National Audit of Dementia

Care in General Hospitals 2023-24 Round 6 Audit Report

Appendix Documents II - X

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Appendix II. Audit Methodology and Participation

Round 6 Audit Content and Participation

Casenote Audit (patient-level audit)
The key measures for this part of the audit were: delirium screen and assessment; pain assessment and follow up; discharge planning within 24 hours.

Casenote Audit Sampling:
Hospitals were asked to prospectively identify patients with dementia or concerns about cognition admitted to their hospital for more than 24 hours between 14 August and 10 September 2023, using any usual systems in place. (Hospitals not reaching the minimum sample for the period were allowed to extend this).

In Round 5, hospitals were asked to identify all patients with dementia or probable dementia admitted to the hospital for part 1 and submit data on the first 80 patients identified for parts 2 and 3.

For Round 6, following a review, a **varying sample size** was introduced, which requested different sample sizes from hospitals based on their number of beds and whether they used mostly paper records. This aimed to promote more proportionate requirements for audit sampling, which would be easier to implement for smaller hospitals and those where electronic systems were at an early stage or absent. Please see below for the requested submissions.

Hospital size	Total Number Identified (all eligible patients, Part 1 of audit)	Full sample requirement (Parts 2 and 3 of audit)
If your hospital has <u>520 beds and under</u> **OR** has mostly paper records	Begin to identify patients admitted from 14 August **for 4 weeks or extended until you have at least 40 identified as consecutive admissions**	40 minimum, with a target of 50+
If your hospital has <u>521 -734 beds</u>	Begin to identify patients admitted from 14 August **for 4 weeks or extended until you have at least 50 identified as consecutive admissions**	50 minimum, with a target of 60 +
If your hospital has 735 beds +	Begin to identify patients admitted from 14 August **for 4 weeks or extended until you have at least 80 identified as consecutive admissions**	80 minimum, with a target of 100

Hospitals were also offered an optional Flex period with an identification period between 29 January and 25 February. Hospitals who opted for the Flex period were

asked to submit a full sample of 20-40 patients, depending on their mandatory period sample.

Annual Dementia Statement:
Hospitals were each asked to submit one form with key organisational information building into a series of statements about the hospital's approach to care.

Carer Questionnaire:
The carer questionnaire asked carers about the care of people with dementia, communication with hospital staff and support for the carer. There was a free text comment box for any additional feedback. Each hospital was sent 200 copies to distribute, with pre-paid envelopes for direct secure postal return to the project team. There was also an online version available.

Patient Feedback Questionnaire:
This was collected using a flexible tool, based on feedback from people with dementia about care experience and question format. Hospitals were asked to collect 3-5 per month on an ongoing basis. This feedback has been reported to hospitals every 6 months via separate reports. Comments made by patients relating to care quality have been used in this report, with any identifying information removed. See Appendix V: Patient Feedback in the National Audit of Dementia.

Data submission

For the Casenote Audit and Annual Dementia Statement, data was submitted via a secure online platform, allowing sites to return to, amend and download their own data.

For the carer questionnaire 200 hard copies were sent to each participating site for distribution. The questionnaire was also available online and in translation.

Data returns

Audit tool	Number of participating hospitals	Data received (total)	Range
Casenote audit	177	12530 (Part 1) 9860 (Part 2 & 3)	7-340 (Part 1) 7-107 (Part 2) 0-107 (Part 3)
Annual Dementia Statement	172	172	N/A
Carer questionnaire	155	2381	0-128
Patient questionnaire	154	4558	0-115

179 hospitals registered. Of those **20.7%** (37/179) had mostly paper records, **40.8%** (73/179) had mostly electronic records, and **38.5%** (69/179) had a mixture of both.

Data Cleaning

Data was checked for duplicates and anomalies using SPSS (e.g. assessment dates outside of the stated admission period) and queries returned to sites for each part of the data. Where sites were unable to resolve queries, the following changes were made:

Casenote audit
Duplicates were removed and obvious date errors (e.g. in year) were amended. Where an assessment date was stated to be within/not within 24 hours of admission, but the given date did not match, this was where possible amended.

Where a given date fell out of sequence, this was amended in accordance with information given to preceding questions or to the last preceding date. For example, where an assessment date fell outside of the admission, this was amended in accordance with information submitted to whether the date was within 24 hours of admission, or where this was not possible, to the date of discharge.

Information provided for the discharge information section created additional queries where the date of discharge was prior to an admission or assessment date, and the sequence was amended as above.

Missing responses were recoded to unknown/not documented.

Information given as Other for primary diagnosis, ward, assessments, reason for discharge plan outside of 24 hours, were recategorised.

Bulk upload was available via the online platform for the Casenote audit. Where the online tool had not permitted answers (because of question routing) and these had been included in uploaded data, this data was removed.

Annual Dementia Statement
Where exceptionally large or small numbers had been returned (e.g. for numbers of admissions or numbers of staff these were queried in order to remove errors/outliers where possible. Hospitals were also asked to confirm where they got this data from. Missing responses were queried and recoded as unknown/not documented if no information could be supplied.

Carer questionnaire
Questionnaires returned without a site identifier were scrutinised and allocated wherever possible. All identifying information was removed from comments.

Data Analysis

Casenote audit
Data was analysed nationally and aggregated at a site level using SPSS. NB: Sites with returns of less than 25 casenotes overall have been removed from site level analysis. Structured delirium screening includes CAM, OSLA, and 4AT as these produce a score.

Small number suppression is used when there is any likelihood of identification otherwise resulting. This is used in local reporting of demographic information when N=5 or less.

Carer questionnaire
Data was analysed nationally and aggregated at a site level. NB: Sites with returns of less than 10 questionnaires overall have been removed from site level analysis.

Carer Questionnaire Scores
Sites with more than 9 carer questionnaire submissions had 2 scores generated, for Overall Rating of Care Quality, and Rating of Communication. Scores were generated using responses from questions within the questionnaire.

Carer Rating of Overall Care Quality
Question used for calculating score:

> **Q8.** Overall, how would you rate the care received by the person you look after during the hospital stay?

Carer rating of communication*(N/A removed from totals)
Questions used for calculating score:

> **Q5.** 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.

> **Q6**. Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care?

> **Q7.** Did hospital staff ask you about the needs of the person you look after to help plan their care?

Outlier Analysis
The items from the casenote audit were selected for outlier analysis with the approval of the steering group:

- Casenote audit Delirium Screen: Delirium screening (Q2.2a-2.2f) or delirium noted as part of admitting condition (Q1.11) and

- Casenote audit Pain Assessment: (Q2.8)

Hospitals that were 3 standard deviations below the national average for one or both variables were contacted and given the opportunity to review and amend their data or confirm that their data was correct.

The table below shows the number of outliers initially, and following data amendments.

Outlier variable	Number of outliers at initial analysis	Number of outliers following data amendments
Delirium	18	12
Pain	11	1
Delirium AND Pain	6	1
Total	**35**	**14**

All data presented in the national report are post-outlier amended data.

Comparison across Data Collection Periods

The four data collection periods include 2023 (Round 5), 2023 (Round 5) Flex, 2024 (Round 6), and 2024 (Round 6) Flex. For data to be utilized in the comparison across all four periods, each hospital needs to have submitted a minimum of 25 casenotes per data collection period. This ensures that hospitals have enough casenotes so that results are not impacted by a small number of patients.

As there were only 7 hospitals that met this requirement, the main report contains no comparison across the four data collection periods and instead focuses on comparison between the two mandatory rounds of data collection. The comparison data for the key metrics from these 7 hospitals is shown in the [Supplementary Analysis](#) section.

Appendix III. Audit Standards

National Audit of Dementia (care in general hospitals)

Standards measured in Round 5 and Round 6

Casenote audit	
Standards are derived from NICE guidelines and recommendations for delirium and dementia, and from NHS England key principles:	
Delirium screening and assessment	At presentation people with dementia or cognitive impairment should be assessed for recent changes or fluctuations in behaviour which may indicate delirium *(CG103)*. If any of these changes are present, the person should have an assessment (see recommendation 1.6.1). **[2010, amended 2023]**
Pain assessment	People with dementia or cognitive impairment should be assessed for pain using an appropriate measurement or tool including self-reported pain and/or structured observational pain assessment tools *NG97* Overview | Dementia: assessment, management and support for people living with dementia and their carers | Guidance | NICE
Discharge planning	Discharge planning should start within 24 hours of admission NHS England and NHS Improvement have worked with a number of partners to identify five key principles which can help ensure that patients are discharged in a safe, appropriate and timely way. Plan for discharge from the start
Annual Dementia Statement	
Standards are derived from the Dementia Friendly Hospital Charter:	
Staff knowledge and skills	Care is provided by staff who are appropriately trained in dementia care Staff demonstrate a proactive approach to caring for people and are knowledgeable and skilled in identifying and addressing needs
Assessment	People with dementia and their family carers have access to an accurate assessment of their needs and care is delivered accordingly
Environment	The care environment is comfortable and supportive, promoting patient safety, well-being and independence and people with dementia are enabled to find their way around the hospital

Governance	Systems are in place to support continuous improvement of quality of care for people with dementia and their carers whilst in hospital, including resources and governance structures that support staff to deliver care that is dementia-friendly

Carer questionnaire

The carer questionnaire was independently developed by the Patient Experience Research Centre at Imperial College London and has been used in 2 previous rounds of the audit. Items were identified by a panel of carers as top priority items relating to the care of people with dementia and as questions which all carers/family members visiting people with dementia in hospital would find relevant, and would be able to answer.

The carer questionnaire also aligns with the statements of the [Dementia Friendly Hospital Charter](#):

Partnership	People with dementia and their families/carers are recognised as partners in their care. This includes: • Choice and control in decisions affecting their care • Support whilst in hospital and on discharge
Care	People with dementia and their family/ carers receive care that is person-centred and meets specific individual needs

Appendix IV. Supplementary Analysis

Table 1: Admission figures submitted by hospitals 2024, prior to confirmation and amendment

Admission Figures	Min	Max	Median
Admissions within a year	0	803,902	68,976
Admissions with Dementia within a year	0	36,238	1,777
% of Dementia admissions	0%	25%	2.90%

Table 2: Dementia strategy group involvement comparison between 2024 and 2023

Dementia Strategy Group Involvement	2024 (*n*=141)	2023 (*n*=138)
Trust dementia leads	98.6% (139)	100% (138)
Patient/public representatives	49.6% (70)	44.9% (62)
Local Healthwatch	28.4% (40)	20.3% (28)
People with dementia and carers	37.6% (53)	35.5% (49)
Local campaigning groups/charities	55.3% (78)	51.4% (71)

Figure 1: Number of lead nurses per hospital/Trust: comparison between 2023 and 2024

Number of Lead Nurses per Hospital/Trust

2024 Max: 20

2024 National Average: 3

2023 Max: 6

2023 TNS: 1

Min: 0

Result per Hospital

— 2024 N Lead Nurse   — 2023 N Lead Nurse
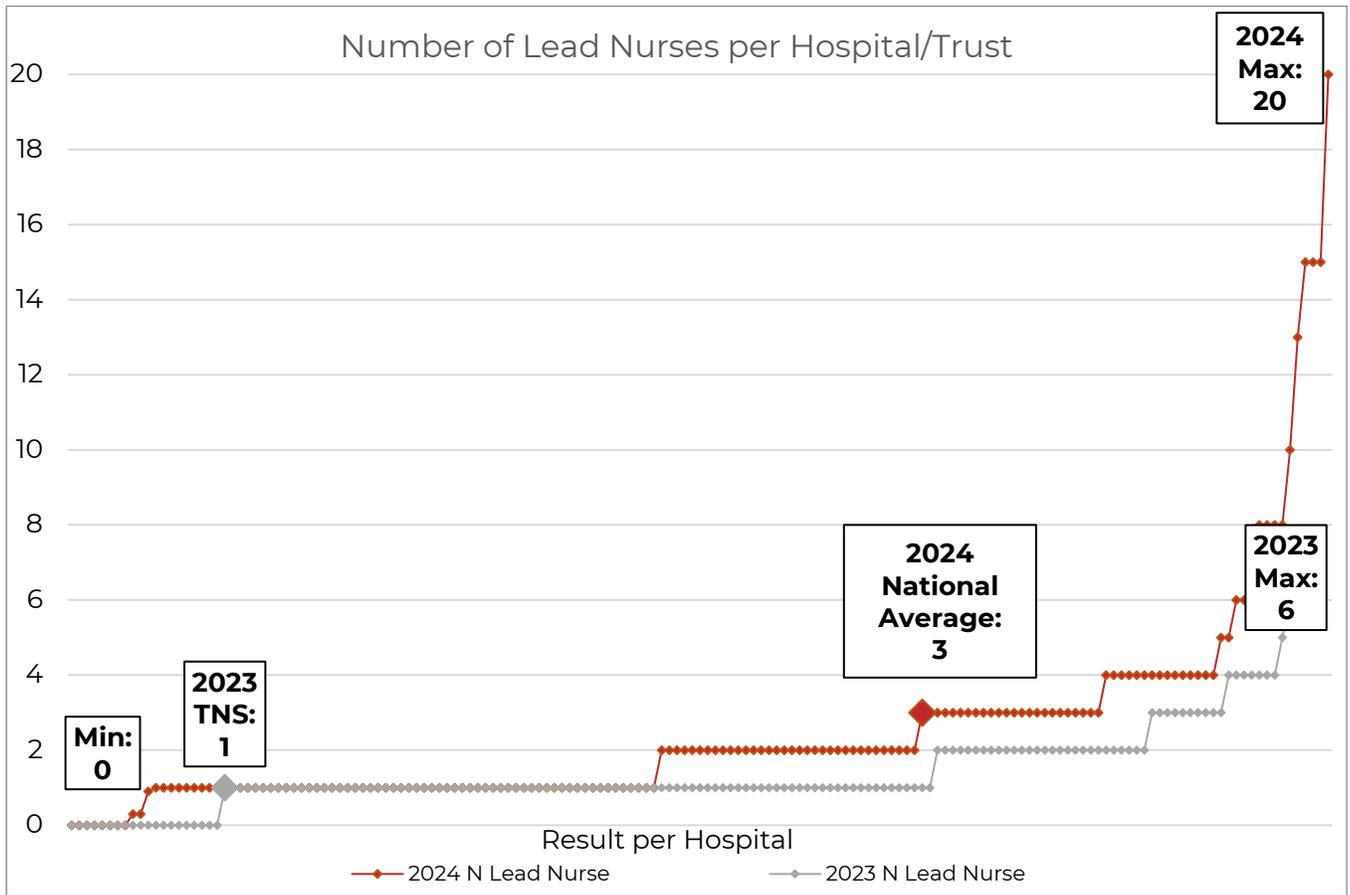
Table 3: Number of lead nurses, consultant physicians and AHPs: comparison between 2023 and 2024

	Round	Minimum	Maximum	Median
Number of lead nurses for dementia employed by your TRUST	2023	0	6	1
	2024	0	20	2
Number of consultant physicians who are specialists for dementia employed by your TRUST	2023	0	20	1
	2024	0	39	1
Number of Allied Healthcare Professionals (AHPs) who are specialists in dementia working in your TRUST	2023	0	94	0
	2024	0	44	1

Figure 2: % Unrecorded demographics: comparison between 2023 and 2024

% Unrecorded demographics

Gender: National 2023 8.1%, National 2024 5.7%
Ethnicity: National 2023 9.7%, National 2024 7.6%
First Language: National 2023 22.0%, National 2024 17.5%

National 2023 (n=14888) National 2024 (n=12530)
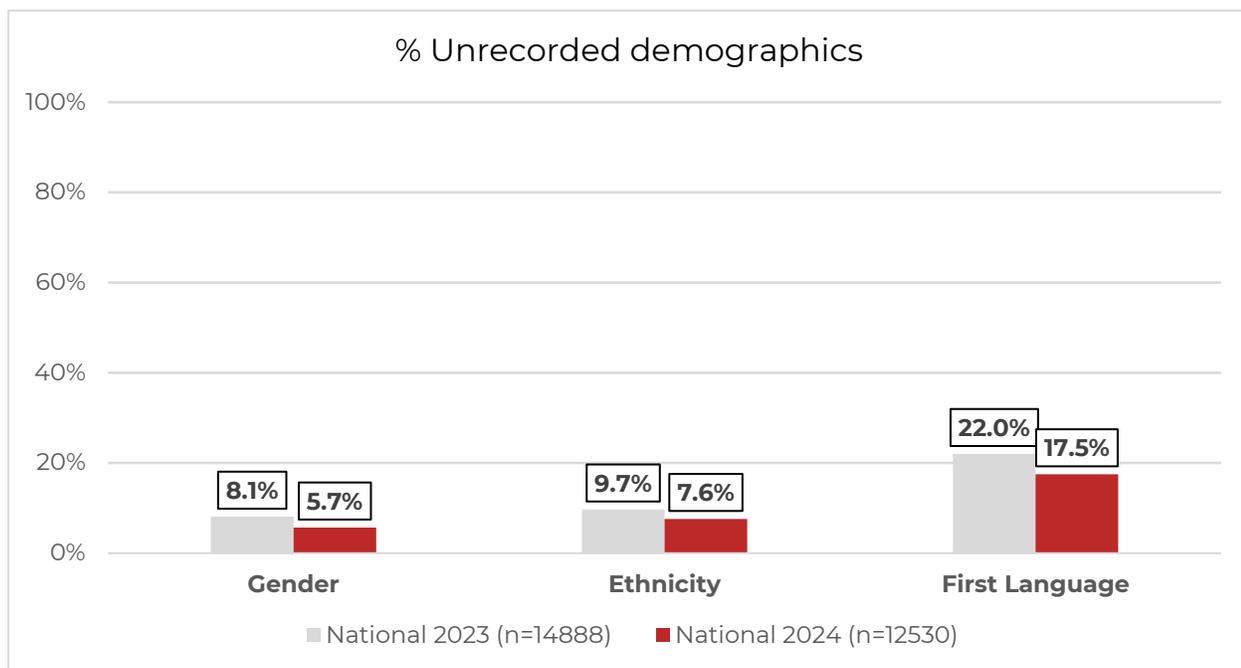
Note 1: Comparison of key metric results between demographic groups in 2024

We explored any significant differences in the key metric results including level of delirium screening, pain assessments, length of stay and discharge planning between demographic groups. The demographic groups included comparisons by sex, ethnicity group and language group.
Analysis did not reveal any significant difference in key metric results between different demographic groups in the 2024 data.

