Supplementary material for chapter 3

Non response bias

Non response was tested at three levels for each variable comparing trusts which:

- Agreed to take part in the survey vs did not agree;
- Returned a trust level survey form vs did not return a trust level survey form;
- Returned service level survey form(s) vs did not return service level survey form(s).

The following variables were available for most of the Trusts in England and were used to test for non-response bias:

- Overall CQC rating for the trust as a global measure of trust quality
- The trust's 2016 allocation of Research Capacity Funding from the NIHR as a specific measure of trust research activity
- Proportion of respondents agreeing or strongly agreeing to the following statements on the national staff satisfaction survey:
 - a) Care of patients / service users is my organisation's top priority
 - b) My organisation acts on concerns raised by patients / service users
 - c) I would recommend my organisation as a place to work
 - d) If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation
 - as measures likely to reflect staff confidence in the organisation.

In addition, to test for an influence of the research network on responses for English trusts, whether the NIHR region the trust belonged to had a current NIHR Ageing Network lead.

The characteristics of non-responding trusts vs responding trusts which returned Trust questionnaires are shown in Table 1. No systematic differences were observed between responding and non-responding trusts on the characteristics tested.

Table 1 Characteristics of non-responding trusts vs responding trusts which agreed to take part in the survey, returned a trust questionnaire, returned service questionnaires (English trusts only).

Trust Characteristic	Trust Agr particip		Returned question		Returned question	
	Yes (n=78)	No (n=68)	Yes (n=28)	No (n=118)	Yes (n=28)	No (n=118)
2016 RCF allocation						
	£443673	£512068	£304036	£560226	£291651	£363463
	P=0.	734 ⁺	P=0.	229 ⁺	P=0.6	42*
NIHR Ageing lead						
NIHR Region with Ageing lead	70	53	41	82	16	105
NIHR Region without Ageing lead	8	15	3	20	3	20
	P=0.0	068*	P=0.	081*	P=0.2	56*
Overall CQC rating						
1	21	13	12	22	4	30
2	3	5	3	5	1	7
3	42	36	22	56	11	66
4	5	8	2	11	1	12
5	7	6	5	8	2	10
	P=0.	500 [‡]	P=0.	637 [‡]	P=0.9	956
Staff satisfaction survey						
a) Care of patients top priority	75.0%	75.3%	75.5%	75.0%	74.9%	75.2%
	P=0	.82 ⁺	P=0	.69 ⁺	P=0.3	878
b)Organisation acts on concerns	73.3%	73.1%	73.6%	73.1%	72.7%	73.2%
	P=0	.87 ⁺	P=0	.67 ⁺	P=0.	738
c) Recommend as place to work	60.8%	61.0%	60.8%	61.0%	60.9%	60.9%
	P= 0	.93 ⁺	P=0	.91+	P=0.9	989
d) Friend or relative test	69.7%	70.5%	70.8%	69.8%	72.4%	69.5%
	P=0.6	8+	P=0.6	O ⁺	P=0.	171

[†]T-test, ^{*}Fisher's exact test (2-sided), [‡]Pearson Chi –Square

Table 2. Use of screening/triage and clinical assessment to identify patients for multidisciplinary treatment

	n	Screening tool or standard triage method	Clinical assessment process
Admissions Ward	17	9 (53%)	16 (94%)
Assessment/Decision Unit	6	0 (0%)	5 (83%)
HCS	9	2 (22%)	7 (78%)
Inpatient Ward	9	4 (44%)	9 (100%)
Orthopaedics	22	6 (27%)	15 (68%)
Older Peoples Medical Ward	23	12 (52%)	23 (100%)
A & E	9	5 (56%)	9 (100%)
Inpatient Surgical Ward	6	1 (1%)	5 (83%)
Stroke Team	18	10 (56%)	17 (94%)
Oncology service	2	1(50)	2 (100%)

Table 3. Age requirements and use of admission and exclusion criteria?

	n	minimum age requirement	admission criteria	exclusion criteria
Admissions Ward	17	11 (65%)	9 (53%)	7 (41%)
Assessment/Decision Unit	6	3 (50%)	3 (50%)	2 (33%)
H C S	9	2 (22%)	2 (22%)	0 (0%)
Inpatient Ward	9	4 (44%)	3 (33%)	1 (11%)
Orthopaedics	22	10 45(%)	13 (59(%)	3 (14%)
Older Peoples Medical Ward	23	11 48(%)	8 (35%)	7 (30%)
A & E	9	4 (44%)	2 (22%)	5 (56%)
Inpatient Surgical Ward	6	3 (50%)	1 (17%)	1 (17%)
Stroke Team	18	5 (28%)	14 (78%)	2 (11%)
Oncology	2	0 (0%)	0 (0%)	0 (0%)

