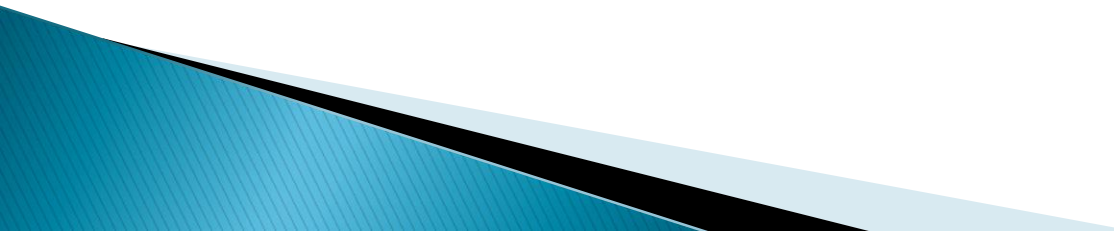



# Northwick Park Dependency Assessment– Hospital (NPDS–H)

Self-service Training slides  
Part 1 of 3

# Contents

1. Overview
  2. Structure of tool/scoring system
  3. Scoring guidelines
  4. Completion of NPDS-H – Basic Care Needs
- 

# Overview

1. NPDS designed to provide a seamless service from hospital to community setting
  2. Relevant to rehabilitation nursing but can be used in other settings
  3. Can be used as an outcome measure
  4. Reflects care needs for individual patients and the whole unit
  5. UK ROC software required for conversion to estimated care hours/costs
  6. NPDS-H is an extension of the original NPDS
  7. NPDS-H contains all of NPDS plus additional in-patient items
  8. Required as part of the parallel dataset for Level 1 & 2 specialist rehabilitation services and mandatory on admission/discharge as a minimum data requirement for these units
- 

# Structure of NPDS-H

## 1. 4 sections

- 1. Basic Care Needs
- 2. Special Nursing Needs
- 3. In-patient Nursing Needs
- 4. Care Needs Assessment

## 2. Section 1. Basic Care Needs

- Contains 12 basic care needs/psychological needs with ordinal scores ranging from 0-5
- Full range of scores for this section 0-65

## 3. Section 2. Special Nursing Needs

- Contains 7 dichotomous variables requiring assistance of a qualified/skilled nurse.
  - Scores 0 – nursing need not required **or**
  - Scores 5 – nursing need applicable
- Full range of scores for this section 0-35

# Structure of NPDS-H (cont.)

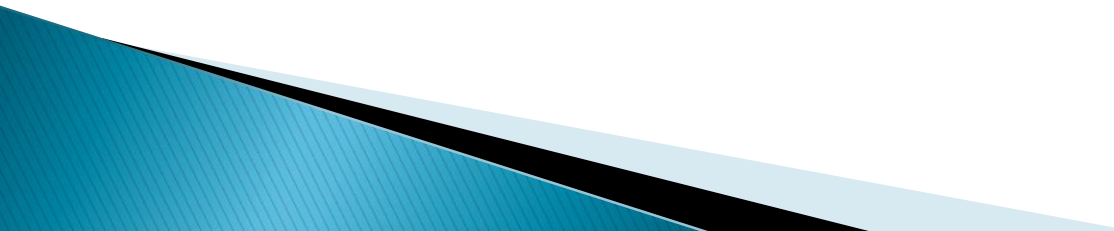
## 4. Section 3. In-patient Nursing Needs

- Contains 8 dichotomous questions
  - Yes/No responses – no score allocated
- Contains 8 questions with ordinal scoring
  - Questions expand on the dichotomous variables in the “Special Nursing Needs Section”
- Full range of scores for this section 0-35

## 5. Section 4. Care Needs Assessment

- Contains 5 questions providing an assessment of care needs in the community
- Some items have scores but do not contribute to the overall NPDS-H score
- Items in this section do contribute to the estimated care costs/care package algorithms

# Scoring structure

1. Total ordinal score 0-100
    - Sum of Section 1 & 2 (NPDS – original version)
    - Sum of Section 1 & 3 (NPDS-H hospital version)
  2. Frequency scores are not included in the total score
  3. Section 4. Care needs assessment scores are not included in the total score
  4. Higher scores are indicative of increased dependence for assistance for all care needs
- 