Figure 3: Proportion of patients who received a structured delirium screen comparison between 2023 and 2024

Structured delirium tools included the 4AT, CAM, and OSLA, as these all produce a score.

% of patients who received a delirium screen using a structured tool

	National 2023 (n=9269)	National 2024 (n=9020)
No structured delirium screen	55.9%	55.6%
Structured delirium screen	44.1%	44.4%
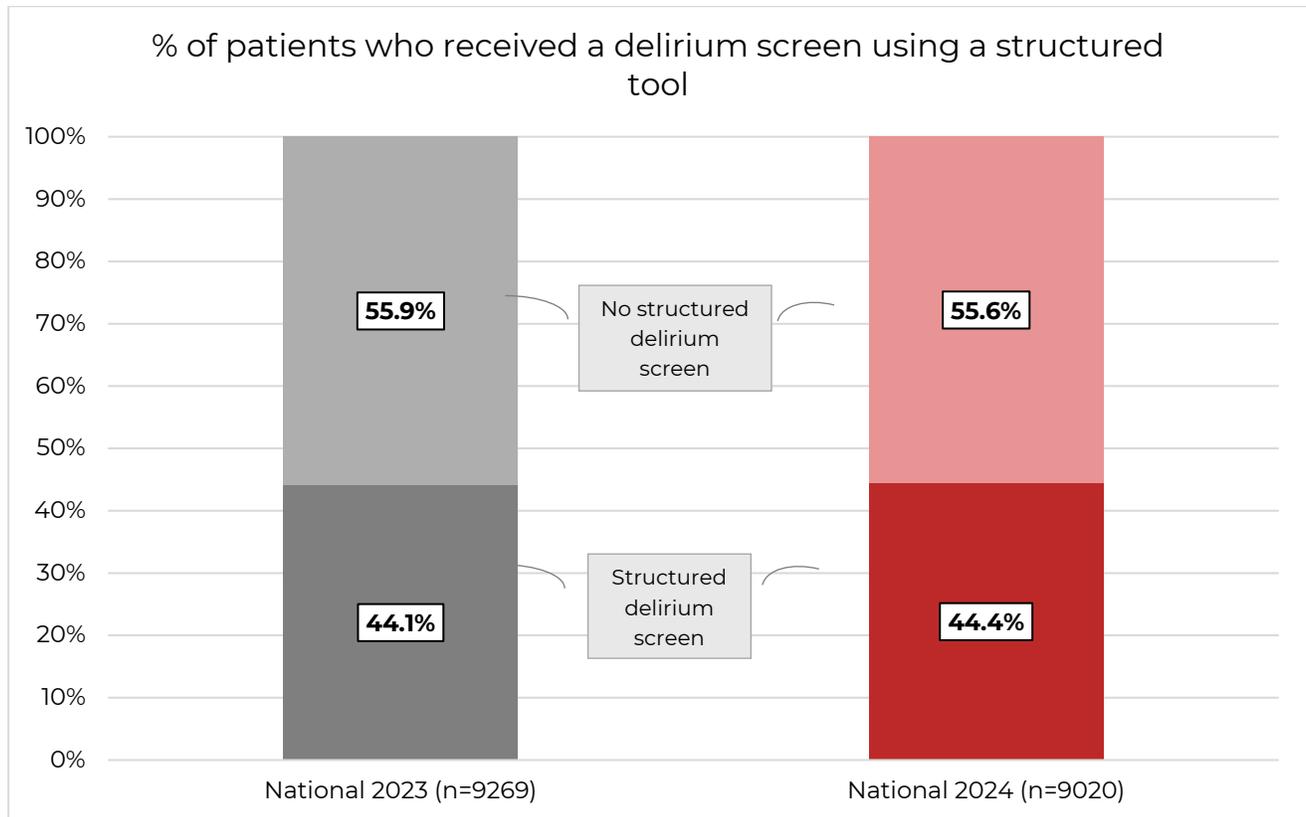
Figure 4: Proportion of patients who received a delirium screening using SQiD or collateral history, as well as a structured tool 2024 (out of patients who had any delirium screen)

% of patients who received a delirium screening using SQiD or history, as well as a structured tool (n=9020)
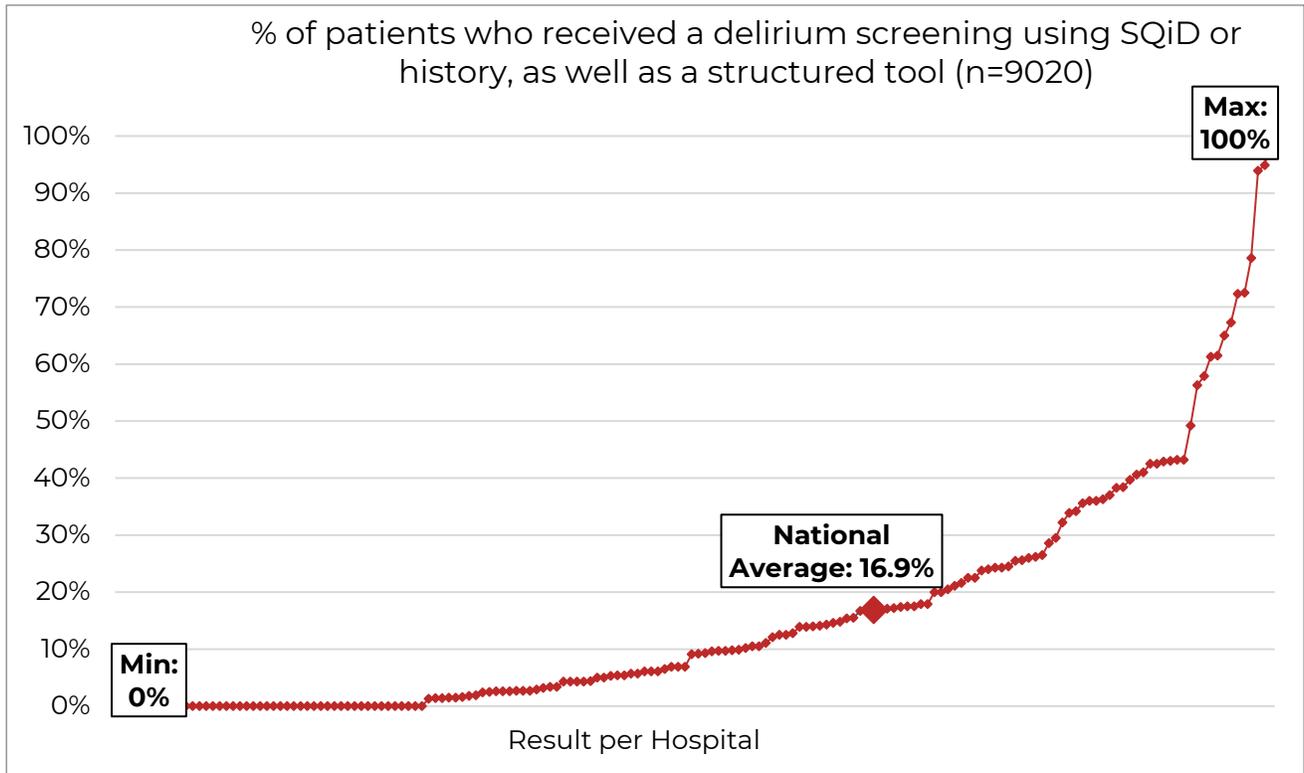
Figure 5: % Patients with a delirium management and care plan comparison between 2023 and 2024 (out of patients with confirmed or suspected delirium)

% Patients with delirium management and care plan

- Delirium Management Plan: 92.5% (National 2023), 87.0% (National 2024)
- Delirium Care Plan: 50.0% (National 2023), 57.8% (National 2024)

National 2023 (n=3106) National 2024 (n=3637)
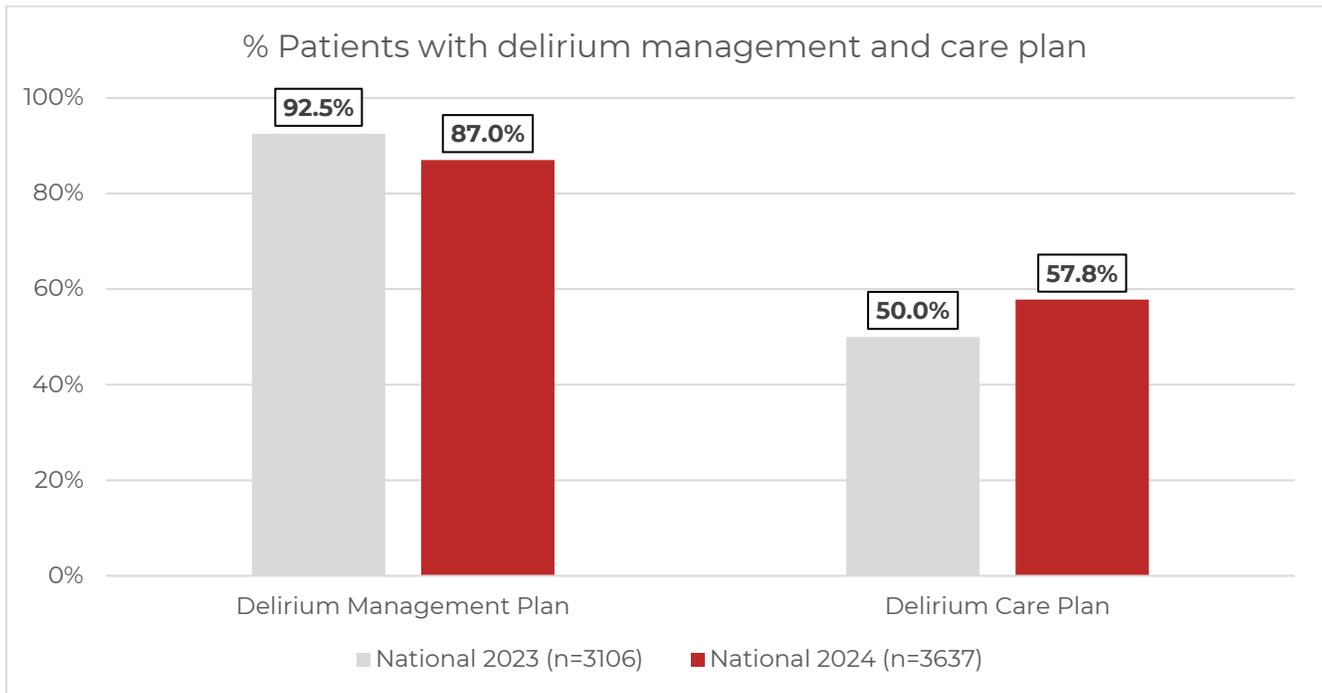
Figure 6: Change in place of care: comparison between 2023 and 2024

Change in Place of Care

No change: 83.7% (National 2023), 84.9% (National 2024)
Long term to own home/short term: 3.4% (National 2023), 3.0% (National 2024)
Own home/short term to long term care: 12.9% (National 2023), 12.1% (National 2024)

National 2023 (n=8981) National 2024 (n=8381)
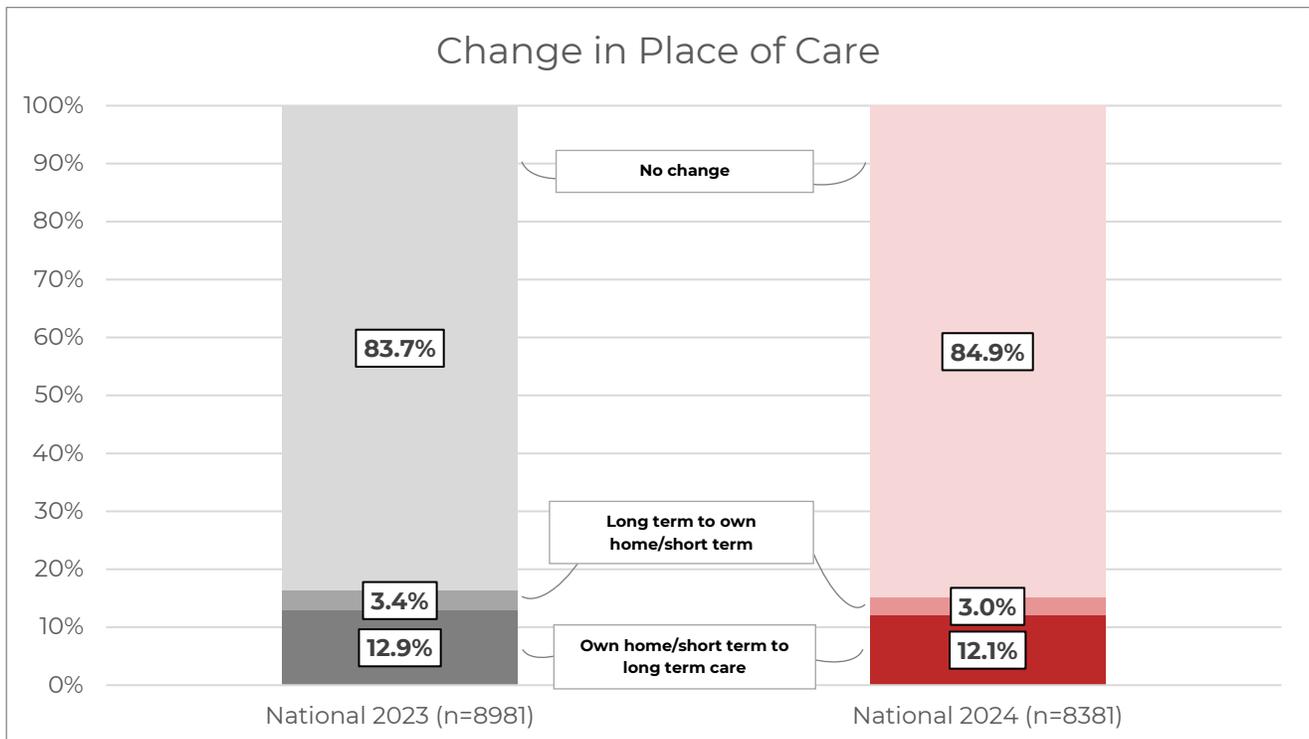
Figure 7: Reasons provided as to why discharge planning within 24 hours was not appropriate 2024

Reasons why discharge planning within 24 hours was inappropriate (n=5766)

Reason	Percentage
Patient acutely unwell	45.6%
Patient awaiting assesment	17.7%
No reason recorded	8.4%
Patient awaiting history/results	6.4%
Patient awaiting surgery	5.8%
Patient presenting confusion	4.6%
Other	4.5%
Patient on end of life care plan	4.3%
Patient being discharged to nursing care	1.9%
Patient transferred to another hospital	0.5%
Patient unresponsive	0.3%
Unknown/not documented	0.0%

Note 2: Flex data collection

Data collection periods in 2023 (Round 5) and 2024 (Round 6)
For the past 2 rounds of audit, participating hospitals were offered the possibility of splitting their casenote (patient record) data collection sample between 2 periods, in the Autumn and the Spring, with the aim of a) spreading the burden of audit and b) increasing its utility through adding an additional reporting time point for those who participated. The Autumn data collection (Mandatory) was mandatory, to ensure that there would be a full national dataset with benchmarking between hospitals, and the spring period was the optional (Flex) additional period. It was envisaged, if this innovation was found useful, that the data presented in the current report would compare across a series of 4 time points.

Participation in the Flex period and data comparison across Mandatory and Flex periods
Take up of the optional Flex period was low in 2023 (46 hospitals total), and lower again in 2024 (22 hospitals).

Because of this, it has not provided feasible for national reporting to compare the total casenote datasets for mandatory and flex periods in Rounds 5 and 6.

To achieve a true comparison and to examine any benefits of participating in the Flex period, we have compared:

Hospitals with >25 casenotes for both Mandatory and Flex Round 5 periods (37 hospitals)

Hospitals with >25 casenotes for both Mandatory and Flex Round 6 periods (13 hospitals)

Hospitals with >25 casenotes across all 4 time periods (7 hospitals)

Audit casenote key metrics have been used for the comparison.

Round 5 Mandatory and Flex Comparison (N=37 hospitals)

Key Metrics	National R5 Mandatory	National R5 Flex
% Any delirium screen (inc. noted on admission)	**83.2%** 1282/1541 (40% - 100%)	**88.8%** 1267/1427 (25% - 100%)
% Any pain assessment	**93.6%** 1417/1514 (55% - 100%)	**97.2%** 1360/1399 (52.3% - 100%)
% Any pain reassessment	**93%** 1318/1417 (43.8% - 100%)	**96.6%** 1314/1360 (26.1% - 100%)
% Pain tool – question only	**61.2%** 867/1417 (0% - 100%)	**56.4%** 766/1357 (0% - 100%)
% Initiation of discharge plan in first 24 hours	**34.1%** 526/1541 (2.5% - 100%)	**30.5%** 435/1427 (0% - 100%)
% Initiation of discharge plan in first 24 hours – (without cases with reasons given N/A)	**80.8%** 526/651 (11.1% - 100%)	**88.8%** 435/490 (25% - 100%)

Round 6 Mandatory and Flex Comparison (N=13 hospitals)

Key Metrics	National R6 Mandatory	National R6 Flex
% Any delirium screen (inc. noted on admission)	**94.9%** 599/631 (71.4% - 100%)	**92.3%** 477/517 (48% - 100%)
% Any pain assessment	**97.3%** 609/626 (85% - 100%)	**94.2%** 484/514 (58.3% - 100%)
% Any pain reassessment	**96.4%** 587/609 (82.5% - 100%)	**95.5%** 462/484 (42.9% - 100%)

% Pain tool – question only	**33.7%** 205/609 (0% - 92.5%)	**20.9%** 96/459 (0% - 92.3%)
% Initiation of discharge plan in first 24 hours	**29%** 183/631 (2.5% - 86.7%)	**35.2%** 182/517 (3.3% - 100%)
% Initiation of discharge plan in first 24 hours – (without cases with reasons given N/A)	**92%** 183/199 (66.7% - 100%)	**93.8%** 182/194 (16.7% - 100%)

The picture of results is mixed. Slight (but not significant) improvements across metrics of delirium and pain assessment, are not repeated when comparing hospitals taking part in both periods in Round 6.