Table 4. Services reporting routine consultant review, and assessment by consultant geriatricians "at the front door"

	n	Patients normally reviewed by a consultant	Older people who are frail are assessed by a Geriatrician "at the Front Door"
Admissions Ward	17	17 (100%)	3 (18%)
Assessment/ Decision Unit	6	6 (100%)	2 (33%)
HCS	9	8 (89%)	0 (0%)
Inpatient Ward	9	9 (100%)	1 (11%)
Orthopaedics	22	21 (95%)	1 (5%)
Older Peoples Medical Ward	23	21 (91%)	2 (9%)
A & E	9	5 (56%)	2 (22%)
Inpatient Surgical Ward	6	5 (83%)	1 (17%)
Stroke Team	18	18 100(%)	4 (22%)
Oncology	2	2 (100%)	0 (0%)

Table 5. Use of standard methods to identify frailty.

	n	Trust uses a standardised clinical method, instrument or measuring scale to identify patients who are frail
Admissions Ward	17	7 (41%)
Assessment/ Decision Unit	6	3 (50%)
HCS	9	1 (11%)
Inpatient Ward	9	2 (22%)
Orthopaedics	22	7 (32%)
Older Peoples Medical Ward	23	7 (30%)
A & E	9	5 (56%)
Inpatient Surgical Ward	6	2 (33%)
Stroke Team	18	6 (33%)
Oncology	2	1 (50%)

Table 6. What type of staff regularly work in your team? Medical staff.

	n	Consultant Geriatricians	GP	Junior doctors	Oncologists	Other consultant specialist	Physician associates	Physicians (non geriatrician)	Staff grade doctors	Surgeons
Admissions Ward	17	14	1	16	0	1	0	3	5	0
Assessment / Decision Unit	6	3	0	6	0	1	0	2	2	0
HCS	9	8	0	2	0	0	0	0	2	0
Inpatient Ward	9	4	0	7	0	1	0	5	1	0
Orthopaedics	22	20	0	20	0	3	0	0	12	14
OPM Ward	23	22	0	22	0	0	1	1	11	0
A & E	9	4	0	2	0	0	0	1	0	0
Inpatient Surgical Ward	6	2	0	3	0	0	0	0	2	4
Stroke Team	18	16	0	17	0	3	0	3	8	1
Oncology	2	1	0	2	2	0	1	0	1	1

Table 7. What type of staff are available to your team? Medical staff

	n	Consultant Geriatricians	GP	Junior doctors	Oncologists	Other consultant specialist	Physician associates	Physicians (non geriatrician)	Staff grade doctors	Surgeons
Admissions Ward	17	3	2	1	13	14	0	12	3	14
Assessment / Decision Unit	6	2	0	0	2	4	0	3	0	2
H C S	9	1	0	1	3	4	0	3	1	3
Inpatient Ward	9	5	1	1	7	6	1	3	2	7
Orthopaedics	22	2	0	2	15	15	1	15	3	7
OPM Ward	23	0	1	0	16	16	2	14	2	18
A & E	9	3	0	3	1	3	1	4	1	2
Inpatient Surgical Ward	6	4	1	3	6	6	1	5	1	2
Stroke Team	18	2	1	0	13	11	0	7	1	14
Oncology	2	1	2	0	0	2	0	2	0	1

Table 8. What type of staff regularly work in your team? Nursing, pharmacy and psychological medicine

			Nurs	ing staf	f	Pharma	cy staff		Psychology / Psychiatry staff		
	n	AN	Nurse	Nur	Psychiat	Pharmaci	Pharma	Psychiatr	Psychogeriatri		
		Р	special	ses	ric	sts	су	ist/	cians		
			ist		nurses		technici	Psycholo			
							ans	gist			
Admissions Ward	17	6	6	15	2	14	9	0	2		
Assessment /	6	2	3	5	0	4	3	0	0		
Decision Unit											
H C S	9	1	1	3	0	1	1	0	0		
Inpatient Ward	9	0	0	8	0	6	6	0	0		
Orthopaedics	22	6	11	20	0	17	16	1	1		
OPM Ward	23	3	4	21	2	19	14	0	2		
A & E	9	2	3	3	1	0	0	0	0		
Inpatient Surgical	6	1	1	5	0	2	3	0	0		
Ward											
Stroke Team	18	5	14	17	0	16	10	4	0		
Oncology	2	1	2	2	0	1	0	0	0		