# Interpretation of Scores

Score	Level of dependency	Description
0–9	Low	Mainly independent with care needs, may need incidental help e.g. with shoe laces, zips etc.
10–25	Medium	Requires help from 1 for most care needs
26–30	Low High	Needs help from 2 for <i>some</i> care needs
31–45	Medium High	Needs help from 2 for <i>most</i> care needs
46+	Very High	Needs help from 2 or more for <i>all</i> care needs

# Scoring Guidelines

1. Ideally to be completed by the named nurse or carer that knows the patient care needs well
2. Complete on admission and discharge as a minimum but preferably fortnightly throughout the patient's stay
3. Complete tool retrospectively based on previous fortnightly intervention – based on care given – if this is variable score based on “most frequent” option
4. Read description of inclusion criteria where documented on the tool
5. All items must be scored (including frequency of activity)
6. Complete in paper format and then transfer to UK ROC software (obtainable from [LNWH-tr.ukroc@nhs.net](mailto:LNWH-tr.ukroc@nhs.net))



# How to complete Section 1

## Basic Care Needs

# Section 1 – Basic Care Needs

## 1. Mobility

- Give most usual method of mobility around bay (hospital) or indoors (home) (depending on environment for scoring)
- Circle one score only based on most frequent mobility during the fortnightly period

	Description	Dependency score
a.	Walks fully independently	0
b.	Independent in Electric/self propelled chair	1
c.	Walks with assistance/supervision of one	2
d.	Uses attendant-operated wheelchair	3
e.	Bed-bound (unable to sit in wheelchair)	4
f.	Walks with assistance/supervision of two	4

Includes walking with/without an aid but does not need assistance

e.g. chair has to be pushed, can not self-propel

NB. Prompting is also included

# Section 1 – Basic Care Needs

## 2. Bed Transfers

- Circle one score only for transfers in/out of bed during the fortnightly period
- It is rare for option “d” to be appropriate in a hospital setting but may be relevant in the community
- **Remember** – if “Mobility” was recorded as “bed bound” the bed transfer items should also be reported as “bed bound”

	Description	Dependency score
a.	Fully independently	0
b.	Requires help from one person	1
c.	Requires help from two people	2
d.	Requires hoisting by 1, takes, <½ hour, <i>OR</i>	3
e.	Requires hoisting by 2, takes < ¼ hour	3
f.	Bed bound	0

Includes supervision or prompting

# Section 1 – Basic Care Needs

## 2.1 Frequency of Bed Transfers

- It is assumed that unless the patient is bed bound, they will get up in the morning and return to bed in the evening. (this would be recorded as “0” transfers for a rest)
- This item is capturing if returning to bed for a rest during the day occurs (not transfers back to bed for therapy session or dressing)

If he/she needs help/supervision to transfer on/off bed,

How many times to they get back to bed *for a rest* during the day?

Includes prompting or hoisting

☐ 0 ☐ 1 ☐ 2 ☐ More than 2

- For example. Mr Bumble is transferred out of bed for breakfast and a shower. He then goes back to bed for a rest and gets up again for his lunch. He then returns to bed and stays there until the following morning.

Frequency score is 1

- Getting up for breakfast and returning to bed after lunch would be considered “normal” transfers. Returning to bed after his shower is the only part needing reporting in frequency of returning to bed for a rest.

# Section 1 – Basic Care Needs

## 3.1 Toileting Bladder – mode of emptying

- Tick one mode for “day” and another mode for “night” based on most frequent mode of emptying bladder during the fortnightly period
- If the patient mainly uses the commode but wears pads “just in case” or “occasionally has accidents” then the main mode is commode

Which of the following does the patient use to empty their bladder?

By Day		By Night
<input type="checkbox"/>	Toilet	<input type="checkbox"/>
<input type="checkbox"/>	Commode	<input type="checkbox"/>
<input type="checkbox"/>	Bottles	<input type="checkbox"/>
<input type="checkbox"/>	Catheter/convene	<input type="checkbox"/>
<input type="checkbox"/>	Bed-pan	<input type="checkbox"/>
<input type="checkbox"/>	Pads	<input type="checkbox"/>