Timeseries Comparison: participants all 4 periods (N=7 hospitals)

Key Metrics	National R5 Mandatory	National R5 Flex	National R6 Mandatory	National R6 Flex
% Any delirium screen (inc. noted on admission)	**90%** 260/289 (52.5% - 100%)	**86.1%** 211/245 (25% - 100%)	**97.1%** 371/382 (92% - 100%)	**97%** 290/299 (90% - 100%)
% Any pain assessment	**91.2%** 259/284 (55% - 100%)	**99.2%** 241/243 (96.7% - 100%)	**98.9%** 375/379 (96.9% - 100%)	**96.6%** 288/298 (86.5% - 100%)
% Any pain reassessment	**93.8%** 243/259 (80.8% - 100%)	**97.1%** 234/241 (81.8% - 100%)	**99.2%** 372/375 (97.5% - 100%)	**97.9%** 282/288 (90.6% - 100%)
% Pain tool – question only	**63.4%** 154/243 (32.5% - 100%)	**34.9%** 84/241 (0% - 90.5%)	**22.9%** 86/375 (0% - 78.9%)	**18.8%** 54/288 (0% - 78.1%)
% Initiation of discharge plan in first 24 hours	**22.8%** 66/289 (2.5% - 57.8%)	**27.3%** 67/245 (2.5% - 45.2%)	**20.2%** 77/382 (2.5% - 33.8%)	**22.7%** 68/299 (3.3% - 58.5%)
% Initiation of discharge plan in first 24 hours – reasons given as N/A	**80.5%** 66/82 (43.5% - 100%)	**89.3%** 67/75 (25% - 100%)	**90.6%** 77/85 (76.5% - 100%)	**91.9%** 68/74 (16.7% - 100%)

As only 7 hospitals took part in all 4 of the data collection periods, any results should be treated with caution.

Between timepoints 1 and 4, there are improvements for each metric. The decrease in the percentage of patients having "question only" as a pain assessment is significant.

Significant differences can also be found when comparing National R6 in this time series, with the R6 key metrics for the entire dataset. Those hospitals in the Timeseries comparison have significantly higher results for delirium, and for a lower percentage of patients with "question only" pain assessment.

These differences could reflect that maintain a more continuous focus across time points helped hospitals to improve. However, it could also be the case that hospitals that chose to take part in the Flex period were higher performing hospitals in the first instance, that they wished to capture improvements that they had put into place, or that they were hospitals with more support from electronic systems, and therefore able to identify both patients with dementia and missed assessments more easily.

All Hospitals Key Metrics: Mandatory periods Rounds 5 and 6

Key Metrics	National R6	National R5
% Any delirium screen (inc. noted on admission)	**91.5%** (9020/9860)	**87.1%** (9269/10642)
% Any pain assessment	**97.7%** (9563/9784)	**91.6%** (9623/10505)
% Any pain reassessment	**94.7%** (9052/9563)	**92.4%** (8890/9623)
% Pain tool – question only	**58.5%** (5595/9563)	**61.1%** (5880/9623)
% Initiation of discharge plan in first 24 hours	**39.9%** (3936/9860)	**38.7%** (4118/10642)
% Initiation of discharge plan in first 24 hours – excluding any N/A responses	**89%** (3936/4420)	**84.2%** (4118/4894)

Feedback from hospitals who took part in the Flex period

10 audit leads attended a webinar to feedback on their experiences of participating in the Flex period. Below are some key points:

Was the additional flex period helpful:
Yes, it was helpful in spreading the burden of the audit, especially when promised admin support was not forthcoming
Yes, it helped to know you were only doing half the sample in the mandatory period and half in the flex.
No – it increased pressure on a very small team as not "done with" at the end of the mandatory period
Did the flex period help to improve results:
Yes, although not as much as hoped
Yes, in the mandatory period some assessments had been misfiled, and were able to include it the Flex period and demonstrate achievement
No, Flex period is too close to mandatory period to use this data to see a difference
Were the Flex reports useful
Yes, but only for use going forward. Couldn't implement anything that quickly [before data collection resumed]
No, did not have time to look at this
Was the separate Flex period dashboard on the data collection platform useful?
No, was not aware of this

Webinar participants expressed generally that as small teams or sometimes as the single lead for dementia, they needed sufficient time between periods of audit to look at their results and plan and carry out improvements, before collecting more data. This concurred with other feedback received by the NAD team through correspondence and surveys and at webinar sessions.

Appendix V: Patient Feedback in the National Audit of Dementia

Development
In September 2022, we developed a questionnaire for people with dementia admitted to hospital. It was based on a previous consultation with Service User Review Panels facilitated by the Alzheimer's Society and further developed by patient and carer representatives on the project Steering Group. This resulted in a short, flexible tool which can be used to collect feedback in either questionnaire or semi-structured interview format. It has been made available in multiple languages and in both verbal and non-verbal formats (emojis).

Validation for National Reporting
Initial validation of the tool is almost complete. This analysis looks at factors such as: acceptability of the tool and questions (looking for example at high levels of missing data for any question); internal consistency of the tool (whether the response range options produce reliable results); and whether the questions produce independent variables (testing whether any questions are redundant because measuring the same as other questions).

Further analysis will examine whether we can compare the data across timepoints and/or between different hospital sites.

Data collection guidance given to participating hospitals
Hospitals participating in this data collection are asked to try and collect feedback from 3-5 patients each month. Patients approached to complete the survey must:
1. Be medically fit for discharge.
2. Have had a stay of at least one night in the hospital.
3. Be capable of giving verbal consent.

Patients may be assisted by family members/carers, or by volunteers or dedicated support staff (e.g. members of the Dementia Team, PALS etc). They should not be assisted by staff involved in their treatment and care/from the ward they are on.

All versions of the questionnaire and the full guidance can be found here:
[Patient Feedback Questionnaire | Royal College of Psychiatrists (rcpsych.ac.uk)](rcpsych.ac.uk)

Data collection and reporting
The tool is intended for use on an ongoing basis, with data collection cutoff points every 6 months. First local reports were issued in May 2023 to hospitals which had provided sufficient data (10 questionnaires or more). Small number suppression is applied to demographic data to safeguard anonymity.

Hospitals receive feedback on items identified as priorities for good quality care, including use of the preferred name, being treated with respect, being kept informed and receiving pain medicine. An overall rating of care quality can be compared with the carer survey rating.

Collection periods and participation

Participation table

Timepoint	Timepoint 1 September 2022-February 2023	Timepoint 2 March 2022-September 2023	Timepoint 3 October 2023-March 2024
N hospitals returning questionnaires	120 hospitals	99 hospitals	106 hospitals
Range of returns (0 returns excluded)	1-57	1-76	1-115
Average (rounded)	10	7	12
Median	6	2	6
Total attributable returns	1602	1138	1818
Overall total	**4558**		

NB for each data collection period there were a number of returns unattributable to a hospital site as this information had not been completed. These have been excluded.

Preliminary National Level Results
Below we present the preliminary findings from the accumulated National dataset, up until the end of Timepoint 3 (March 2024). Timepoint 4 cut off will be end September 2024.

Patient Feedback – breakdown of all responses received September 2022-March 2024

Figure 8: Please tell us about yourself

Please tell us about yourself (n=4488)

- Other
- I am a family member of someone living with dementia
- I am a person living with dementia

10.0%

15.9%

74.0%
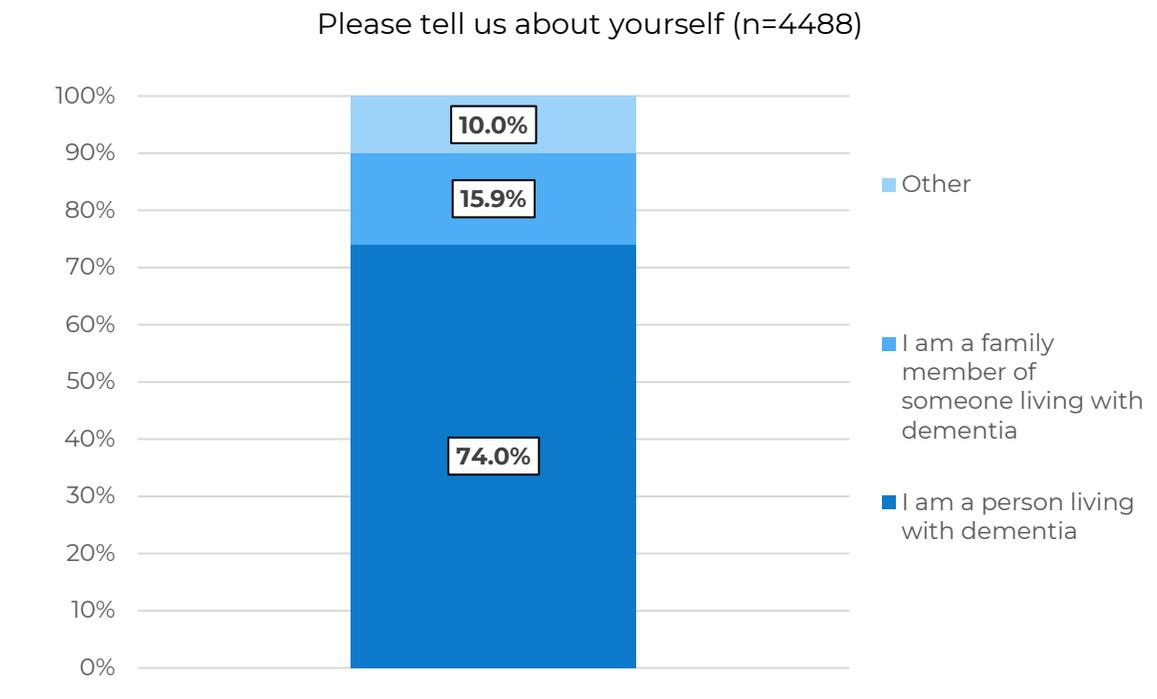
Figure 9: Did the hospital staff caring for you listen to you and understand your needs?

Did the hospital staff caring for you listen to you and understand your needs? (n=4500)

Legend:
- None of them did
- Some of them did
- Yes, all of them did

Values: 3%, 33%, 64%
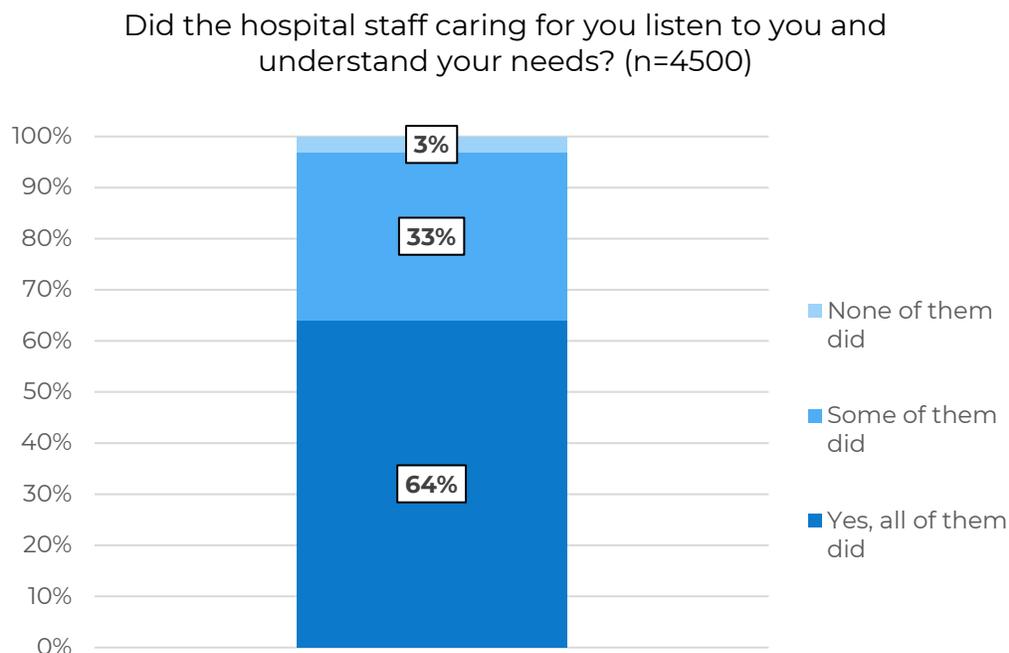
Figure 10: Did staff speak to you using the name you prefer to be called by?

Did staff speak to you using the name you prefer to be called by? (n=4508)

Legend:
- None of them did
- Some of them did
- Yes, all of them did

Values: 2%, 16%, 82%
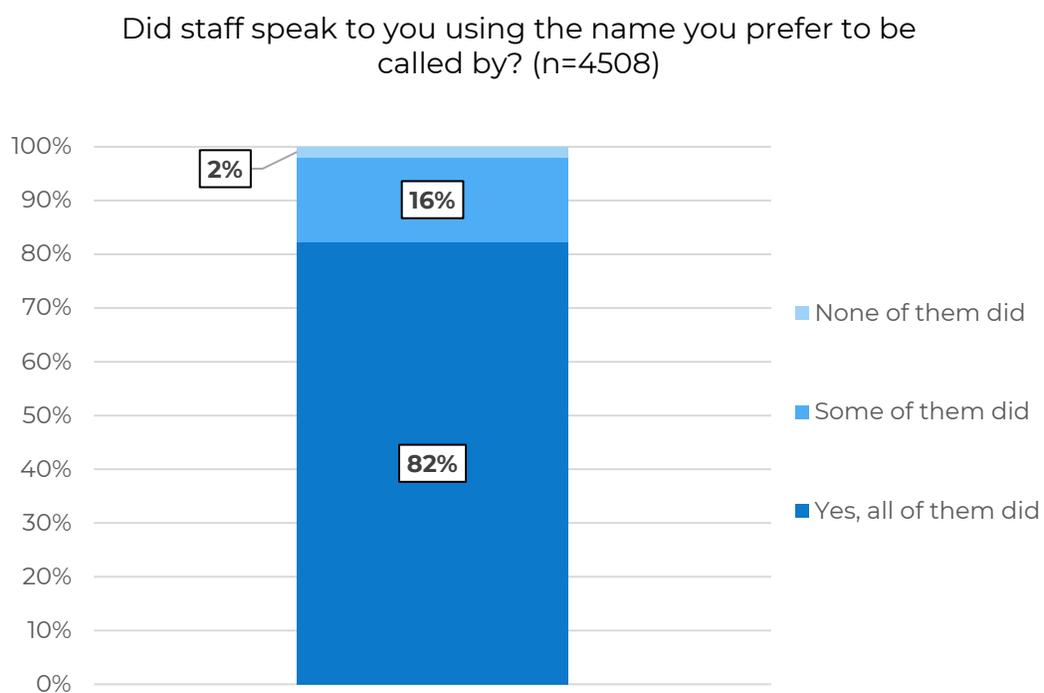
Figure 11: Did staff keep you informed about what care and treatment you were being given?

Did staff keep you informed about what care and treatment you were being given? (n=4458)

- No, never: 10%
- Sometimes: 38%
- Yes, always: 52%
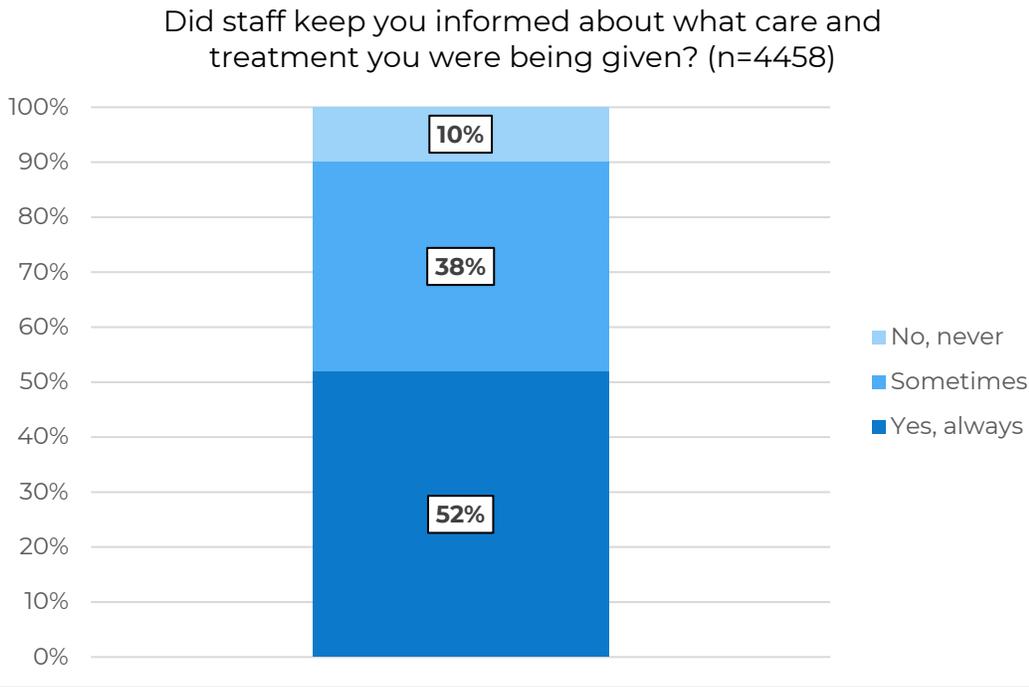
Figure 12: When you needed help, did staff give you enough of their time?