Table 9. What type of staff are available to your team? Nursing, pharmacy and psychological medicine

			Nursi	ing staf	f	Pharma	cy staff	Psycholog	gy / Psychiatry
									staff
	n	AN	Nurse	Nur	Psychiat	Pharmaci	Pharma	Psychiatr	Psychogeriatri
		Р	special	ses	ric	sts	су	ist/	cians
			ist		nurses		technici	Psycholo	
							ans	gist	
Admissions Ward	17	3	9	2	13	3	7	12	12
Assessment/	6	0	1	1	3	2	2	5	3
Decision Unit									
H C S	9	1	3	2	4	3	2	2	4
Inpatient Ward	9	6	8	1	9	3	2	4	8
Orthopaedics	22	5	9	2	17	5	3	14	15
OPM Ward	23	5	16	1	20	2	7	14	19
A & E	9	1	2	2	3	6	3	3	3
Inpatient Surgical	6	3	5	1	5	3	2	5	6
Ward									
Stroke Team	18	6	2	0	16	2	6	9	16
Oncology	2	1	0	0	2	1	2	2	2

Table 10. What type of staff regularly work in your team. Allied Health Care staff.

	n	Dieticians	HCAs	OTs	PTs	Pods	Rads	Sons	SALTs	TAs
Admissions Ward	17	2	14	17	17	0	1	1	1	7
Assessment/ Decision Unit	6	0	5	5	6	0	0	0	1	0
HCS	9	1	2	4	3	0	0	0	1	2
Inpatient Ward	9	2	7	9	9	0	0	0	2	6
Orthopaedics	22	2	20	21	21	1	0	0	0	17
Older Peoples Medical Ward	23	3	20	21	22	1	1	0	4	17
A & E	9	0	0	8	9	0	0	0	0	3
Inpatient Surgical Ward	6	0	3	4	4	0	0	0	0	3
Stroke Team	18	15	18	18	18	2	9	5	18	18
Oncology	2	1	2	2	2	0	0	0	0	0

 ${\it Table~11.~What~type~of~are~available~to~your~team.~Allied~Health~Care~staff.}$

	n	Dieticians	HCAs	Ots	PTs	Pods	Rads	Sons	SALTs	TAs
Admissions Ward	17	15	3	0	0	11	14	14	16	8
Assessment/ Decision Unit	6	4	1	1	0	0	4	4	3	3
HCS	9	3	1	1	3	3	3	3	4	3
Inpatient Ward	9	7	1	0	0	8	8	8	7	3
Orthopaedics	22	20	1	1	1	14	21	21	22	5
Older Peoples Medical Ward	23	19	2	2	1	16	19	20	18	6
A & E	9	2	3	1	0	0	3	2	4	1
Inpatient Surgical Ward	6	6	2	2	2	6	5	5	6	3
Stroke Team	18	3	0	0	0	15	8	12	0	0
Oncology	2	1	0	0	0	2	2	2	2	2

Table 12. What type of staff regularly work in your team? Social work, charities and voluntary

	n	Charities staff	Faith Support	Social work assistants	Social worker	Voluntary sector	Other
Admissions Ward	17	3	1	1	8	1	2
Assessment/Decision Unit	6	0	0	1	3	0	0
HCS	9	0	0	1	1	0	0
Inpatient Ward	9	0	1	1	2	1	0
Orthopaedics	22	0	0	3	7	1	5
Older Peoples Medical Ward	23	1	1	3	10	4	2
A & E	9	0	0	0	1	0	2
Inpatient Surgical Ward	6	0	0	1	2	0	0
Stroke Team	18	4	1	2	9	6	2
Oncology	2	0	0	0	1	0	1

Table 13. What type of staff are available to your team? Social work, charities and voluntary

	n	Charities staff	Faith Support	Social work assistants	Social worker	Voluntary sector	Other
Admissions Ward	17	7	15	9	7	8	1
Assessment/Decision Unit	6	4	4	0	1	3	0
HCS	9	2	4	3	3	3	0
Inpatient Ward	9	5	8	6	5	5	2
Orthopaedics	22	10	20	10	13	11	0
Older Peoples Medical Ward	23	10	20	13	12	10	0
A & E	9	5	4	1	2	4	1
Inpatient Surgical Ward	6	3	6	3	3	4	1
Stroke Team	18	11	17	10	7	10	2
Oncology	2	2	2	2	1	2	1