Due to their age and the disease itself, people with dementia are almost 50% more likely to have an acute hospital admission (Motzek, Werblow, Tesch, Marquardt, & Schmitt, 2018). In the vast majority of cases, the cause of admission is not dementia but rather common age-related diseases, such as urinary tract infections (Bernardes, Massano, & Freitas, 2018). They also have an 18% higher rate of readmission following discharge (Motzek et al, 2018; Pickens, Naik, Catic & Kunik, 2017). As a result, approximately one quarter of hospital beds are occupied by people with dementia (Alzheimer’s Society, 2009). However, the hospital environment is often distressing for people with dementia (White et al, 2017) and for 20% of caregivers who also experience significant emotional stress during hospitalisation of the person they are caring for (Leggett, Polenick, Maust & Kales, 2018). People with dementia have been shown to have an increased mortality rate in hospital and for six months after discharge compared to age-matched controls (Alzheimer’s Society & Marie Curie, 2015). Therefore, a reduced number of hospitalisations may result in an increase in their life expectancy and lower mortality rates. Additionally, less hospitalisations for people with dementia may relieve some of the financial strain currently being experienced by the National Health Service.

**Primary objectives:**
- To assess the hospitalisation and re-hospitalisation rates for people with dementia
- To assess whether mortality rates increase because of hospitalisations during or 6 months after discharge
- To assess whether the duration of hospitalisations increases mortality rates.

**Secondary objectives:**
- To explore the cause of hospitalisation in order to gain an insight for unnecessary hospital admissions
- To test whether the duration of having dementia increases hospitalisation rates
- To assess factors associated with hospital admissions, including the age, gender and marital status of people with dementia.