When you needed help, did staff give you enough of their time? (n=4494)

- I did not need help (N/A): 4%
- No, never: 4%
- Sometimes: 33%
- Yes, always: 59%
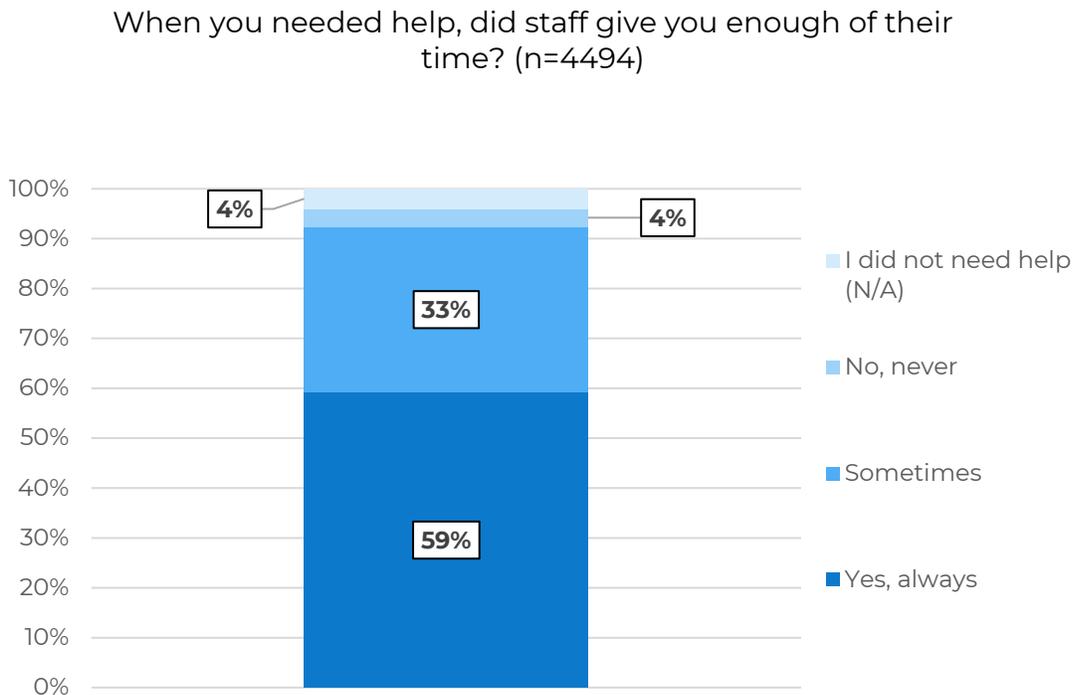
Figure 13: *Were you given medicine for any pain if you needed it?*

Were you given medicine for any pain if you needed it?
(n=4480)

Legend:
- I did not need this (N/A) — 23%
- No, never — 3%
- Sometimes — 15%
- Yes, always — 59%
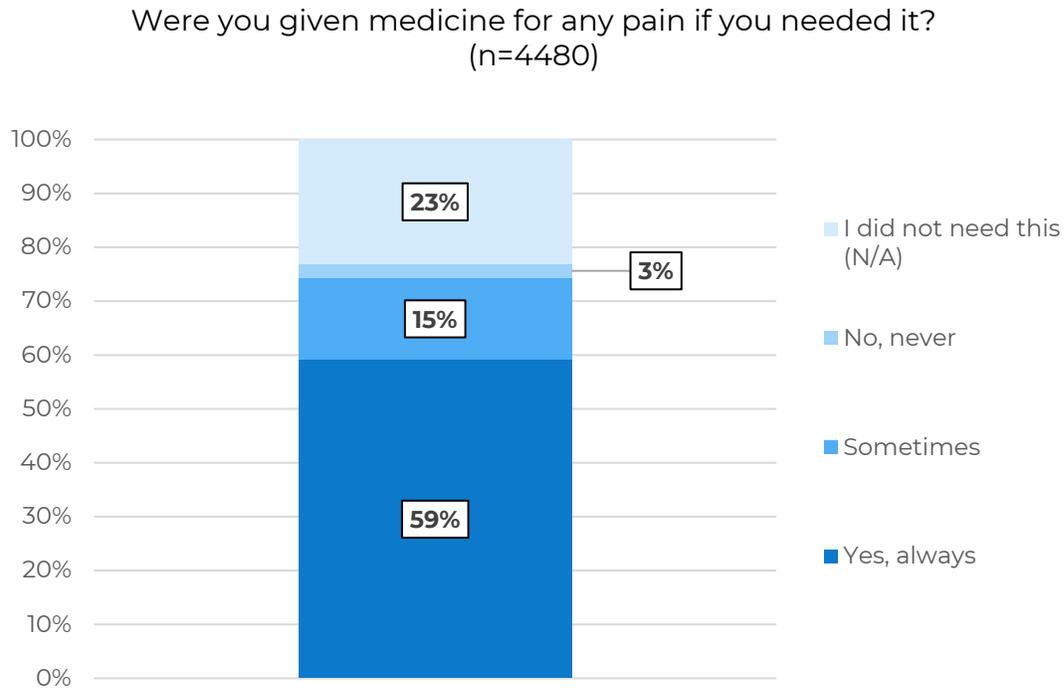
Figure 14: *Have visitors been allowed to see you during your stay in hospital?*

Have visitors been allowed to see you during your stay in
hospital? (n=4479)

Legend:
- I did not expect any visitors (N/A) — 6%
- No — 2%
- Sometimes — 9%
- Yes — 82%
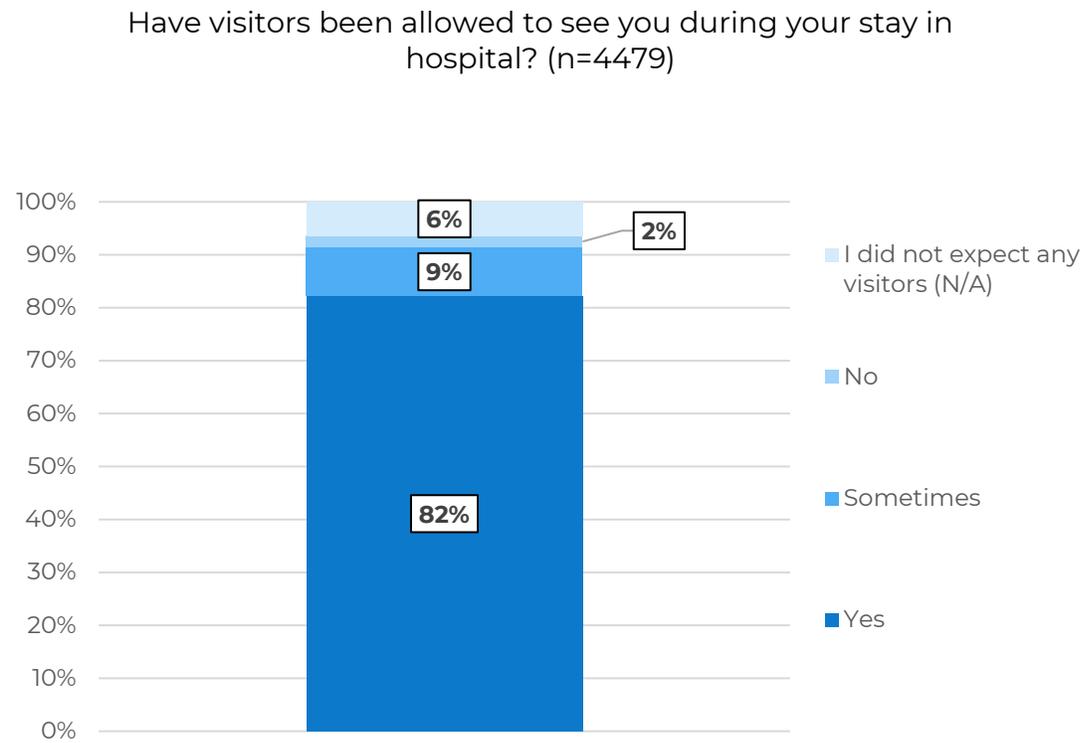
Figure 15: Did you like the food you were given during your stay in hospital?

Did you like the food you were given during your stay in hospital? (n=4468)

No, never **9%**

Sometimes **41%**

Yes, always **51%**
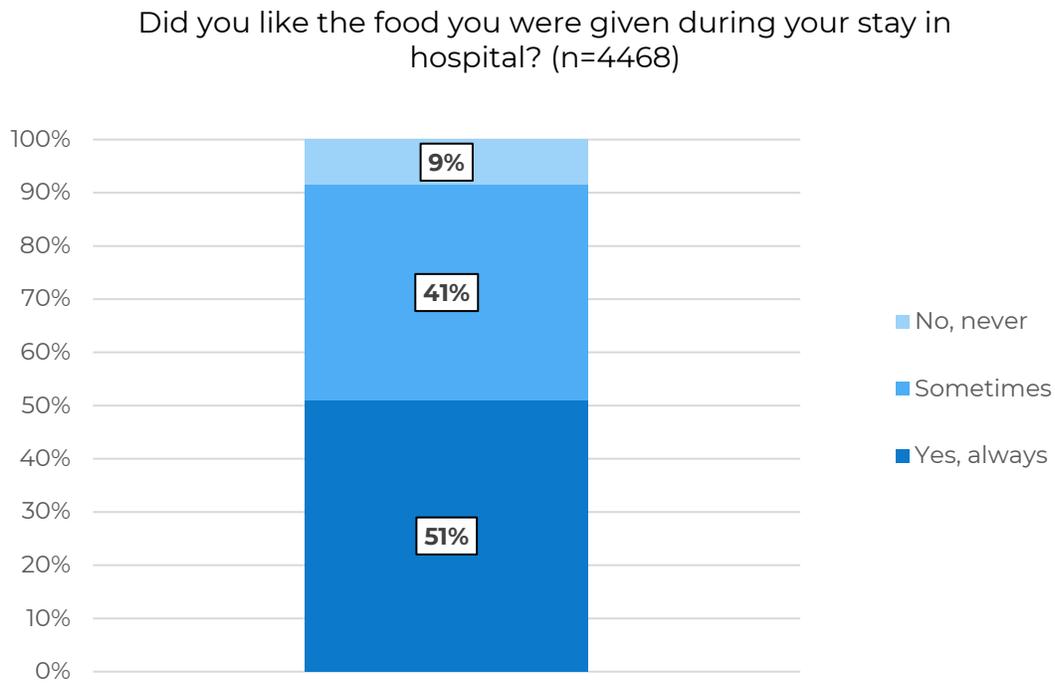
Figure 16: Were you treated with dignity and respect throughout your stay?

Were you treated with dignity and respect throughout your stay? (n=4496)

No, never **2%**

Sometimes **18%**

Yes, always **81%**
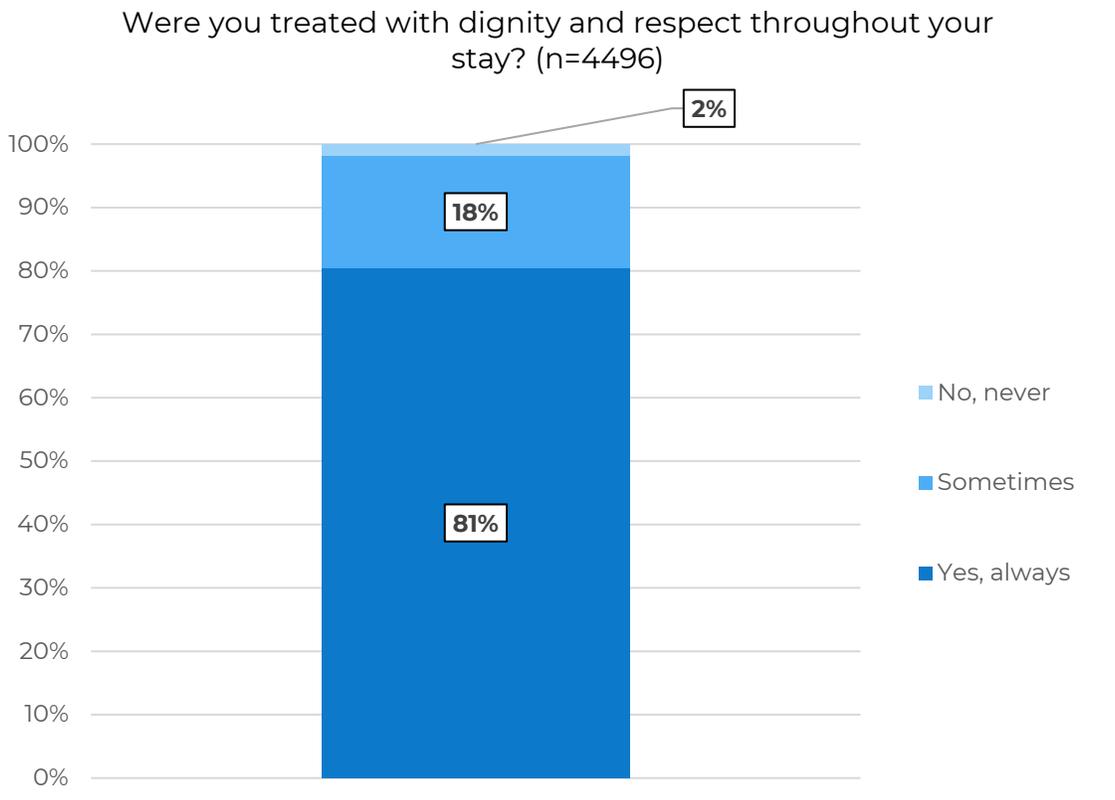
Figure 17: Thinking about your stay in hospital overall, would you say that your care was

Thinking about your stay in hospital overall, would you say that your care was (n=4503)
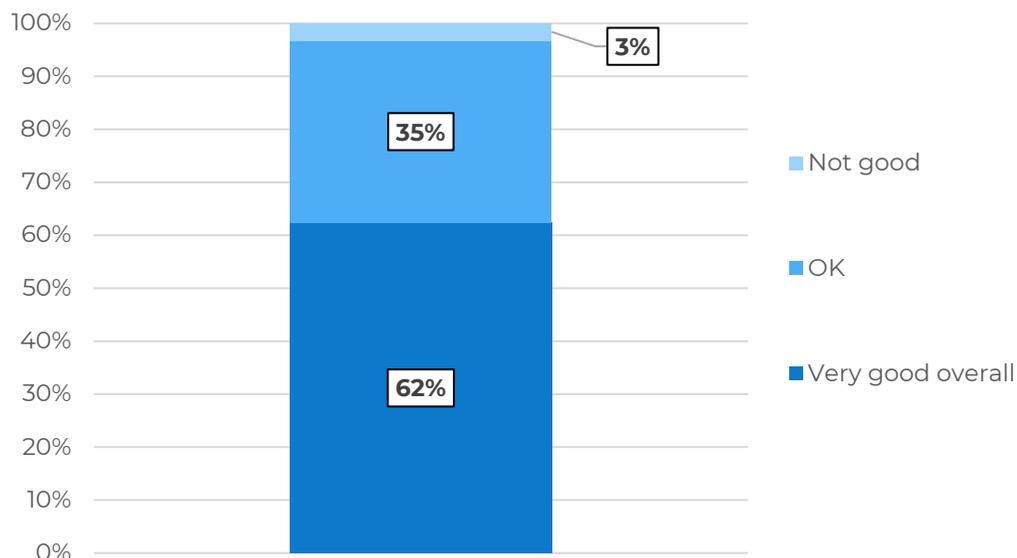
Patient Questionnaire Summary Tables

Questionnaire Responses

Question	Response	National Results
Please tell us about yourself:	I am a person living with dementia	**74.1%** (3324/4488)
	I am a family member of someone living with dementia	**15.9%** (714/4488)
	Other (e.g. a volunteer)	**10%** (450/4488)
Did the hospital staff caring for you listen to you and understand your needs?	Yes, all of them did	**64%** (2882/4500)
	Some of them did	**32.8%** (1477/4500)
	None of them did	**3.1%** (141/4500)

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Did staff speak to you using the name you prefer to be called by?	Yes, all of them did	**82.3%** (3708/4508)
	Some of them did	**15.9%** 716/4508)
	None of them did	**1.9%** (84/4508)
Did staff keep you informed about what care and treatment you were being given?	Yes, always	**51.9%** (2312/4458)
	Sometimes	**38.3%** (1707/4458)
	No, never	**9.8%** (439/4458)
When you needed help, did staff give you enough of their time?	Yes, always	**59.2%** (2660/4494)
	Sometimes	**33.3%** (1495/4494)
	No, never	**3.6%** (161/4494)
	I did not need help (N/A)	**4%** (178/4494)
Were you given medicine for any pain if you needed it?	Yes, always	**59.2%** (2652/4480)
	Sometimes	**15.2%** (683/4480)
	No, never	**2.5%** (111/4480)
	I did not need this (N/A)	**23.1%** (1034/4480)
Did you like the food you were given during your stay in hospital?	Yes, always	**51%** (2279/4468)
	Sometimes	**40.5%** (1811/4468)
	No, never	**8.5%** (378/4468)

Have visitors been allowed to see you during your stay in hospital?	Yes	**82.2%** (3680/4479)
	Sometimes	**9.2%** (414/4479)
	No	**2.2%** (99/4479)
	I did not expect any visitors (N/A)	**6.4%** (286/4479)
Were you treated with dignity and respect throughout your stay?	Yes, always	**80.5%** (3620/4496)
	Sometimes	**17.7%** (795/4496)
	No, never	**1.8%** (81/4496)
Thinking about your stay in hospital overall, would you say that your care was:	Very good overall	**62.4%** (2809/4503)
	OK	**34.5%** (1552/4503)
	Not good	**3.2%** (142/4503)

About you

Question	Response	National Results
How do you define your gender?	Male	**43.2%** (1907/4412)
	Female	**54.6%** (2408/4412)
	Other	**0%** (1/4412)
	Prefer not to say	**2.2%** (96/4412)