# Section 1 – Basic Care Needs

## 3.2 Toileting Bladder – Need for assistance

- Circle one score only based on most frequent bladder toileting assistance during the fortnightly period
- ***This item includes:*** Getting there, transferring on to the toilet, cleaning themselves/changing and disposing of soiled pads, adjusting clothing and washing hands afterwards.
- ***Remember*** – if mobility is an attendant operated wheelchair then the patient can not be independent with emptying their bladder (option “a”)
- If using a bottle: includes reaching for it, positioning and replacing it un-spilt

	Description	Dependency score
a.	Able to empty their bladder independently	0
b.	Set-up only (e.g. copes if bottles left within reach) <i>or</i>	1
c.	Has indwelling catheter/convene	1
d.	Needs help/supervision from 1, takes < ¼ hour	2
e.	Needs help/supervision from 1, takes >¼ hour	3
f.	Needs help from 2	4

# Section 1 – Basic Care Needs

## 3.3 Frequency of assistance for emptying bladder

- Tick one score only based on bladder voiding frequency and the need for assistance
- If catheter is in-situ score based on the number of times the bag is emptied
- This item is not included in the total nursing dependency score but is used in calculation of care hours/costs

NB. “Help” includes physical help – e.g. transfers, adjusting clothing, supervision/prompting, regular pad changes, etc.

If he/she needs help to pass urine

How many times do they pass urine during the day (7am–11pm)?

☐ Up to 4      ☐ 5–6 times      ☐ >6 times      ☐ Help at night only

How many times do they pass urine during the night (11pm–7am)?

☐ 0      ☐ 1      ☐ 2      ☐ >2

# Section 1 – Basic Care Needs

## 3.4 Urinary accidents

- Circle one score only based on the number of urinary accidents during the fortnightly period
- A urinary accident is the need to change soiled clothing or bed/chair linen
- If pads are used as the mode of bladder emptying but urine does not leak outside of these then urinary accidents do not occur (rationale for this is that if with regular pad changes, with/without assistance, then in the community a “live-in” care would not be required, substantially reducing the care costs.)

	Description	Dependency score	
a.	No accidents or leakage from catheter/convene	0	
b.	Occasional accidents (less than daily)	1	← Need to indicate times per week (see next slide)
c.	1–2 accidents/leakage in 24 hours	2	
d.	More than 2 accidents/leakage in 24 hours	3	Need to indicate times per day (see next slide)



# Section 1 – Basic Care Needs

## 3.4 (continued) Urinary Accidents

- If selected “b” or “d” for “urinary accidents” then the frequency of accidents must be completed
- Circle one response only – if selected “ b” for urinary accidents then record the number of times per week and if recorded “d” for urinary accidents then record the number of times per day

If scored 1: How many times per week? 1 2 3 4 5 6

If scored 3: How many times per day? 3 4 5 6

1 or 2 accidents per day were covered in the first part of this question as answer “c”

# Section 1 – Basic Care Needs

- For example – Bladder Assistance

Mrs Creature is up in her wheelchair during the day and can self-propel to the toilet. She knows when she needs to pass urine (normally 4 times a day and once at night) and uses the nurse call bell as she needs help from 1 to transfer from the wheelchair to the toilet using the slide-board. She can manage to adjust her clothing/complete appropriate hygiene care. She wears pads as there have been occasions in the past when she has not been able to transfer on to the toilet in time. At night she uses a bed pan that needs inserting with the help of 1.

Mode – toilet by day, bed-pan by night

Assistance – “d” – help from 1 and takes < ¼ hour (only help with transfer/bedpan insertion)

Times per day = Up to 4, Once at night

Urinary Accidents = 0 (pads only for reassurance, no urinary accidents during this fortnight)

# Section 1 – Basic Care Needs

- For example – Bladder Assistance

Mr Bright had his urinary catheter removed and now uses a convene by day and night. He does have sensation to pass urine but is unable to use a bottle. He is still experiencing frequency of micturition and passes urine between 6-8 times a day and twice at night. Currently the convene falls off approximately 2-4 times during the day but not at night. Mr Bright is unaware that it has fallen off until he next passes urine and he becomes wet. He is finding this very embarrassing and is requesting to use the toilet instead (he refuses to wear pads). He would not be able to transfer independently or adjust his clothing.

