enhance
National Presentation & Development Day 2026

LOOKING BEYOND BEHAVIOUR:

Enhancing MDT Confidence in Identifying Clinical Deterioration in Patients with Dementia

A ward-based audit and educational quality improvement project

North London NHS Foundation Trust

RECOGNISE EARLY • ESCALATE SAFELY • IMPROVE OUTCOMES

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BACKGROUND

Inpatient dementia patients frequently present with acute deterioration through subtle behavioural, mood or functional change rather than classic physiological signs. MDT staff rarely receive structured training in recognising these patterns.

Gaps in confidence risk delayed escalation, preventable harm and reduced quality of life.

CONTEXT

- 21-bed inpatient dementia ward (Silver Birches), Chase Farm Hospital
- 13 MDT respondents: registered nurses, healthcare assistants and allied health professionals
- Diverse North London population
- Anonymous survey conducted November 2025
- Rio (EPR) and EPMA form the digital documentation infrastructure

ENHANCE DOMAINS

Person-Centred Practice · Complex Multimorbidity · System Working · Digital · Wellbeing

AIM

To establish baseline MDT confidence in recognising, documenting and escalating acute and subtle deterioration in dementia patients, and to co-design a targeted educational intervention based on identified gaps.

WHAT WE DID

An 11-item anonymous Likert confidence survey (scale 1–5) with three free-text questions was distributed to all ward-based MDT staff.

Items covered acute recognition, subtle change detection, ABCDE adapted for non-verbal patients, electrolyte interpretation, escalation decision-making, Rio and EPMA utilisation, and MDT communication.

Thematic analysis was applied to free-text responses.

SURVEY ITEMS (DOMAINS)

- Recognition of acute deterioration
- Recognition of subtle changes
- ABCDE adapted for dementia / non-verbal patients
- Interpretation of common abnormalities (electrolytes)
- Escalation decision-making and pathways
- Utilisation of Rio (EPR)
- Utilisation of EPMA
- MDT communication and documentation

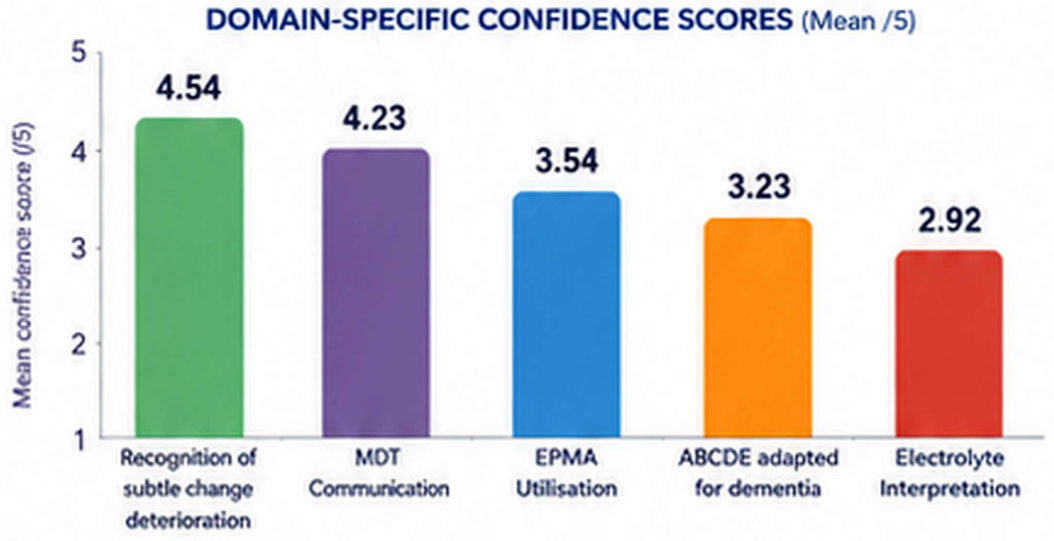
RESULTS – BASELINE AUDIT (CYCLE 1)

OVERALL MDT CONFIDENCE



(Mean confidence score)
n = 13 respondents

DOMAIN-SPECIFIC CONFIDENCE SCORES (Mean /5)



KEY FINDINGS

- Strengths in subtle change identification (4.54/5) and MDT communication (4.23/5).
- Critical gap: electrolyte interpretation (2.92/5); 46% scoring 1–2.
- Moderate gaps in ABCDE adapted for dementia (3.23/5) and EPMA utilisation (3.54/5).
- This baseline data informed the content of the educational intervention.

QUALITATIVE THEMES (FREE-TEXT ANALYSIS)

1. **Patient communication barriers**
   Difficulty assessing non-verbal or cognitively impaired patients; behaviours often mask physical illness.
2. **Demand for scenario-based training**
   Strong request for simulation and practical, role-specific teaching.
3. **Inadequate baseline-knowledge documentation across shifts**
   Important information lost between handovers.
4. **Delayed doctor response to nursing escalations**
   Systemic issue identified and escalated independently to ward governance.

OUR INTERVENTION

Five-session MDT teaching and simulation programme

1. Electrolytes in dementia
2. ABCDE adapted for dementia (including non-verbal patients)
3. Escalation pathways and clinical decision-making
4. EPMA monitoring and safe prescribing
5. Rio documentation and handover communication

Simulation and case-based learning integrated throughout

PDSA CYCLE – QUALITY IMPROVEMENT APPROACH



IMPACT ON CLINICAL PRACTICE

SHORT TERM (During Project)
- Increased staff confidence in key domains
- Improved understanding of subtle deterioration patterns
- Stronger utilisation of digital systems (Rio and EPMA)
- More consistent escalation behaviours
- Enhanced MDT communication

LONG TERM (Sustainable Change)
- Safer and earlier recognition of deterioration
- Reduced risk of diagnostic overshadowing
- Fewer adverse events and unplanned transfers
- Improved patient outcomes and experience
- Sustainable educational resource for new staff
- Embedding a culture of safety and learning

SUSTAINABILITY

- Educational package embedded in ward induction resources
- Digital resources and quick-reference guides available on ward shared drive
- Regular simulation refreshers and case reviews
- Annual re-audit to monitor improvement
- Planned expansion to other older adult wards across NCL

EXPECTED OUTCOMES (CYCLE 2 – TARGET)

- Increase overall MDT confidence to ≥ 4.0 / 5
- Improved recognition of subtle deterioration
- Better utilisation of EPMA and Rio
- More timely and effective escalation
- Enhanced patient safety and quality of care
- Stronger MDT communication and documentation

DISCUSSION

Diagnostic overshadowing remains a significant patient safety challenge in dementia care. Baseline findings highlight important learning needs, particularly around clinical assessment and interpretation of abnormalities. This project demonstrates how MDT engagement, digital tools and simulation can address workforce confidence gaps and support safer care.

CONCLUSION

A structured, co-designed educational intervention is underway to improve MDT confidence in recognising and escalating deterioration in dementia patients.
Cycle 2 re-audit will determine impact and inform sustainable service improvement.

ACKNOWLEDGEMENTS

Thank you to all MDT staff on Silver Birches Ward for their time, honest feedback and commitment to improving patient care.

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REFERENCES

Available on request.

SCAN FOR FULL ABSTRACT