What is your age?	18-24	**0.1%** (3/4424)
	25-34	**0.1%** (6/4424)
	35-44	**0.3%** (13/4424)
	45-54	**1.7%** (75/4424)
	55-64	**3.3%** (147/4424)
	65-74	**11.1%** (493/4424)
	75-84	**40.1%** (1774/4424)
	85 years and over	**40.1%** (1772/4424)
	Prefer not to say	**3.2%** (141/4424)
Please specify your ethnicity:	White/White British	**87.7%** (3811/4344)
	Black/Black British	**3.3%** (142/4344)
	Asian/Asian British	**3.4%** (146/4344)
	Mixed	**1.2%** (53/4344)
	Other	**1.5%** (63/4344)
	Prefer not to say	**3%** (129/4344)

Appendix VI: Casenote Data Summary Tables

Key Metrics Data

Key Metrics	National R6	National R5
% Any delirium screen (inc. noted on admission)	**91.5%** (9020/9860)	**87.1%** (9269/10642)
% Any pain assessment	**97.7%** (9563/9784)	**91.6%** (9623/10505)
% Any pain reassessment	**94.7%** (9052/9563)	**92.4%** (8890/9623)
% Pain tool – question only	**58.5%** (5595/9563)	**61.1%** (5880/9623)
% Initiation of discharge plan in first 24 hours	**39.9%** (3936/9860)	**38.7%** (4118/10642)
% Initiation of discharge plan in first 24 hours – excluding any N/A responses	**89%** (3936/4420)	**84.2%** (4118/4894)

Unknown/Not documented demographics

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den
Gender		**5.7%** (713/12530)	**8.1%** (1210/14888)
Ethnicity	Unknown/Not Documented	**7.6%** (956/12530)	**9.7%** (1451/14888)
First Language		**17.5%** (2188/12530)	**22%** (3275/14888)

Demographics

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
1.3. Age at admission	Min-65	**2.3%** (292/12530)	**2%** (304/14888)	**2.3%** (228/9782)
	66-80	**28.8%** (3613/12530)	**27.3%** (4060/14888)	**24.4%** (2386/9782)
	81-100	**68.6%** (8596/12530)	**70.4%** (10480/14888)	**73.0%** (7146/9782)
	101-108	**0.2%** (29/12530)	**0.3%** (44/14888)	**0.2%** 19/9782
	Unknown	**0%** (0/12530)	**0%** (0/14888)	**0%** (3/9782)
	Minimum	**30**	**30**	**19**
	Maximum	**104**	**106**	**105**
	Mean	**84**	**84**	**84**
	Median	**84**	**85**	**85**
1.4. Sex	Female	**56.2%** (7041/12530)	**54.9%** (8172/14888)	-
	Male	**43.5%** (5448/12530)	**42.9%** (6383/14888)	-
	Unknown/Not Documented	**0.3%** (41/12530)	**2.2%** (333/14888)	-
1.5. Gender	Female	**53.3%** (6680/12530)	**51.6%** (7675/14888)	**58.6%** (5728/9782)
	Male	**41%** (5134/12530)	**40.3%** (6003/14888)	**41.4%** (4054/9782)

	Non-binary/Other	**0%** (3/12530)	**0%** (0/14888)	**-**
	Unknown/Not Documented	**5.7%** (713/12530)	**8.1%** (1210/14888)	**-**
1.6. Ethnicity	White	**85.7%** (10733/12530)	**83.9%** (12485/14888)	**80.7%** (7898/9782)
	Asian/Asian British	**2.5%** (314/12530)	**2.5%** (379/14888)	**2.5%** (245/9782)
	Black/Black British	**1.9%** (238/12530)	**2.1%** (311/14888)	**1.5%** (150/9782)
	Mixed	**0.8%** (95/12530)	**0.7%** (100/14888)	**0.1%** (14/9782)
	Other	**1.5%** (194/12530)	**1.1%** (162/14888)	**2.1%** (201/9782)
	Unknown/Not Documented	**7.6%** (956/12530)	**9.7%** (1451/14888)	**13.0%** (1274/9782)
1.7. First language	English	**78.9%** (9888/12530)	**75.0%** (11161/14888)	**77.7%** (7602/9782)
	Welsh	**0.3%** (39/12530)	**0.5%** (71/14888)	**0.6%** (62/9782)
	Other European Language	**1%** (121/12530)	**0.7%** (106/14888)	**0.8%** (77/9782)
	Any Asian Language	**1.8%** (220/12530)	**1.4%** (208/14888)	**1.7%** (169/9782)
	Other	**0.6%** (74/12530)	**0.5%** (67/14888)	**0.7%** (70/9782)
	Unknown/Not Documented	**17.5%** (2188/12530)	**22%** (3275/14888)	**18.4%** (1802/9782)
	Cancer	**0.4%** (44/12530)	**0.3%** (42/14888)	**0.7%** (70/9782)

	Cardiac/vascular/ chest pain	**4.5%** (560/12530)	**4.4%** (653/14888)	**6.4%** (629/9782)
	Dehydration/ nutrition	**1.4%** (181/12530)	**1.4%** (215/14888)	**1.4%** (134/9782)
	Delirium/ confusion/ cognitive impairment	**10.8%** (1352/12530)	**10.8%** (1614/14888)	**6.2%** (604/9782)
	Dementia	**0.8%** (102/12530)	**1%** (144/14888)	**1.6%** (160/9782)
	Endocrine/ metabolic condition	**1.2%** (145/12530)	**1%** (144/14888)	**1.5%** (146/9782)
	Fall	**22%** (2759/12530)	**23.2%** (3447/14888)	**14.8%** (1449/9782)
1.9. Primary diagnosis/cause of admission?	Gastrointestinal	**5.5%** (690/12530)	**5.1%** (755/14888)	**4.5%** (442/9782)
	Haematology related	**0.8%** (106/12530)	**0.6%** (90/14888)	**1.5%** (143/9782)
	Hepatology/liver related	**0.3%** (36/12530)	**0.2%** (31/14888)	**0.9%** (92/9782)
	Hip fracture/ dislocation	**3.5%** (438/12530)	**3.5%** (514/14888)	**6.4%** (627/9782)
	Other Fracture/ dislocation	**1.5%** (182/12530)	**1.2%** (186/14888)	**1.9%** 184/9782
	Impaired consciousness/ reduced responsiveness/ drowsiness or dizziness	**2.5%** (314/12530)	**2.4%** (359/14888)	**1.7%** (166/9782)
	Neurological problem/seizure/ head injury/ headache	**2.6%** (323/12530)	**2.8%** (415/14888)	**2.5%** (238/9782)
	Psychiatric/ psychological/ behavioural problems	**0.8%** (101/12530)	**0.5%** (76/14888)	**0.3%** (32/9782)

	Respiratory	**12.1%** (1516/12530)	**12.9%** (1927/14888)	**19.1%** (1862/9782)
	Sepsis	**3.9%** (492/12530)	**4.2%** (632/14888)	**6%** (586/9782)
	Skin problems/ lacerations/lesions	**1.4%** (180/12530)	**1%** (148/14888)	**2.1%** (202/9782)
	Stroke or related	**2.7%** (333/12530)	**2.4%** (354/14888)	**3.2%** (316/9782)
	Surgical/non-surgical procedure	**1%** (128/12530)	**1%** (152/14888)	**0.5%** (50/9782)
	Urinary/ urogenital/renal	**6.7%** (845/12530)	**5.7%** (843/14888)	**8.7%** (849/9782)
	Unable to cope/ frailty	**2.4%** (297/12530)	**1.9%** (278/14888)	**1.8%** (172/9782)
	Other – please specify	**8.5%** (1066/12530)	**11.5%** (1717/14888)	**2.2%** (218/9782)
	Unknown/Not documented	**2.7%** (340/12530)	**1%** (152/14888)	**0.6%** (60/9782)
1.10. Please say whether this is an emergency or elective admission	Elective	**1.3%** (167/12530)	**0.9%** (140/14888)	**1.3%** (128/9782)
	Emergency	**98.6%** (12359/12530)	**99.1%** (14748/14888)	**98.7%** (9654/9782)
	Unknown/Not documented	**0%** (4/12530)	**0%** (0/14888)	**0%** (0/9782)
1.11. Was delirium noted as part of the admitting condition?	No	**64.9%** (8129/12530)	**66.3%** (9868/14888)	**64%** (4617/7212)
	Yes	**34%** (4255/12530)	**33.7%** (5020/14888)	**36%** (2595/7212)
	Unknown/Not documented	**1.2%** (146/12530)	**0%** (0/14888)	**0%** (0/7212)

1.12. Dementia status	Known dementia	**76.9%** (9641/12530)	**74.6%** (11100/14888)	-
	"Probable" dementia/ Concerns about cognition	**22.2%** (2785/12530)	**25.4%** (3788/14888)	-
	Unknown/Not documented	**0.8%** (104/12530)	**0%** (0/14888)	-
1.12.1. (if known) What is the subtype of dementia?	Alzheimer's Disease (F00, G30)	**32.8%** (3167/9641)	**33.2%** (3683/11100)	-
	Dementia in Alzheimer's disease, atypical or mixed type (F00.2)	**10.6%** (1025/9641)	**8.6%** (956/11100)	-
	Vascular Dementia (F01)	**20.1%** (1942/9641)	**18.9%** (2099/11100)	-
	Dementia with Lewy bodies (G31.9)	**2.2%** (215/9641)	**2.5%** (282/11100)	-
	Fronto-temporal Dementia (G31.8)	**0.5%** (50/9641)	**0.7%** (79/11100)	-
	Dementia in Parkinson's disease (F02.3)	**2.1%** (199/9641)	**2.2%** (248/11100)	-
	Delirium due to known psychological condition, including delirium superimposed on dementia	**0.5%** (53/9641)	**0.5%** (51/11100)	-
	Unspecified dementia (F03)	**14.6%** (1412/9641)	**16.1%** (1792/11100)	-
	Dementia subtype Unknown/not documented	**16.4%** (1578/9641)	**17.2%** (1910/11100)	-

	Own home	**63.4%** (7945/12530)	**67.5%** (10045/14887)	**59%** (5776/9782)
	Respite care	**0.5%** (60/12530)	**0.4%** (60/14887)	**0.8%** (874/9782)
	Rehabilitation ward	**0.2%** (30/12530)	**0.2%** (32/14887)	**0.3%** (31/9782)
	Psychiatric ward	**0.4%** (44/12530)	**0.3%** (43/14887)	**0.5%** (46/9782)
	Carer's home	**2.5%** (317/12530)	**1.9%** (290/14887)	**1.4%** (138/9782)
1.13. Place in which the person was living or receiving care before admission	Intermediate/ community rehabilitation care	**0.3%** (42/12530)	**0.4%** (55/14887)	**0.7%** (73/9782)
	Residential care	**16.7%** (2095/12530)	**15.7%** (2334/14887)	**17.9%** (1753/9782)
	Nursing home	**14.6%** (1824/12530)	**13%** (1940/14887)	**18.1%** (1775/9782)
	Palliative care	**0%** (0/12530)	**0%** (2/148887)	**0.0%** (3/9782)
	Transfer from another hospital	**0.4%** (50/12530)	**0.3%** (45/14887)	**0.9%** (90/9782)
	Long stay care	**0.1%** (14/12530)	**0.3%** (41/14887)	**0.2%** (23/9782)
	Unknown/Not documented	**0.9%** (109/12530)	**0%** (0/14887)	**42.8%** (4184/9782)

1.14. On the date of submission, what ward/unit is the person admitted to? *NB If discharged: 5. Please identify the specialty of the ward that this patient spent the longest period on during this admission	Admissions Unit	**23.2%** (2903/12530)	-	-
	Care of the elderly	**34.3%** (4304/12530)	**30.2%** (4490/14888)	**42.8%** (4184/9782)
	Oncology	**0.1%** (13/12530)	**0.1%** (20/14888)	**0.2%** (24/9782)
	Cardiac	**1.7%** (216/12530)	**1.8%** (267/14888)	**2.6%** (250/9782)
	Orthopaedics	**6.5%** (815/12530)	**6%** (891/14888)	**9%** (881/9782)
	Critical care	**0.1%** (12/12530)	**0.3%** (43/14888)	**0.3%** (27/9782)
	Stroke	**2.7%** (341/12530)	**2.8%** (417/14888)	**4.3%** (417/9782)
	General medical	**14.2%** (1778/12530)	**27.3%** (4066/14888)	**22.9%** (2239/9782)
	Surgical	**5.8%** (724/12530)	**5.4%** (804/14888)	**5.3%** (520/9782)
	Nephrology	**0.3%** (41/12530)	**0.5%** (69/14888)	**0.5%** (45/9782)
	Other medical	**6.4%** (800/12530)	**13.1%** (1946/14888)	**8.5%** (829/9782)
	Obstetrics/ gynaecology	**0.2%** (28/12530)	**0.2%** (37/14888)	**0.3%** (32/9782)
	Other	**4.3%** (542/12530)	**12.3%** (1836/14888)	**3.4%** (334/9782)
	Unknown/Not documented	**0.1%** (13/12530)	**0%** (2/14888)	**0%** (0/9782)

Assessment

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
2.2. Have any of the following screening assessments been carried out for this patient to identify recent changes or fluctuation in behaviour that may indicate the presence of delirium?	Single Question in Delirium (SQiD)	**38.9%** (3833/9860)	**32.4%** (3449/10642)	**7.3%** (711/9762)
	History taken from someone who knows the patient well in which they were asked about any recent changes in cognition/ behaviour	**73.2%** (7221/9860)	**70.8%** (7539/10642)	**29.6%** (2888/9762)
	4AT	**38.3%** (3776/9860)	**35%** (3730/10642)	**9.9%** (969/9762)
	CAM	**3%** (293/9860)	**5.3%** (563/10642)	**5.2%** (350/6681)
	OSLA	**0.8%** (83/9860)	**0.4%** (47/10642)	-
	Other	**13.7%** (1352/9860)	**13.6%** (1446/10642)	**6.6%** (641/9762)
Was delirium assessed? (With patients who had delirium noted on admission included in 'within 24 hours')	Yes, within 24 hours of admission	**85.9%** (8467/9860)	**80.9%** (8605/10642)	-
	Yes, more than 24 hours after admission	**5.6%** (553/9860)	**6.2%** (664/10642)	-
	No	**8.5%** (840/9860)	**12.9%** (1373/10642)	-
	Any initial screen/ assessment	**91.5%** (9020/9860)	**87.1%** (9269/10642)	**57.6%** (5272/9147)
Days from admission to delirium screen assessment	0-1 days	**90.9%** (8055/8864)	**90.9%** (8201/9020)	-
	2-3 days	**5.4%** (478/8864)	**5.5%** (496/9020)	-
	4-6 days	**2.2%** (195/8864)	**1.8%** (164/9020)	-

	7-13 days	**1%** (88/8864)	**0.9%** (80/9020)	**-**
	14-20 days	**0.3%** (28/8864)	**0.3%** (30/9020)	**-**
	21-27 days	**0.2%** (14/8864)	**0.2%** (17/9020)	**-**
	28-34 days	**0.1%** (5/8864)	**0.2%** (17/9020)	**-**
	35-69 days	**0%** (1/8864)	**0.2%** (14/9020)	**-**
	70-140 days	**0%** (0/8864)	**0%** (1/9020)	**-**
2.4. Did the initial assessment selected above find evidence that delirium may be present?	Yes, delirium may be present	**49.5%** (4388/8864)	**48.1%** (4342/9032)	**50.8%** (2391/4706)
	No evidence of delirium	**50.4%** (4470/8864)	**51.8%** (4677/9032)	**49.2%** (2315/4706)
	Unknown/Not documented	**0.1%** (6/8864)	**0.1%** (13/9032)	**0%** (0/4706)
2.5. (If found that delirium may be present) was a diagnosis of delirium confirmed?	Yes, the patient was diagnosed with delirium	**58.1%** (2551/4388)	**71.5%** (3106/4342)	**81.4%** (1503/1849)
	No, it was confirmed the patient did not have delirium	**9.2%** (405/4388)	**15.2%** (661/4342)	**-**
	Suspected delirium but not diagnosed	**24.7%** (1086/4388)	**-**	**-**
	No further investigation took place	**7.8%** (344/4388)	**13.2%** (575/4342)	**-**

2.6. (If delirium diagnosis confirmed or suspected) was a management plan (for investigation and treatment) for delirium put in place?	Yes	**87%** (3165/3637)	**92.5%** (2872/3106)	-
2.7. (If delirium diagnosis confirmed or suspected) was a care plan (for nursing care) for delirium put in place?	Yes	**57.8%** (2103/3637)	**50%** (1552/3106)	-
2.8. Has the patient been asked about, and/or has there been an assessment for presence of pain?†	Yes, within 24 hours of admission	**92.7%** (9072/9784)	**85.1%** (8936/10505)	-
	Yes, more than 24 hours after admission	**5%** (491/9784)	**6.5%** (687/10505)	-
	No	**2.3%** (221/9784)	**8.4%** (882/10505)	-
	Any pain assessment	**97.7%** (9563/9784)	**91.6%** (9623/10505)	**85.4%** (8201/9600)
Days from admission to pain assessment	0-1 days	**96.3%** (9207/9563)	**94.2%** (9069/9623)	-
	2-3 days	**2.7%** (257/9563)	**3.7%** (357/9623)	-
	4-6 days	**0.6%** (53/9563)	**1%** (93/9623)	-
	7-13 days	**0.3%** (30/9563)	**0.5%** (49/9623)	-
	14-20 days	**0.1%** (8/9563)	**0.2%** (17/9623)	-
	21-27 days	**0%** (2/9563)	**0.1%** (9/9623)	-
	28-34 days	**0.1%** (6/9563)	**0.1%** (12/9623)	-