Mode – convene by day and night

Assistance – “c” – has a convene

Times per day = More than 6, Night = 2

Urinary Accidents = “d” – More than 2 in 24 hours

Times per day = 3 (average number of times per day)

# Section 1 – Basic Care Needs

## 4.1 Toileting Bowels – Need for assistance

- Circle one score only based on bowel assistance during the fortnightly period
- **This item includes:** Getting to and transferring on to the toilet, cleaning themselves/changing and disposing of soiled pads, adjusting clothing and washing hands afterwards.
- If they have a colostomy – includes emptying/changing bag hygienically
- **Remember** – if mobility is an attendant operated wheelchair then the patient can not be independent with emptying their bowel (option “a”)

	Description	Dependency score
a.	Able to empty their bowels independently	0
b.	Set-up only (e.g. giving suppositories/enema)	1
c.	Needs help/supervision from 1, takes < ¼ hour	2
d.	Needs help/supervision from 1, takes > ¼ hour	3
e.	Needs help from 2, takes < ¼ hour	4
f.	Needs help from 2, takes > ¼ hour	5

Can complete all other aspects of task independently

# Section 1 – Basic Care Needs

## 4.2 Frequency of opening bowels/trial of evacuation

- Tick one score only based on number of times bowels are opened during the day/week
- Tick the time of day e.g. if normally opens bowels twice a day tick 2 time periods
- Tick the number of times bowels are opened at night
- Do not include faecal incontinence
- Includes emptying colostomy bag
- This item is not included in the total nursing dependency score but is used in calculation of care hours/costs

## 4.2 Frequency of opening bowels

- |   |   |                                     |
|---|---|-------------------------------------|
| <input type="checkbox"/> 2–3 times per week | <input type="checkbox"/> 4–5 times per week | <input type="checkbox"/> Once a day |
| <input type="checkbox"/> Twice a day        | <input type="checkbox"/> >twice a day       |                                     |

What time/s of day to they normally open their bowels/have trial of evacuation

- |  |                                   |                                 |                                |                                |                                 |
|--|-----------------------------------|---------------------------------|--------------------------------|--------------------------------|---------------------------------|
| <input type="checkbox"/> 7–10.30   | <input type="checkbox"/> 10.30–12 | <input type="checkbox"/> 12–2pm | <input type="checkbox"/> 2–6pm | <input type="checkbox"/> 6–9pm | <input type="checkbox"/> 9–11pm |
| <input type="checkbox"/> No specific time (only use if no regular bowel pattern) |                                   |                                 |                                |                                |                                 |

How many times do they open their bowels at night (11pm–7am)?

- |                            |                            |                            |                             |
|----------------------------|----------------------------|----------------------------|-----------------------------|
| <input type="checkbox"/> 0 | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> >2 |
|----------------------------|----------------------------|----------------------------|-----------------------------|

# Section 1 – Basic Care Needs

## 4.3 Faecal accidents

- Circle one score only based on the number of faecal accidents during the fortnightly period
- A faecal accident is the need to change soiled clothing or bed/chair linen
- If pads are used as the mode of faecal toileting but faeces do not leak outside of these then faecal accidents do not occur
- If bowels are opened once following suppositories/enema on to a pad this is “requires regular bowel regime” not faecal accidents

	Description	Dependency score	
a.	No faecal accidents	0	
b.	Requires regular bowel regimen – suppositories or enema in order to remain continent	1	← Only select this option if bowels open once only following intervention
c.	Occasional faecal accidents (less than daily)	2	← Need to indicate times per week (see next slide)
d.	Regular faecal accidents	3	→ Need to indicate times per day (see next slide)

# Section 1 – Basic Care Needs

## 4.3 (continued) Faecal Accidents

- If selected “c” or “d” for “faecal accidents” then the frequency of accidents must be completed
- Circle one response only
- If the patient has suppositories/enema and opens bowels on to a pad this is not counted as faecal accident but “regular bowel regime”, “bowels opened once a day”. Time of day would be based on time suppositories/enema were given. However, any subsequent faecal soiling is considered to be faecal accidents

If scored 2: How many times per week?	1	2	3	4	5	6
---------------------------------------	---	---	---	---	---	---

If scored 3: How many times per day?	1	2	3	4	5	6
--------------------------------------	---	---	---	---	---	---

# Section 1 – Basic Care Needs

- For example – Toileting Bowels

Mr Straight is in a minimally conscious state and is unable to indicate his need to open his bowels. He receives a daily micro enema before his morning shower and opens his bowel following the micro enema on to a pad whilst still in bed. He does not have any further bowel action during the day.

