b>8. Overall, how would you rate the care received by the person you look after during the hospital stay?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Excellent	<b>28.6% (631/2208)</b>	100% (1/1)	48.5% (16/33)
Very good	<b>30.7% (677/2208)</b>	0% (0/1)	27.3% (9/33)
Good	<b>19.7% (435/2208)</b>	0% (0/1)	12.1% (4/33)
Fair	<b>14.5% (320/2208)</b>	0% (0/1)	6.1% (2/33)
Poor	<b>6.6% (145/2208)</b>	0% (0/1)	6.1% (2/33)
<b>9. How likely would you be to recommend the service to friends and family if they needed similar care or treatment?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Extremely likely	<b>36% (767/2129)</b>	100% (1/1)	63.6% (21/33)
Likely	<b>35.7% (759/2129)</b>	0% (0/1)	18.2% (18.2/33)

Neither likely nor unlikely	<b>15.9% (338/2129)</b>	0% (0/1)	12.1% (4/33)
Unlikely	<b>7.9% (169/2129)</b>	0% (0/1)	0% (0/33)
Extremely unlikely	<b>4.5% (96/2129)</b>	0% (0/1)	6.1% (2/33)
<b>10. Overall, how satisfied are you with the support you have received from this hospital to help you in your role as a carer?</b>	<b>National R5 % (Num/Den)</b>	<b>RL403 R5 % (N/D)</b>	<b>RL403 R4 % (N/D)</b>
Very satisfied	<b>42.8% (882/2063)</b>	100% (1/1)	60.6% (20/33)
Somewhat satisfied	<b>37.1% (765/2063)</b>	0% (0/1)	24.2% (8/33)
Somewhat dissatisfied	<b>11.9% (246/2063)</b>	0% (0/1)	9.1% (3/33)
Very dissatisfied	<b>8.2% (170/2063)</b>	0% (0/1)	6.1% (2/33)