	35-69 days	**0%** (0/9563)	**0.1%** (14/9623)	-
	70-140 days	**0%** (0/9563)	**0%** (3/9623)	-
2.8.b. (If yes) what pain assessment tool was used: *Out of patients who received a pain assessment **Out of all patients where a pain assessment was appropriate	The Abbey Pain scale	**9.6%** (917/9563)	**10.3%** (991/9623)	-
	Pain assessment in advanced dementia (PAINAID)	**1.1%** (108/9563)	**1.3%** (125/9623)	-
	Checklist of nonverbal pain indicators (CNPI) observation score	**2.3%** (219/9563)	**1%** (98/9623)	-
	Question	**62.7%** (5996/9563)	**65.9%** (6338/9623)	-
	None	-	**0%** (3/9623)	-
	Other	**28.8%** (2752/9563)	**26.6%** (2561/9623)	-
	Patients who had questioning as their only pain assessment*	**58.5%** (5595/9563)	**61.1%** (5880/9623)	-
	Pain assessment using a structured tool**	**40.6%** (3968/9784)	**35.6%** (3743/10505)	-
2.9 Was pain reassessed?	Yes, within 24 hours of first pain assessment	**85.3%** (8159/9563)	**83.1%** (7995/9623)	-
	Yes, more than 24 hours after first pain assessment	**9.3%** (893/9563)	**9.3%** (895/9623)	-
	No	**5.1%** (487/9563)	**7.6%** (733/9623)	-
	Unknown/Not documented	**0.3%** (25/9563)	**0%** (0/9623)	-

	Any pain reassessment	**94.7%** (9052/9563)	**92.4%** (8890/9623)	-
Days from first pain assessment to pain reassessment	0-1 days	**93.9%** (8498/9051)	**93%** (8267/8890)	-
	2-3 days	**4.2%** (382/9051)	**4.9%** (436/8890)	-
	4-6 days	**1.2%** (108/9051)	**1.3%** (117/8890)	-
	7-13 days	**0.5%** (47/9051)	**0.5%** (46/8890)	-
	14-20 days	**0.1%** (7/9051)	**0.1%** (9/8890)	-
	21-27 days	**0%** (4/9051)	**0.1%** (5/8890)	-
	28-34 days	**0%** (3/9051)	**0.1%** (8/8890)	-
	35-69 days	**0%** (2/9051)	**0%** (0/8890)	-
	70-140 days	**0%** (0/9051)	**0%** (1/8890)	-
2.9.b. (If yes) what pain assessment tool was used in reassessment:	The Abbey Pain scale	**9.4%** (854/9051)	**11.1%** (987/8890)	-
	Pain assessment in advanced dementia (PAINAID)	**1.2%** (113/9051)	**1%** (91/8890)	-
	Checklist of nonverbal pain indicators (CNPI) observation score	**2.1%** (191/9051)	**0.8%** (68/8890)	-
	Question	**61.5%** (5563/9051)	**64.1%** (5697/8890)	-
	None	-	**0%** (0/8890)	-

	Other	**29.7%** (2691/9051)	**28.2%** (2504/8890)	-
	Patients who had questioning as their only repeat pain assessment	**57.8%** (5227/9051)	**59.5%** (5288/8890)	-

Discharge

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
2.10. Were the required actions to prepare for discharge identified?	Yes, within 24 hours of admission	**39.9%** (3936/9860)	**38.7%** (4118/10642)	**51.3%** (2665/5191)
	Yes, more than 24 hours after admission	**47.9%** (4725/9860)	**46.8%** (4981/10642)	-
	No	**12.2%** (1199/9860)	**14.5%** (1541/10642)	-
	Any discharge plan initiated	**87.8%** (8661/9860)	**85.5%** (9099/10642)	-
2.11. Has an expected date of discharge been recorded?	Yes, within 24 hours of admission	**33.8%** (3333/9860)	**31.9%** (3391/10642)	-
	Yes, more than 24 hours after admission	**33%** (3253/9860)	**32.2%** (3427/10642)	-
	No	**33.2%** (3274/9860)	**35.9%** (3822/10642)	-
	Yes (combined)	**66.8%** (6586/9860)	**64.1%** (6818/10642)	-

Days from admission that the required actions to prepare for discharge were identified	0-1 days	**51.3%** (4442/8661)	**48.6%** (4423/9097)	-
	2-3 days	**21.3%** (1842/8661)	**22.1%** (2007/9097)	-
	4-6 days	**13.5%** (1165/8661)	**14.1%** (1286/9097)	-
	7-13 days	**9.5%** (820/8661)	**9.8%** (893/9097)	-
	14-20 days	**2.7%** (235/8661)	**2.9%** (264/9097)	-
	21-27 days	**0.9%** (78/8661)	**1.2%** (106/9097)	-
	28-34 days	**0.5%** (45/8661)	**0.7%** (65/9097)	-
	35-69 days	**0.4%** (34/8661)	**0.5%** (50/9097)	-
	70-140 days	**0%** (0/8661)	**0%** (3/9097)	-
2.12. Was a named member of staff (nurse/consultant/discharge coordinator) or named team responsible clearly identified to coordinate discharge?	Yes, within 24 hours of admission	**40.8%** (4025/9860)	**39%** (4152/10642)	-
	Yes, more than 24 hours after admission	**34.8%** (3430/9860)	**33.2%** (3538/10642)	-
	No	**24.4%** (2405/9860)	**27.7%** (2949/10642)	-
	Yes (combined)	**75.6%** (7455/9860)	**72.3%** (7690/10642)	**85.3%** (5950/6975)
2.13 If the discharge planning was not initiated within 24 hours of admission, please select the recorded reason why?	Patient acutely unwell	**45.6%** (2629/5766)	**46.9%** (3067/6540)	**61.3%** (1239/2020)
	Patient awaiting assessment	**17.7%** (1021/5766)	**15.8%** (1035/6540)	**8.8%** (177/2020)
	Patient awaiting history/results	**6.4%** (370/5766)	**4.9%** (320/6540)	**7.7%** (156/2020)
	Patient awaiting surgery	**5.8%** (335/5766)	**5.4%** (355/6540)	**9.6%** (193/2020)
	Patient presenting confusion	**4.6%** (266/5766)	**3.9%** (256/6540)	**5.8%** (118/2020)

	Patient on end of life plan	**4.3%** (248/5766)	**4.4%** (288/6540)	**0%** (1/2020)
	Patient transferred to another hospital	**0.5%** (30/5766)	**0.7%** (43/6540)	**0.2%** (5/2020)
	Patient unresponsive	**0.3%** (16/5766)	**0.3%** (20/6540)	**0.3%** (7/2020)
	Patient being discharged to nursing/residential care	**1.9%** (110/5766)	**2.1%** (139/6540)	**5%** (100/2020)
	Other (please specify)	**4.5%** (257/5766)	**3.4%** (224/6540)	**1.2%** (24/2020)
	No reason recorded	**8.4%** (482/5766)	**9.4%** (612/6540)	-
	Unknown/Not documented	**0%** (2/5766)	**2.8%** (181/6540)	-

Discharge Information

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
3.2 Has the patient been discharged?	Yes	**88.2%** (8549/9693)	**86.4%** (9164/10601)	-
	No, the patient died	**10.1%** (976/9693)	**11.5%** (1224/10601)	-
	No, still an inpatient	**1.7%** (168/9693)	**2%** (213/10601)	-
Length of stay in days	Minimum	**1**	**0**	-
	Maximum	**146**	**153**	-
	Median	**10**	**10**	-
	Mean	**15.1**	**16.1**	-

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Length of stay in weeks	Up to 1 week	**34%** (3241/9525)	**34.7%** (3589/10347)	-
	1-2 weeks	**27.6%** (2632/9525)	**25.4%** (2631/10347)	-
	2-3 weeks	**14.8%** (1414/9525)	**13.8%** (1426/10347)	-
	3-4 weeks	**8.5%** (807/9525)	**8.7%** (898/10347)	-
	4-5 weeks	**5.1%** (484/9525)	**5.8%** (595/10347)	-
	5-10 weeks	**8.5%** (813/9525)	**9.7%** (999/10347)	-
	10-20 weeks	**1.4%** (134/9525)	**2%** (209/10347)	-
3.4 Place in which the person was living or receiving care after discharge	Own home	**48.4%** (4138/8549)	**50.7%** (4650/9164)	-
	Respite care	**1.3%** (114/8549)	**0.6%** (55/9164)	-
	Rehabilitation ward	**2.2%** (191/8549)	**2.1%** (192/9164)	-
	Psychiatric ward	**0.5%** (43/8549)	**0.5%** (47/9164)	-
	Carer's home	**2.4%** (204/8549)	**1.7%** (152/9164)	-
	Intermediate/ Community rehabilitation care	**3.4%** (292/8549)	**3.3%** (305/9164)	-
	Residential care	**18%** (1535/8549)	**17.6%** (1610/9164)	-
	Nursing home	**21.4%** (1831/8549)	**20.9%** (1914/9164)	-
	Palliative care	**0.6%** (50/8549)	**0.7%** (68/9164)	-
	Transfer to another hospital	**1.6%** (135/8549)	**1.3%** (120/9164)	-
	Long stay care	**0.2%** (16/8549)	**0.1%** (13/9164)	-

	Unknown/Not documented	**0%** (0/8549)	**0.4%** (38/9164)	-
Change in place of care from admission to discharge	Own home/short term to long term care	**12.1%** (1012/8381)	**12.9%** (1156/8981)	-
	Long term to own home/short term	**3%** (252/8381)	**3.4%** (309/8981)	-
	No change	**84.9%** (7117/8381)	**83.7%** (7516/8981)	-
3.5 At the point of discharge was the patient based on the right ward for the responsible consultant specialty?	Yes	**92.4%** (8798/9525)	**92%** (9558/10388)	-
	No	**7.6%** (727/9525)	**7.6%** (788/10388)	-
	Unknown/Not documented	**0%** (0/9525)	**0.4%** (42/10388)	-
3.6 (If still an inpatient) is the patient based on the right ward for the responsible consultant specialty?	Yes	**92.9%** (156/168)	**96.7%** (206/213)	-
	No	**5.4%** (9/168)	**2.8%** (6/213)	-
	Unknown/Not documented	**1.8%** (3/168)	**0.5%** (1/213)	-
Overall percentage of outliers	Patient not on right ward	**7.6%** (736/9693)	**7.5%** (794/10558)	-
3.7 Was the patient receiving end of life care/on an end of life care plan?	Yes	**12.5%** (1210/9693)	**80.6%** (987/1224)	-
	No	**87.2%** (8453/9693)	**19%** (233/1224)	-
This option was only available to answer if the patient had died in R5. In R6, this question was asked to everyone so the data is not directly comparable.	Unknown/Not documented	**0.3%** (30/9693)	**0.3%** (4/1224)	-

Appendix VII: Annual Dementia Statement Summary Tables

† Excludes NA responses

Admissions

Question	Response	National Audit Round 6 % Num/Den (*outliers removed)*	National Audit Round 5 % Num/Den (*outliers removed)*
1.1. How many admissions (overall) do you have within a year (past year)?*	Minimum	3,756	11,186
	Maximum	471,696	198,460
	Median	72,640	60,432
	Average	81,340	69,590
	Total hospitals responded	55.2% (95/172)	92.3% (155/168)
1.2. How many of these admissions were people with dementia?*	Minimum	207	33
	Maximum	29,831	29,769
	Median	1,895	1,871
	Average	2,593	2,335
	Total hospitals responded	55.2% (95/172)	92.3% (155/168)
1.3. % of people with dementia admitted to the hospital	Minimum	0.5%	0.1%
	Maximum	20.8%	15%
	Median	3%	3%

	Average	**3.7%**	**3.6%**
	Total hospitals responded	**55.2%** (95/172)	**92.3%** (155/168)
1.4. Do dementia leads in your hospital think that most people with dementia are identified during admission?	Yes	**70.3%** (121/172)	**62.5%** (105/168)
	No	**27.9%** (48/172)	**33.9%** (57/168)
	Not Known/ Undocumented	**1.7%** (3/172)	**3.6%** (6/168)
1.5. Can you estimate a proportion of people with dementia who may not be identified during admission?	Less than 5%	**23.8%** (41/172)	**28.6%** (48/168)
	Up to 10%	**19.8%** (34/172)	**10.1%** (17/168)
	Up to 15%	**7.6%** (13/172)	**8.3%** (14/168)
	Up to 20%	**8.1%** (14/172)	**6.5%** (11/168)
	Up to 25%	**5.2%** (9/172)	**8.3%** (14/168)
	An unknown number	**35.5%** (61/172)	**38.1%** (64/168)

Assessment and Discharge

Question	From Round 6 National Casenote Data	From Round 5 National Casenote Data
2.1. % of people who received an initial assessment / screen for delirium	**91.5%** (9020/9860)	**87.1%** (9269/10642)
2.2. % who received delirium assessment / screen within 24 hours *Of those who had an assessment / screen	**85.9%** (8467/9860)	**80.9%** (8605/10642)
2.3. % of people who received an assessment for pain†	**97.7%** (9563/9784)	**91.6%** (9623/10505)

2.4. % of people who received pain assessment within 24 hours†	**92.7%** (9072/9784)	**85.1%** (8936/10505)
3.1. % of patients who had discharge planning started within 24 hours of admission†	**39.9%** (3936/9860)	**38.7%** (4118/10642)
3.2. Median length of stay *Of those who were discharged or died at end of data collection*	**10 days**	**10 days**

Feedback about the care provided to people with dementia

Question	Response	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den
4.1. Rating of overall care quality by carers	Calculated from R6 National Carer Questionnaire Data Q8	**67.8%**	**65.6%**
4.2. Rating of communication by carers	Calculated from R6 National Carer Questionnaire Data Q5,6,7	**63.3%**	**60%**

4.3. Do you collect feedback on a regular basis from people with dementia admitted to the hospital?	Yes	**49.4%** (85/172)	**35.7%** (60/168)
	No	**44.2%** (76/172)	**58.9%** (99/168)
	Not Known/ Undocumented	**6.4%** (11/172)	**5.4%** (9/168)
4.4. Based on the past year, what is the average number of people with dementia per month providing feedback? *If 'Yes' to 4.3*	Minimum	**1**	**1**
	Maximum	**More than 10**	**More than 10**
	Median	**5**	**5**
	Average	**4.9**	**5.3**
	Total hospitals responded	**48.8%** (84/172)	**35.7%** (60/168)
	1	**17.9%** (15/84)	**16.7%** (10/60)
	2	**11.9%** (10/84)	**10%** (6/60)
	3	**13.1%** (11/84)	**11.7%** (7/60)
	4	**6%** (5/84)	**10%** (6/60)
	5	**17.9%** (15/84)	**20%** (12/60)
	6	**8.3%** (7/84)	**0%** (0/60)
	7	**2.4%** (2/84)	**1.7%** (1/60)
	8	**2.4%** (2/84)	**6.7%** (4/60)
	9	**2.4%** (2/84)	**0%** (0/60)
	10	**3.6%** (3/84)	**6.7%** (4/60)
	More than 10	**14.3%** (12/84)	**16.7%** (10/60)

Governance

Question	Response	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den
5.1. The name of the personal information document or scheme you use in the hospital†	All about me	**16.7%** (28/168)	**8.3%** (14/168)
	Butterfly scheme	**4.2%** (7/168)	**6%** (10/168)
	Forget me not	**8.9%** (15/168)	**7.7%** (13/168)
	Getting to know me	**4.8%** (8/168)	**4.8%** (8/168)
	Hospital passport	**3%** (5/168)	**1.8%** (3/168)
	This is Me	**49.4%** (83/168)	**42.9%** (72/168)
	Other	**3%** (5/168)	**14.9%** (25/168)
	What matters to me	**4.2%** (7/168)	-
	Reach	**2.4%** (4/168)	-
	My life	**1.2%** (2/168)	-
	Knowing me	**1.2%** (2/168)	-
	None	**1.2%** (2/168)	**3%** (5/168)
Any Personal Information Document or Scheme		**97.7%** (168/172)	**97%** (163/168)

5.2. Number of people with dementia who had a bedside check	Minimum	0	0
	Maximum	325	4332
	Median	10	10
	Average	20.2	59.6
	Total hospitals responded	95.3% (164/172)	91.1% (153/168)
5.3. Number of people with dementia who had an up to date document with their personal information at their bedside	Minimum	0	0
	Maximum	150	4129
	Median	6	5
	Average	9.8	39.4
	Total hospitals responded	94.8% (163/172)	91.1% (153/168)
% of people with an up-to-date document with their personal information at their bedside * Average based on more than 7 bedside checks	Minimum	0%	0%
	Maximum	100%	100%
	Median	50%	42.3%
	Average	54.5%	46.3%
	Total hospitals with more than 7 bedside checks	90.1% (155/172)	80.9% (136/168)

Falls 5.4. Does your DATIX or other monitoring system identify the proportion of people with dementia within the totals for: Falls in hospital	Yes	**70.9%** (122/172)	**63.7%** (107/168)
	No	**28.5%** (49/172)	**31.5%** (53/168)
	Not Known/ Undocumented	**0.6%** (1/172)	**4.8%** (8/168)
5.4.1. Is this information presented to the Board (or responsible subcommittee or strategic oversight committee) with an improvement plan: *If 'Yes' to 5.4*	Quarter	**58.2%** (71/122)	**59.8%** (64/107)
	Six months	**6.6%** (8/122)	**7.5%** (8/107)
	Year	**4.9%** (6/122)	**2.8%** (3/107)
	Not specified	**20.5%** (25/122)	**12.1%** (13/107)
	No	**9.8%** (12/122)	**15.9%** (17/107)
	Not Known/ Undocumented	**0%** (0/122)	**1.9%** (2/107)
Readmissions 5.5. Does your CAMIS or other monitoring system identify the proportion of people with dementia within the totals for: Readmissions within 30 days	Yes	**47.7%** (82/172)	**46.4%** (78/168)
	No	**49.4%** (85/172)	**49.4%** (83/168)
	Not Known/ Undocumented	**2.9%** (5/172)	**4.2%** (7/168)