Assistance – “e” or “f” depending on time taken

Frequency – “once a day”

Time bowels opened by day – 7am-10.30am

Number of times bowels opened at night – 0

Faecal accidents – “b” Requires regular bowel regimen



# Section 1 – Basic Care Needs

- For example – Toileting Bowels

Mrs Curvy is in a minimally conscious state and is unable to indicate her need to open her bowels. She receives a daily micro enema before her morning shower and opens her bowels following the micro enema on to a pad whilst still in bed. She continues to pass faeces/have smearing at least 3 times per day and twice at night.

Assistance – “e” or “f” depending on time taken

Frequency – “once a day” (planned bowel action)

Time bowels opened by day – 7-10.30 (time of enema)

Number of times bowels opened at night – 2 (need to capture nightly accidents)

Faecal accidents – “d” Regular faecal accidents

Number of faecal accidents in 24 hours – 5

# Section 1 – Basic Care Needs

## 5. Washing and Grooming

- Circle one score only based on washing/grooming assistance during the fortnightly period
- **This item includes:** Washing hands and face, cleaning teeth, shaving or applying make-up
- **Not included :** Bathing/showering
- **Note:** It is rare to need help from 2 for grooming unless:
  - support for sitting is required,
  - restraint due to behaviour
  - suctioning required during cleaning teeth

	Description	Dependency score
a.	Able to wash and groom independently	0
b.	Needs help to set-up only (e.g. laying out things, filling bowl with water, putting toothpaste on brush)	1
c.	Needs help/supervision from 1, takes < ¼ hour	2
d.	Needs help/supervision from 1, takes > ¼ hour	3
e.	Needs help from 2, takes < ¼ hour	4
f.	Needs help from 2, takes > ¼ hour	5

# Section 1 – Basic Care Needs

## 6. Bathing/showering

- Circle one score only based on bathing/showering assistance during the fortnightly period
- **This item includes:** getting to the bath/shower room, transferring in/out, washing and drying
- **Note:** If unable to bath or shower score based on thorough strip wash or bed bath
- **Remember:** If mode of mobility is an attendant operated wheelchair, option “a” for bathing/showering is not possible

	Description	Dependency score
a.	Able to have a bath/shower independently	0
b.	Needs help to set-up only (e.g. running bath, soaping flannel)	1
c.	Needs help/supervision from 1, takes < ½ hour	2
d.	Needs help/supervision from 1, takes > ½ hour	3
e.	Needs help from 2, takes < ½ hour	4
f.	Needs help from 2, takes > ½ hour	5

# Section 1 – Basic Care Needs

## 7. Dressing

- Circle one score only based on washing/grooming assistance during the fortnightly period
- ***This item includes:*** dressing upper and lower body including putting on shoes, socks, tights, tying shoe laces, putting on splint/orthotic as appropriate

	Description	Dependency score
a.	Able to dress independently	0
b.	Needs help to set-up only (e.g. laying out clothes) <i>or</i>	1
c.	Needs incidental help from 1 (e.g. just with shoes)	1
c.	Needs help/supervision from 1, takes < ¼ hour	2
d.	Needs help/supervision from 1, takes > ¼ hour	3
e.	Needs help from 2, takes < ¼ hour	4
f.	Needs help from 2, takes > ¼ hour	5

# Section 1 – Basic Care Needs

## 8.1 Eating

- Circle one score only based on assistance received for eating during the fortnightly period
- ***This item includes:*** Opening packets, using cutlery, transferring food from plate to mouth and eating/swallowing appropriate consistency of food
- ***Note:*** If nutrition is part oral and part tube score both section 8.1 & 8.3
  - If the patient is “nil by mouth” and does not have enteral feeding score “a” on items 8.1, 8.2 & 8.3 – the complexity of this will be scored on “inter-current medical/surgical problem” in the Special Nursing needs and In-patient needs sections

	Description	Dependency score
a.	Entirely gastrostomy/nasogastric fed	0
b.	Able to eat independently	0
c.	Needs help to set-up only (e.g. opening packs) <i>OR</i>	1
d.	Needs intermittent check/supervision from 1	1
e.	Needs help from 1, takes < ½ hour	2
f.	Needs help from 1, takes > ½ hour	3


