

Freedom of Information request 376-20

Request

Boarding comes in two types. The first is when patients are not admitted to the appropriate ward at the outset, and are admitted to a ward to which they would not have not normally been admitted, because of the needs of the service (e.g. pressures on the service).

The second is when patients having been treated in the appropriate ward at the outset are then subsequently moved ward, not because of their clinical need, but because of the needs of the service (e.g. pressures on the service).

BOARDING TYPE ONE

2015, 2016, 2017, 2018, 2019

1. Please confirm for each year listed above in relation to hospitals in your health board area how many patients with dementia were not admitted to the appropriate ward at the outset

2020 (January, February, March, April, May, June and July)

2. Please confirm for each month listed above in relation to hospitals in your health board area how many patients with dementia were not admitted to the appropriate ward at the outset

BOARDING TYPE TWO

2015, 2016, 2017, 2018, 2019

Please confirm for each year listed above in relation to hospitals in your health board area;

3. how many patients with dementia having been treated in the appropriate ward at the outset, were subsequently moved ward to meet the needs of the service, not because of their clinical need
4. how many patients with dementia having been treated in the appropriate ward at the outset, were subsequently moved ward more than once during their hospital stay to meet the needs of the service, not because of their clinical need
5. the most number of times during their hospital stay a patient with dementia, having been treated in the appropriate ward at the outset, was subsequently moved ward to meet the needs of the service not because of their clinical need
6. how many patients with dementia having been treated in the appropriate ward at the outset were moved ward during the night to meet the needs of the service, not because of their clinical need.

2020 (January, February, March, April, May, June and July)

Please confirm for each month listed above in relation to hospitals in your health board area;

7. how many patients with dementia having been treated in the appropriate ward at the outset, were subsequently moved ward to meet the needs of the service, not because of their clinical need

8. how many patients with dementia having been treated in the appropriate ward at the outset, were subsequently moved ward more than once during their hospital stay to meet the needs of the service, not because of their clinical need
9. the most number of times during their hospital stay a patient with dementia, having been treated in the appropriate ward at the outset, was subsequently moved ward to meet the needs of the service not because of their clinical need
10. how many patients with dementia having been treated in the appropriate ward at the outset were moved ward during the night to meet the needs of the service, not because of their clinical need.

Response

NHS Borders do not collate data on the boarding of dementia patients. This information may be held in a patient's individual medical record but to extract this data would require a manual trawl of all notes and the cost of carrying out this work would exceed the limit set in the Fees Regulations of the FOI(S)A 2002 and therefore under Section 12 Cost of Compliance we are not required to provide.

Under Section 15 Duty to Provide Advice and Assistance better recording of dementia prevalence across hospital settings is required to determine a more enhanced understanding of demand and allocation of resources and subsequently provide better care and support:

[Leadership and innovation in hospital care: Alzheimer Scotland Dementia Nurse Consultants report 2015-2020](#)

Therefore locally we collect the data of dementia prevalence in the acute hospital setting, but not for boarding.

If you are not satisfied with the way your request has been handled or the decision given, you may ask NHS Borders to review its actions and the decision. If you would like to request a review please apply in writing to, Freedom of Information Review, NHS Borders, Room 2EC3, Education Centre, Borders General Hospital, Melrose, TD6 9BS or foi.enquiries@borders.scot.nhs.uk.

The request for a review should include your name and address for correspondence, the request for information to which the request relates and the issue which you wish to be reviewed. Please state the reference number **376-20** on this request. Your request should be made within 40 working days from receipt of this letter.

If following this review, you remain dissatisfied with the outcome, you may appeal to the Scottish Information Commissioner and request an investigation of your complaint. Your request to the Scottish Information Commissioner should be in writing (or other permanent form), stating your name and an address for correspondence. You should provide the details of the request and your reasons for dissatisfaction with both the original response by NHS Borders and your reasons for dissatisfaction with the outcome of the internal review. Your application for an investigation by the Scottish Information Commissioner must be made within six months of your receipt of the response with which you are dissatisfied. The address for the Office of the Scottish Information Commissioner is, Office of the Scottish Information Commissioner, Kinburn Castle, Doubledykes Road, St Andrews, Fife.