5.5.1. Is this information presented to the Board (or responsible subcommittee or strategic oversight committee) with an improvement plan: *If 'Yes' to 5.5*	Quarter	**41.5%** (34/82)	**43.6%** (34/78)
	Six months	**12.2%** (10/82)	**9%** (7/78)
	Year	**11%** (9/82)	**5.1%** (4/78)
	Not specified	**24.4%** (20/82)	**20.5%** (16/78)
	No	**11%** (9/82)	**19.2%** (15/78)
	Not Known/ Undocumented	**0%** (0/82)	**2.6%** (2/78)
Delayed discharges 5.6. Does your CAMIS or other monitoring system identify the proportion of people with dementia within the totals for: Delayed discharge	Yes	**38.4%** (66/172)	**36.9%** (62/168)
	No	**58.7%** (101/172)	**58.9%** (99/168)
	Not Known/ Undocumented	**2.9%** (5/172)	**4.2%** (7/168)
5.6.1. Is this information presented to the Board (or responsible subcommittee or strategic oversight committee) with an improvement plan: *If 'Yes' to 5.6*	Quarter	**40.9%** 27/66	**41.9%** (26/62)
	Six months	**12.1%** (8/66)	**6.5%** (4/62)
	Year	**6.1%** (4/66)	**1.6%** (1/62)
	Not specified	**28.8%** (19/66)	**30.6%** (19/62)
	No	**12.1%** (8/66)	**16.1%** (10/62)
	Not Known/ Undocumented	**0%** (0/66)	**3.2%** (2/62)

Pressure Ulcers 5.7. Does your DATIX or other monitoring system identify the proportion of people with dementia within the totals for: Pressure ulcers (newly developed in hospital)	Yes	**57.6%** (99/172)	**49.4%** (83/168)
	No	**41.3%** (71/172)	**46.4%** (78/168)
	Not Known/ Undocumented	**1.2%** (2/172)	**4.2%** (7/168)
5.7.1. Is this information presented to the Board (or responsible subcommittee or strategic oversight committee) with an improvement plan: *If 'Yes' to 5.7*	Quarter	**52.5%** (52/99)	**57.8%** (48/83)
	Six months	**4%** (4/99)	**6%** (5/83)
	Year	**8.1%** (8/99)	**1.2%** (1/83)
	Not specified	**24.2%** (24/99)	**20.5%** (17/83)
	No	**11.1%** (11/99)	**12%** (10/83)
	Not Known/ Undocumented	**0%** (0/99)	**2.4%** (2/83)
Incidents flagged as involving violence or aggression 5.8. Does your DATIX or other monitoring system identify the proportion of people with dementia within the totals for: Incidents flagged as violence/aggression	Yes	**62.2%** (107/172)	**58.3%** (98/168)
	No	**37.2%** (64/172)	**37.5%** (63/168)
	Not Known/ Undocumented	**0.6%** (1/172)	**4.2%** (7/168)

5.8.1. Is this information presented to the Board (or responsible subcommittee or strategic oversight committee) with an improvement plan: *If 'Yes' to 5.8*	Quarter	**54.2%** (58/107)	**53.1%** (52/98)
	Six months	**7.5%** (8/107)	**10.2%** (10/98)
	Year	**5.6%** (6/107)	**3.1%** (3/98)
	Not specified	**22.4%** (24/107)	**20.4%** (20/98)
	No	**10.3%** (11/107)	**11.2%** (11/98)
	Not Known/ Undocumented	**0%** (0/107)	**2%** (2/98)
Percentage of Hospitals that had monitoring systems in place	All monitoring systems	**27.9%** (48/172)	**22%** (37/168)
	At least one monitoring system	**75%** (129/172)	**73.8%** (124/168)
	No monitoring system	**22.7%** (39/172)	**21.4%** (36/168)
	Not Known/ Undocumented	**2.3%** (4/172)	**4.8%** (8/168)
5.9. Do you have a dementia strategy group/working party?	Yes	**82%** (141/172)	**82.1%** (138/168)
	No	**16.3%** (28/172)	**13.7%** (23/168)
	Not Known/ Undocumented	**1.7%** (3/172)	**4.2%** (7/168)
5.9.1. How often do they meet? *If 'Yes' to 5.9*	Once a quarter or more	**87.2%** (123/141)	**88.4%** (122/138)
	Every 3-6 months	**7.8%** (11/141)	**8%** (11/138)
	Every 6-12 months	**4.3%** (6/141)	**2.9%** (4/138)
	Every 18-24 months	**0%** (0/141)	**0.7%** (1/138)

	Not Known/ Undocumented	**0.7%** (1/141)	**0%** (0/138)
5.9.2. Please indicate who is involved: *If 'Yes' to 5.9* *	Trust dementia leads	**98.6%** (139/141)	**100%** (138/138)
	Patient/ public representatives	**49.6%** (70/141)	**44.9%** (62/138)
	Local Healthwatch	**28.4%** (40/141)	**20.3%** (28/138)
	People with dementia and carers	**37.6%** (53/141)	**35.5%** (49/138)
	Local campaigning groups/ charities	**55.3%** (78/141)	**51.4%** (71/138)
Distribution of Dementia strategy group involvement	No Dementia strategy group	**17.4%** (30/172)	**13.7%** (23/168)
	At least one group involved	**68.6%** (118/172)	**75.6%** (127/168)
	All groups involved	**12.2%** (21/172)	**6.5%** (11/168)
	Not known/ Undocumented	**1.7%** (3/172)	**4.2%** (7/168)
5.10.1. Is the hospital signed up to: Johns Campaign	Yes	**90.1%** (155/172)	**87.5%** (147/168)
	No	**7%** (12/172)	**8.3%** (14/168)
	Not Known/ Undocumented	**2.9%** (5/172)	**4.2%** (7/168)

5.10.2. Is the hospital signed up to: Dementia Friendly Hospitals Charter	Yes	82% (141/172)	85.1% (143/168)
	No	15.7% (27/172)	11.3% (19/168)
	Not Known/ Undocumented	2.3% (4/172)	3.6% (6/168)

Staff expertise and training

Question	Response	National Audit Round 6 %	National Audit Round 5 % Num/Den
6.1. Does your Hospital/Trust have a lead dementia Nurse	Yes	93% (160/172)	-
	No	5.2% (9/172)	-
	Not Known/ Undocumented	1.7% (3/172)	-
6.1.1.What level is this reported at	Hospital	12.4% (21/169)	-
	Trust	87.6% (148/169)	-
	Not Known/ Undocumented	0% (0/169)	-
6.1.2. Number of lead nurses for dementia employed by your Hospital/Trust *NB: Some hospitals responded 'no' to 6.1 but responded to 6.1.2*	Minimum	0	0
	Maximum	20	6
	Median	2	1
	Average	2.5	1.4
	Total hospitals responded	95.9% (165/172)	95.2% (160/168)

6.2. Does your Hospital/Trust have consultant physicians who are specialists for dementia	Yes	**79.7%** (137/172)	-
	No	**19.2%** (33/172)	-
	Not Known/ Undocumented	**1.2%** (2/172)	-
6.2.1. What level is this reported at	Hospital	**17.6%** (30/170)	-
	Trust	**82.4%** (140/170)	-
	Not Known/ Undocumented	**0%** (0/170)	-
6.2.2. Number of consultant physicians who are specialists for dementia employed by your Trust *NB: Some hospitals responded 'no' to 6.2 but responded to 6.2.2*	Minimum	**0**	0
	Maximum	**39**	20
	Median	**1**	1
	Average	**3.4**	2.6
	Total hospitals responded	**98.3%** (169/172)	**92.9%** (156/168)
6.3. Number of Allied Healthcare Professionals who are specialists in dementia working in your Trust	Minimum	**0**	0
	Maximum	**44**	94
	Median	**1**	0
	Average	**3.6**	3.2
	Total hospitals responded	**97.7%** (168/172)	**93.5%** (157/168)
6.4. % of all staff employed by your hospital OR Trust who have received Tier 1 dementia training	Minimum	**0%**	0%
	Maximum	**100%**	100%

	Median	**92%**	**86.4%**
	Average	**77.4%**	**75.7%**
	Hospitals with 0% staff trained	**0.7%** (1/139)	**0.7%** (1/135)
	Hospitals with up to 50% staff trained	**15.1%** (21/139)	**17%** (23/135)
	Hospitals with up to 75% staff trained	**7.9%** (11/139)	**8.9%** (12/135)
	Hospitals with up to 100% staff trained	**76.3%** (106/139)	**73.3%** (99/135)
	Total hospitals responded	**80.8%** (139/172)	**80.4%** (135/168)
% of Tier 1 dementia trained staff employed by the hospital/trust is unknown	Yes	**19.2%** (33/172)	**19.6%** (33/168)
	No	**80.8%** (139/172)	**80.4%** (135/168)
6.4.1. What level is this reported at? *If 6.4 is not unknown*	Hospital	**14.4%** (20/139)	**14.8%** (20/135)
	Trust	**85.6%** (119/139)	**85.2%** (115/135)
6.5. % of staff working on your adult wards in your hospital OR across your Trust who have received Tier 2 dementia training	Minimum	**0%**	**0%**
	Maximum	**96.8%**	**100%**
	Median	**45%**	**45%**

	Average	**46.4%**	**44.8%**
	Hospitals with 0% staff trained	**6.1%** (6/99)	**7.2%** (7/97)
	Hospitals with up to 50% staff trained	**47.5%** (47/99)	**43.3%** (42/97)
	Hospitals with up to 75% staff trained	**14.1%** (14/99)	**21.6%** (21/97)
	Hospitals with up to 100% staff trained	**32.3%** (32/99)	**27.8%** (27/97)
	Total hospitals responded	**57.6%** (99/172)	**57.7%** (97/168)
% of Tier 2 dementia trained staff working on adult wards OR across the Trust is unknown	Yes	**42.4%** (73/172)	**42.3%** (71/168)
	No	**57.6%** (99/172)	**57.7%** (97/168)
6.5.1. What level is this reported at?	Hospital	**18.2%** (18/99)	**14.4%** (14/97)
	Trust	**81.8%** (81/99)	**85.6%** (83/97)
6.6. Do you require contracts with external providers (for services such as catering and security) to provide their staff with dementia awareness training, where staff come into contact with people with dementia?	Yes	**33.7%** (58/172)	**40.5%** (68/168)
	No	**63.4%** (109/172)	**54.8%** (92/168)
	Not Known/ Undocumented	**2.9%** (5/172)	**4.8%** (8/168)
6.6.1. Who is this for? *If 'Yes' to 6.6*	All contracted services	**44.8%** (26/58)	**50%** (34/68)

	All contracted services with staff working on adult wards	**6.9%** (4/58)	**13.2%** (9/68)
	Some contracted services	**48.3%** (28/58)	**36.8%** (25/68)
	Not Known/ Undocumented	**0%** (0/58)	**0%** (0/68)

Nutrition

Question	Response	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den
7.1. Total number of adult wards	Minimum	4	5
	Maximum	85	85
	Median	21	21
	Average	23.6	23.8
	Total hospitals responded	**97.7%** (168/172)	**94.6%** (159/168)
7.2. Total number of adult wards where finger foods are available as meal options for each meal	Minimum	0	0
	Maximum	85	85
	Median	19	19
	Average	21.2	21.2
	Total hospitals responded	**97.7%** (168/172)	**94.6%** (159/168)
	Minimum	**0%**	**0%**

7.3. % of adult wards where finger foods are available as a meal option	Maximum	**100%**	**100%**
	Median	**100%**	**100%**
	Average	**89.6%**	**89.6%**
	Total hospitals responded	**97.7%** (168/172)	**94.6%** (159/168)
7.4. Total number of adult wards where people with dementia can have snack foods as a meal replacement or at any time as a supplement	Minimum	**0**	**0**
	Maximum	**85**	**83**
	Median	**20**	**20**
	Average	**22.8**	**22.9**
	Total hospitals responded	**97.7%** (168/172)	**94.6%** (159/168)
7.5. % of adult wards where people with dementia can have snack foods as a meal replacement or at any time as a supplement	Minimum	**0%**	**0%**
	Maximum	**100%**	**100%**
	Median	**100%**	**100%**
	Average	**95.2%**	**95.3%**
	Total hospitals responded	**97.7%** (168/172)	**94.6%** (159/168)

Environment

Question	Response	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den
8.1. 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'?	Taken place throughout the hospital	**48.3%** (83/172)	**35.7%** (60/168)
	Taken place on all adult wards and public areas	**4.1%** (7/172)	**8.9%** (15/168)
	Taken place on all adult wards	**2.9%** (5/172)	**6%** (10/168)
	Taken place on all care of the elderly wards	**9.9%** (17/172)	**11.9%** (20/168)
	Taken place on some wards	**23.8%** (41/172)	**26.8%** (45/168)
	Not taken place	**7.6%** (13/172)	**5.4%** (9/168)
	Not Known/ Undocumented	**3.5%** (6/172)	**5.4%** (9/168)
8.2. Environmental changes based on the review are:	Completed	**12.4%** (19/153)	**11.9%** (20/168)
	Underway	**62.1%** (95/153)	**52.4%** (88/168)
	Planned but not yet underway	**9.2%** (14/153)	**8.3%** (14/168)
	Planned but no funding has been identified	**7.2%** (11/153)	**7.1%** (12/168)
	Not yet planned	**9.2%** (14/153)	**13.1%** (22/168)
	Not Known/ Undocumented	**0%** (0/153)	**7.1%** (12/168)

Appendix VIII: Carer Questionnaire Statement Summary Tables

Carer Questionnaire Round 6 National Results (previous 2 rounds shown for comparison)

† 'Don't know' and 'I don't need/ want any support' responses were excluded from the sample sizes of relevant questions.

Please see below for Carer Questionnaire Complete Raw Data Summary.

NB: All Carer Questionnaires submitted online for Round 6 relating to earlier than 2023 were excluded from this summary.

Carer Scores

The overall Care Quality score is calculated using responses to question 8 from the carer questionnaire. The Rating of Communication score is calculated using responses to questions 5-7.

Question	National Audit Round 6 %	National Audit Round 5 %	National Audit Round 4 %
Carer Rating of Overall Care Quality	67.8%	65.6%	72%
Carer Rating of Communication	63.3%	59.5%	65%

Relationship to Patient

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
Which of these best describes your relationship to the person you look after?	Spouse or partner	**38.8%** (919/2366)	**36.3%** (802/2212)	**32.5%** (1529/4709)
	Family Member	**50.6%** (1197/2366)	**52%** (1151/2212)	**56.3%** (2649/4709)
	Friend	**4.8%** (113/2366)	**5.7%** (125/2212)	**5.5%** (261/4709)
	Professional carer (health or social	**4.4%** (103/2366)	**4.6%** (102/2212)	**4.7%** (221/4709)
	Other	**1.4%** (34/2366)	**1.4%** (32/2212)	**1%** (49/4709)
Are you one of the main carers for the person you look after? For example, family carer or key worker.	Yes	**80.7%** (1682/2085)	**79%** (1564/1981)	**76%** (3268/4300)
	No	**19.3%** (403/2085)	**21%** (417/1981)	**24%** (1032/4300)

Patient Care

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
1. Do you feel that hospital staff were well informed and understood the needs of the person you look after? †	Yes, definitely	**47.7%** (1098/2300)	**42%** (901/2143)	**51.1%** (2368/4638)
	Yes, to some extent	**40.9.%** (941/2300)	**44.4%** (952/2143)	**40.7%** (1888/4638)
	No	**11.3%** (261/2300)	**13.5%** (290/2143)	**8.2%** (382/4638)
2. Do you feel confident that hospital staff delivered high quality care that was appropriate to the needs of the person you look after? †	Yes, definitely	**49.7%** (1148/2309)	**49.7%** (1066/2144)	**58.7%** (2728/4649)
	Yes, to some extent	**39.8%** (920/2309)	**39.2%** (840/2144)	**33.8%** (1571/4649)
	No	**10.4%** (241/2309)	**11.1%** (238/2144)	**7.5%** (350/4649)

Communication

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
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. †	Yes, definitely	**50.2%** (1117/2223)	**48.2%** (992/2058)	**58.5%** (2641/4518)
	Yes, to some extent	**37.6%** (835/2223)	**37.6%** (774/2058)	**32.6%** (1473/4518)
	No	**12.2%** (271/2223)	**14.2%** (292/2058)	**8.9%** (404/4518)
4. Was the person you look after treated with respect by hospital staff? †	Yes, definitely	**70.4%** (1612/2289)	**70.2%** (1488/2119)	**77.5%** (3598/4640)
	Yes, to some extent	**25.5%** (584/2289)	**25.8%** (546/2119)	**20.2%** (939/4640)

	No	**4.1%** (93/2289)	**4%** (85/2119)	**2.2%** (103/4640)
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. †	Yes, definitely	**42.9%** (987/2301)	**38.7%** (827/2138)	**45.9%** (2115/4609)
	Yes, to some extent	**39%** (898/2301)	**39.7%** (848/2138)	**38.5%** (1776/4609)
	No	**18.1%** (416/2301)	**21.7%** (463/2138)	**15.6%** (718/4609)
6. Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care? †	Yes, definitely	**46%** (1043/2265)	**42.2%** (898/2127)	**51.1%** (2317/4535)
	Yes, to some extent	**37.7%** (854/2265)	**36.8%** (782/2127)	**34.8%** (1577/4535)
	No	**16.2%** (368/2265)	**21%** (447/2127)	**14.1%** (641/4535)
7. Did hospital staff ask you about the needs of the person you look after to help plan their care? †	Yes, definitely	**45.6%** (1044/2288)	**42.9%** (919/2144)	**48.3%** (2193/4545)
	Yes, to some extent	**33.9%** (776/2288)	**32.8%** (704/2144)	**34.3%** (1561/4545)
	No	**20.5%** (468/2288)	**24.3%** (521/2144)	**17.4%** (791/4545)