# Section 1 – Basic Care Needs

## 8.2 Drinking

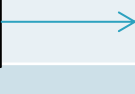
- Circle one score only based on assistance received for drinking during the fortnightly period
- **This item includes:** Pouring a drink (e.g. pouring from a jug or flask – not necessarily making the drink), lifting cup to mouth, drinking appropriate consistency of fluid
- **Score:** Assistance to drink (score counted in total) and frequency of assistance (not included in total score)
- **Note:** If fluid intake is part oral and part tube score both section 8.2 & 8.3
  - If the patient is “nil by mouth” and does not have enteral feeding score “a” on items 8.1, 8.2 & 8.3 – the complexity of this will be scored on “inter-current medical/surgical problem” in the Special Nursing needs and In-patient needs sections

	Description	Dependency score
a.	Entirely gastrostomy/nasogastric fed	0
b.	Able to pour own drink and drink it independently	0
c.	Able to drink independently if left within reach <b>OR</b>	1
d.	Able to drink independently but needs prompting to do so	1
e.	Needs help or supervision, takes $< \frac{1}{4}$ hour	2
f.	Needs help or supervision, takes $> \frac{1}{4}$ hour	3

Indicate number of times in 24 hours



Indicate number of times in 24 hours



How many times in 24 hours?    ☒ 3    ☒ 4-6    ☒ 7 or more

# Section 1 – Basic Care Needs

## 8.3. Enteral feeding

- Circle one score only based on enteral feed assistance during the fortnightly period
- **This item includes:** All enteral feeding routes and bolus feeds
- Score level of assistance (included in total score) and time feed set up (not included in total score but included in care hours/costs)
- **Note:**
  - It is rare for independent feed set-up in the hospital setting but may be applicable in the community
  - Within the hospital setting options “e” or “f” are normally appropriate as extra flushes are provided during the day/night for fluid intake and post enteral medication

	Description	Dependency score
a.	No enteral feeding/manage feeds independently	0
b.	Needs help to set-up feed once a day	1
c.	Needs help to set-up feed twice a day	1
d.	Needs help to set-up feed 3 times a day	2
e.	Needs help to set-up feed and extra flushes during the day	3
f.	Needs help to set-up feed and extra flushes day & night	4
Time feeds set-up <input type="checkbox"/> Morning <input type="checkbox"/> Midday <input type="checkbox"/> Evening <input type="checkbox"/> Bedtime <input type="checkbox"/> Night		

# Section 1 – Basic Care Needs

## 9. Skin pressure relief

- Circle one score only based on assistance provided to relieve pressure (whilst in bed or chair) during the fortnightly period
- **Note:** If skin pressure relief continues throughout the night this should be indicated in the next section of the tool – Special nursing needs “>2 night interventions”)
- Does not include dressing of pressure sores (include in wound care – section 2 & 3)
  - This item differs from the postural management item in the 3<sup>rd</sup> section of the tool, this item (skin pressure relief) just focuses on change of position/movement for pressure relief

	Description	Dependency score
a.	Able to relieve pressure independently	0
b.	Needs prompting only to relieve pressure	1
c.	Needs help from 1 to relieve pressure/turn (4 hourly)	2
d.	Needs help from 2 to relieve pressure/turn (4 hourly)	3
e.	Skin marked or broken, needs 1 to relieve pressure or turn (2 hourly)	4
f.	Skin marked or broken, needs 2 to relieve pressure or turn (2 hourly)	5



# Section 1 – Basic Care Needs

## 10. Safety awareness

- Circle one score only based on assistance provided to maintain safety during the fortnightly period
- **Note:** Although in the hospital setting staff are available 24 hours a day, this item is based on the need for “checks”

	Description	Dependency score
a.	Fully orientated, aware of personal safety	0
b.	Requires some help with safety and orientation but <ul style="list-style-type: none"><li>• Safe to be left for more than 2 hours</li><li>• Could summon help in emergency</li></ul>	1
c.	Requires help to maintain safety <ul style="list-style-type: none"><li>• Could not be left for 2 hours</li><li>• Could not summon help in an emergency</li></ul>	2
d.	Requires at least hourly checks or constant supervision	3

e.g. Can be left following personal care in morning till lunch

e.g. can use call bell (hospital) or panic alarm/phone (home)

e.g. impulsive or medical issues – such as unstable tracheostomy

e.g. wanderer or medically unstable

# Section 1 – Basic Care Needs

## 11. Communication

- Circle one score only based on assistance provided with communication during the fortnightly period
- **Includes:** Support for communication during care activities (in context) and frequency of communication outside care activities (desire to express self but listener burden to establish context and dialogue)

	Description	Dependency score
	May have speech issues e.g. speed, dysarthria, tone	
a.	Able to communicate needs without help	0
b.	Able to communicate basic needs with a little help or by using a communication aid or chart (<¼ hour)	1
c.	Able to communicate basic needs with a little help or by using a communication aid or chart (>¼ hour)	2
d.	Able to respond to direct questions about basic needs	3
e.	Responds only to gestures and contextual clues	4
f.	No effective means of communication	5
How many times does communication (outside of care activities) occur within 24 hours?		
<input type="checkbox"/> Less than twice <input type="checkbox"/> 2–4 times <input type="checkbox"/> More than 4 times		

# Section 1 – Basic Care Needs

## 12. Behaviour

- Circle one score only based on assistance provided to manage behavioural issues during the fortnightly period
- **Note:** If the patient is in low awareness state “a”- compliant and socially appropriate is the option to choose

	Description	Dependency score	
a.	Compliant and socially appropriate	0	This is to manage behavioural issues – prompting due to cognitive issues should be included for specific care activities e.g. prompting to complete activity
b.	Needs verbal /physical prompting for daily activities	1	
c.	Needs persuasion to comply with rehab or care	2	
d.	Needs structured behavioural modification programme	3	
e.	Disruptive, inclined to aggression	4	
f.	Inclined to wander off ward	5	

- For example – Behaviour

Mr Shandi has severe cognitive difficulties. His short term memory is severely impaired and he is unable to retain more than 1 command.

He is able to wash and dress himself with continuous verbal prompting throughout the activity. Without continuous verbal prompting he would be unlikely to complete the task and may exit the bathroom inappropriately dressed. He accepts the verbal prompts and refocuses on the activity and thanks the staff on a regular basis.

Behaviour score = “a” Compliant and socially appropriate

Remember: the verbal prompting would be captured in “Grooming”, “Bathing & showering” and “Dressing” – for this excessive prompting scores containing takes less than/more than  $\frac{1}{4}$  -  $\frac{1}{2}$  would be appropriate.

# This concludes the guidance on “how to complete” the Basic Care Needs Section

Please complete Part 2 of the NPDS–H  
self service training slides for guidance on  
completing Sections 2–4  
(Special Nursing Needs, In–patient nursing  
needs and Care Needs Assessment)

# Contacts

## 1. To obtain

- a copy of the UK ROC software
- the NPDS-H tool
- further answers to specific questions about the NPDS-H

please email

- [LNWH-tr.ukroc@nhs.net](mailto:LNWH-tr.ukroc@nhs.net)

# Publications

- ▶ Lynne Turner-Stokes, Tonge P, Nyein K, et al. [The Northwick Park Dependency Score \(NPDS\): a measure of nursing dependency in rehabilitation.](#) *Clinical Rehabilitation*. 1998; Vol. 12: 304-16
- ▶ Lynne Turner-Stokes, Nyein K, Halliwell D. [The Northwick Park Care needs Assessment \(NPCNA\): a directly costable outcome measure in rehabilitation.](#) *Clinical Rehabilitation*. 1999; Vol. 13: 253-268
- ▶ Nyein K, Lynne Turner-Stokes. [Sensitivity and predictive value of the Northwick Park Care Needs Assessment \(NPCNA\) as a measure of Care Needs in the community.](#) *Clinical Rehabilitation*. 1999; Vol 13: 482-491
- ▶ Williams H, Harris R, Turner-Stokes L. [Can the Northwick Park care needs Assessment be used to estimate nursing staff requirements in an in-patient setting?](#) *Clinical Rehabilitation*. 2007; Vol 21: 535-44
- ▶ Williams H, Harris R, Turner-Stokes L. [Northwick Park care needs Assessment: adaptation for inpatient neurological setting.](#) *Journal of Advanced Nursing*. 2007; Vol 59: 612-22
- ▶ Seigert RJ, Jackson D, Tennant A, Turner-Stokes L. [Psychometric evaluation of the Northwick Park Dependency Scale \(NPDS\)](#) *Journal of Rehabilitation Medicine*. 2010. Vol. 42, 936-943