Overall

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
8. Overall, how would you rate the care received by the person you look after during the hospital stay?	Excellent	29.6% (697/2357)	28.6% (631/2208)	38.2% (1798/4704)
	Very good	34.6% (815/2357)	30.7% (677/2208)	33.6% (1580/4704)
	Good	19.1% (450/2357)	19.7% (435/2208)	15.8% (745/4704)
	Fair	11% (259/2357)	14.5% (320/2208)	8.5% (402/4704)
	Poor	5.8% (136/2357)	6.6% (145/2208)	3.8% (179/4704)
9. How likely would you be to recommend the service to friends and family if they needed similar care or treatment? †	Extremely likely	37.3% (849/2279)	36% (767/2129)	46.1% (2126/4608)
	Likely	38.4% (876/2279)	35.7% (759/2129)	34.1% (1571/4608)
	Neither likely nor unlikely	14.2% (323/2279)	15.9% (338/2129)	12% (551/4608)
	Unlikely	5.7% (130/2279)	7.9% (169/2129)	4.4% (205/4605)
	Extremely unlikely	4.4% (101/2279)	4.5% (96/2129)	3.4% (155/4605)
10. Overall, how satisfied are you with the support you have received from this hospital to help you in your role as a carer? †	Very satisfied	45.6% (1012/2221)	42.8% (882/2063)	53.8% (2354/4377)
	Somewhat satisfied	37.9% (842/2221)	37.1% (765/2063)	32.4% (1420/4377)
	Somewhat dissatisfied	9.6% (213/2221)	11.9% (246/2063)	9.4% (413/4377)
	Very dissatisfied	6.9% (154/2221)	8.2% (170/2063)	4.3% (190/4377)

About you

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
1. Gender	Male	**32.2%** (752/2332)	**31.8%** (688/2163)	**31.5%** (1460/4641)
	Female	**65.9%** (1536/2332)	**66.7%** (1443/2163)	**67.4%** (3128/4641)
	Other	**0.1%** (3/2332)	**0.3%** (7/2163)	**0.1%** (3/4641)
	Prefer not to say	**1.8%** (41/2332)	**1.2%** (25/2163)	**1.1%** (50/4641)
2. Age	18-24 years	**0.8%** (18/2341)	**0.4%** (8/2188)	**1%** (46/4658)
	25-34 years	**1.8%** (43/2341)	**1.9%** (42/2188)	**3.3%** (154/4658)
	35-44 years	**5%** (117/2341)	**5.3%** (115/2188)	**6%** (280/4658)
	45-54 years	**14.5%** (340/2341)	**15.5%** (340/2188)	**16.9%** (787/4658)
	55-64 years	**24.2%** (566/2341)	**23.9%** (524/2188)	**24.5%** (1139/4658)
	65-74 years	**18.1%** (424/2341)	**18.9%** (413/2188)	**18.9%** (879/4658)
	75-84 years	**24.2%** (567/2341)	**23.9%** (523/2188)	**20.1%** (934/4658)
	85 years and over	**9.1%** (213/2341)	**8.7%** (191/2188)	**8.2%** (384/4658)
	Prefer not to say	**2.3%** (53/2341)	**1.5%** (32/2188)	**1.2%** (55/4658)
3. Ethnicity	White/White British	**84.5%** (1936/2290)	**85.8%** (1852/2159)	**87.2%** (4003/4593)
	Black/Black British	**4.5%** (102/2290)	**4.3%** (93/2159)	**3.6%** (167/4593)
	Asian/Asian British	**4.6%** (106/2290)	**3.8%** (82/2159)	**3.9%** (177/4593)

	Mixed	**1.7%** (39/2290)	**2.6%** (56/2159)	**1.4%** (63/4593)
	Other	**1.6%** (36/2290)	**1.3%** (27/2159)	**1.7%** (80/4593)
	Prefer not to say	**3.1%** (71/2290)	**2.3%** (49/2159)	**2.2%** (103/4593)

Carer Questionnaire R6 vs R5 vs R4 National Results Complete Raw Data Summary

* All Carer Questionnaires collected from earlier than 2022 were excluded from this summary.

Relationship

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
Which of these best describes your relationship to the person you look after?	Spouse or partner	**38.8%** (919/2366)	**36.3%** (802/2212)	**32.5%** (1529/4709)
	Family Member	**50.6%** (1197/2366)	**52%** (1151/2212)	**56.3%** (2649/4709)
	Friend	**4.8%** (113/2366)	**5.7%** (125/2212)	**5.5%** (261/4709)
	Professional carer (health or social	**4.4%** (103/2366)	**4.6%** (102/2212)	**4.7%** (221/4709)
	Other	**1.4%** (34/2366)	**1.4%** (32/2212)	**1%** (49/4709)
Are you one of the main carers for the person you look after? For example, family carer or key worker.	Yes	**807.%** (1682/2085)	**79%** (1564/1981)	**76%** (3268/4300)
	No	**19.3%** (403/2085)	**21%** (417/1981)	**24%** (1032/4300)

Patient Care

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
1. Do you feel that hospital staff were well informed and understood the needs of the person you look after?	Yes, definitely	**46.5%** (1098/2363)	**40.7%** (901/2213)	**51.1%** (2368/4638)
	Yes, to some extent	**39.8%** (941/2363)	**43%** (952/2213)	**40.7%** (1888/4638)
	No	**11%** (261/2363)	**13.1%** (290/2213)	**8.2%** (382/4638)
	Don't know	**2.7%** (63/2363)	**3.2%** (70/2213)	-
2. Do you feel confident that hospital staff delivered high quality care that was appropriate to the needs of the person you look after?	Yes, definitely	**48.7%** (1148/2359)	**48.1%** (1066/2215)	**58.7%** (2728/4649)
	Yes, to some extent	**39%** (920/2359)	**37.9%** (840/2215)	**33.8%** (1571/4649)
	No	**10.2%** (241/2359)	**10.7%** (238/2215)	**7.5%** (350/4649)
	Don't know	**2.1%** (50/2359)	**3.2%** (71/2215)	-

Communication

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
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.	Yes, definitely	**47.3%** (1117/2360)	**44.9%** (992/2209)	**58.5%** (2641/4518)
	Yes, to some extent	**35.4%** (835/2360)	**35%** (774/2209)	**32.6%** (1473/4518)
	No	**11.5%** (271/2360)	**13.2%** (292/2209)	**8.9%** (404/4518)
	Don't know	**5.8%** (137/2360)	**6.8%** (151/2209)	-

4. Was the person you look after treated with respect by hospital staff?	Yes, definitely	**68.3%** (1612/2360)	**67.3%** (1488/2211)	**77.5%** (3598/4640)
	Yes, to some extent	**24.7%** (584/2360)	**24.7%** (546/2211)	**20.2%** (939/4640)
	No	**3.9%** (93/2360)	**3.8%** (85/2211)	**2.2%** (103/4640)
	Don't know	**3%** (71/2360)	**4.2%** (92/2211)	-
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.	Yes, definitely	**42%** (987/2351)	**37.4%** (827/2211)	**45.9%** (2115/4609)
	Yes, to some extent	**38.2%** (898/2351)	**38.4%** (848/2211)	**38.5%** (1776/4609)
	No	**17.7%** (416/2351)	**20.9%** (463/2211)	**15.6%** (718/4609)
	Don't know	**2.1%** (50/2351)	**3.3%** (73/2211)	-
6. Were you (or the patient, where appropriate) involved as much as you wanted to be in decisions about their care?	Yes, definitely	**44.4%** (1043/2348)	**40.6%** (898/2211)	**51.1%** (2317/4535)
	Yes, to some extent	**36.4%** (854/2348)	**35.4%** (782/2211)	**34.8%** (1577/4535)
	No	**15.7%** (368/2348)	**20.2%** (447/2211)	**14.1%** (641/4535)
	Don't know	**3.5%** (83/2348)	**3.8%** (84/2211)	-
7. Did hospital staff ask you about the needs of the person you look after to help plan their care?	Yes, definitely	**44.4%** (1044/2350)	**41.7%** (919/2202)	**48.3%** (2193/4545)
	Yes, to some extent	**33%** (776/2350)	**32%** (704/2202)	**34.3%** (1561/4545)
	No	**19.9%** (468/2350)	**23.7%** (521/2202)	**17.4%** (791/4545)
	Don't know	**2.6%** (62/2350)	**2.6%** (58/2202)	-

Overall

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
8. Overall, how would you rate the care received by the person you look after during the hospital stay?	Excellent	**29.6%** (697/2357)	**28.6%** (631/2208)	**38.2%** (1798/4704)
	Very good	**34.6%** (815/2357)	**30.7%** (677/2208)	**33.6%** (1580/4704)
	Good	**19.1%** (450/2357)	**19.7%** (435/2208)	**15.8%** (745/4704)
	Fair	**11%** (259/2357)	**14.5%** (320/2208)	**8.5%** (402/4704)
	Poor	**5.8%** (136/2357)	**6.6%** (145/2208)	**3.8%** (179/4704)
9. How likely would you be to recommend the service to friends and family if they needed similar care or treatment?	Extremely likely	**36.1%** (849/2353)	**34.8%** (767/2202)	**46.1%** (2126/4608)
	Likely	**37.2%** (876/2353)	**34.5%** (759/2202)	**34.1%** (1571/4608)
	Neither likely nor unlikely	**13.7%** (323/2353)	**15.3%** (338/2202)	**12%** (551/4608)
	Unlikely	**5.5%** (130/2353)	**7.7%** (169/2202)	**4.4%** (205/4605)
	Extremely unlikely	**4.3%** (101/2353)	**4.4%** (96/2202)	**3.4%** (155/4605)
	Don't know	**3.1%** (74/2353)	**3.3%** (73/2202)	-
10. Overall, how satisfied are you with the support you have received from this hospital to help you in your role as a carer?	Very satisfied	**43.3%** (1012/2337)	**40.3%** (882/2191)	**53.8%** (2354/4377)
	Somewhat satisfied	**36%** (842/2337)	**34.9%** (765/2191)	**32.4%** (1420/4377)
	Somewhat dissatisfied	**9.1%** (213/2337)	**11.2%** (246/2191)	**9.4%** (413/4377)
	Very dissatisfied	**6.6%** (154/2337)	**7.8%** (170/2191)	**4.3%** (190/4377)

	I don't need/want any support	5% (116/2337)	5.8% (128/2191)	-

About you

Question	Responses	National Audit Round 6 % Num/Den	National Audit Round 5 % Num/Den	National Audit Round 4 % Num/Den
1. Gender	Male	**32.2%** (752/2332)	**31.8%** (688/2163)	**31.5%** (1460/464)
	Female	**65.9%** (1536/2332)	**66.7%** (1443/2163)	**67.4%** (3128/4641)
	Other	**0.1%** (3/2332)	**0.3%** (7/2163)	**0.1%** (3/4641)
	Prefer not to say	**1.8%** (41/2332)	**1.2%** (25/2163)	**1.1%** (50/4641)
2. Age	18-24 years	**0.8%** (18/2341)	**0.4%** (8/2188)	**1%** (46/4658)
	25-34 years	**1.8%** (43/2341)	**1.9%** (42/2188)	**3.3%** (154/4658)
	35-44 years	**5%** (117/2341)	**5.3%** (115/2188)	**6%** (280/4658)
	45-54 years	**14.5%** (340/2341)	**15.5%** (340/2188)	**16.9%** (787/4658)
	55-64 years	**24.2%** (566/2341)	**23.9%** (524/2188)	**24.5%** (1139/4658)
	65-74 years	**18.1%** (424/2341)	**18.9%** (413/2188)	**18.9%** (879/4658)
	75-84 years	**24.2%** (567/2341)	**23.9%** (523/2188)	**20.1%** (934/4658)
	85 years and over	**9.1%** (213/2341)	**8.7%** (191/2188)	**8.2%** (384/4658)
	Prefer not to say	**2.3%** (53/2341)	**1.5%** (32/2188)	**1.2%** (55/4658)

3. Ethnicity	White/White British	**84.5%** (1936/2290)	**85.8%** (1852/2159)	**87.2%** (4003/4593)
	Black/Black British	**4.5%** (102/2290)	**4.3%** (93/2159)	**3.6%** (167/4593)
	Asian/Asian British	**4.6%** (106/2290)	**3.8%** (82/2159)	**3.9%** (177/4593)
	Mixed	**1.7%** (39/2290)	**2.6%** (56/2159)	**1.4%** (63/4593)
	Other	**1.6%** (36/2290)	**1.3%** (27/2159)	**1.7%** (80/4593)
	Prefer not to say	**3.1%** (71/2290)	**2.3%** (49/2159)	**2.2%** (103/4593)

Appendix IX: Acknowledgements

We would like to thank everyone who contributed to the National Audit of Dementia 2024 report.

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- Charlotte Deasy, Faculty of Old Age Psychiatry, Consultant Old Age Psychiatrists Northumberland Tyne and Wear NHS Foundation Trust, Honorary Senior Clinical Lecturer, Newcastle University
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- Sean Ninan, Consultant Geriatrician, Leeds Teaching Hospitals NHS Trust
- Kellie Smart, Lead Admiral Nurse, Tameside and Glossop NHS ICFT

Appendix X: List of Participating Sites

Addenbrooke's Hospital

Aintree Hospital

Airedale General Hospital

Alexandra General Hospital

Arrowe Park Hospital

Barnet Hospital

Barnsley Hospital

Basildon University Hospital

Bassetlaw District General Hospital

Bedford Hospital

Birmingham City Hospital

Blackpool Victoria Hospital

Bradford Royal infirmary

Bristol Royal Infirmary

Bronglais General Hospital

Broomfield Hospital

Calderdale Royal Hospital

Chelsea and Westminster Hospital

Chesterfield Royal Hospital

Chorley and South Ribble Hospital

Colchester General hospital

Conquest Hospital

Countess of Chester Hospital

County Hospital, Stafford

Croydon University Hospital

Cumberland Infirmary

Darent Valley Hospital

Derriford Hospital

Diana, Princess of Wales Hospital

Doncaster Royal Infirmary

Dorset County Hospital

Ealing Hospital

East Surrey Hospital

Eastbourne District General Hospital

Epsom Hospital

Fairfield General Hospital

Freeman Hospital

Friarage Hospital

Frimley Park Hospital

Furness general hospital

George Eliot Hospital

Glangwili General Hospital

Gloucestershire Royal Hospital

Good Hope Hospital

Great Western Hospital

Hampshire Hospitals NHS Foundation Trust

Harrogate District Hospital

Heartlands Hospital

Hereford County Hospital

Hillingdon Hospital

Hinchingbrooke Hospital

Homerton Hospital

Horton General Hospital

Huddersfield Royal Infirmary

Hull Royal Infirmary

Ipswich Hospital

James Cook University Hospital

James Paget Hospital

Kettering General Hospital

King George Hospital

King's College Hospital

King's Mill Hospital

Kingston Hospital

Leeds General Infirmary

Leicester Royal Infirmary

Leighton Hospital

Lincoln County Hospital

Lister Hospital

Luton and Dunstable University Hospital

Macclesfield District General Hospital

Maidstone Hospital

Manchester Royal Infirmary

Manor Hospital

Medway Maritime Hospital

Milton Keynes University Hospital

Morriston Hospital

Musgrove Park Hospital

Nevill Hall Hospital

New Cross Hospital

Norfolk and Norwich University Hospital

North Devon District Hospital

North Manchester General Hospital

North Middlesex University Hospital

Northampton General Hospital

Northern General Hospital

Northumbria Specialist Emergency Care Hospital

Northwick Park Hospital

Nottingham City Hospital

Peterborough City Hospital

Pilgrim Hospital

Pinderfields Hospital

Poole Hospital

Prince Charles Hospital

Prince Philip Hospital

Princess Alexandra Hospital

Princess of Wales Hospital

Princess Royal Hospital

Princess Royal Hospital

Princess Royal University Hospital

Queen Elizabeth Hospital Birmingham

Queen Elizabeth Hospital, Gateshead

Queen Elizabeth Hospital, Kings Lynn

Queen Elizabeth Hospital, Lewisham

Queen Elizabeth The Queen Mother Hospital

Queens Burton Hospital

Queen's Hospital

Queen's Medical Centre

Rochdale Infirmary

Rotherham Hospital

Royal Albert Edward Infirmary

Royal Blackburn Hospital

Royal Bolton Hospital

Royal Bournemouth Hospital

Royal Cornwall Hospital (Treliske)

Royal Derby Hospital

Royal Devon & Exeter (Wonford)

Royal Free Hampstead

Royal Glamorgan Hospital

Royal Gwent Hospital

Royal Lancaster Infirmary

Royal Liverpool Hospital

Royal Oldham Hospital

Royal Preston Hospital

Royal Shrewsbury Hospital

Royal Stoke University Hospital

Royal Surrey County Hospital

Royal Sussex County Hospital

Royal United Hospital

Royal Victoria Infirmary

Russells Hall Hospital

Salford Royal Hospital

Salisbury District Hospital

Sandwell Hospital

Scarborough General Hospital

Scunthorpe General Hospital

South Tyneside District Hospital

Southend University Hospital

Southmead Hospital

Southport and Ormskirk Hospital

St George's Hospital

St Helier Hospital

St James's University Hospital

St Mary's Hospital

St Mary's Hospital Isle of Wight

St Richard's Hospital

Stepping Hill Hospital

Stoke Mandeville Hospital

Sunderland Royal Hospital

Tameside General Hospital

Torbay Hospital

Tunbridge Wells Hospital

University College Hospital

University Hospital Coventry

University Hospital Lewisham

University Hospital Llandough

University Hospital of North Tees

University Hospital of Wales

Warrington Hospital

Warwick Hospital

Watford General Hospital

West Cumberland Hospital

West Middlesex University Hospital

West Suffolk Hospital

Weston General Hospital

Wexham Park Hospital

Whipps Cross University Hospital

Whiston Hospital

Whittington Hospital

William Harvey Hospital

Withybush General Hospital

Worcestershire Royal Hospital

Worthing Hospital

Wythenshawe Hospital

Yeovil District Hospital

York Hospital

Ysbyty Gwynedd

Ysbyty Ystrad Fawr