Improving Safety & Quality of Care for Hip Fracture Patients

Hip Fracture Quality Improvement Programme (HIPQIP)
Queen Elizabeth University Hospital (QEUH), Glasgow

Introduction
Hip fracture is a common reason for admission to hospital. Patients are often older, frail and vulnerable to medical complications like delirium, pain, falls and AKI.

The Scottish Standards of Care for Hip Fractures and associated monthly auditing have driven improvements in hip fracture management across the country. Nevertheless, we recognise that locally, high quality care is not consistently delivered for every patient in every clinical area.

We wanted to change this.

Methods
From 2016, an opportunity arose for the QEUH to join the Health Foundation’s HIPQIP project aimed at empowering UK-wide teams to improve hip fracture care. Staff involved in all aspects of the patient journey in the QEUH (A&E, Anaesthetics, Orthopaedics, Geriatric Medicine) agreed to participate.

This enthusiastic, multi-disciplinary group continues to meet monthly to discuss and plan innovative ways of improving care and to reflect on progress to date, as benchmarked against the national audit data. The work plan to date has been varied and successful.

Initiatives
We have introduced a variety of new clinical practices including:
1. Analgesia Protocol
2. Fluid Protocol
3. Fascia-Iliaca Blocks in A&E
4. Delirium – using 4AT & TIME
5. Elderly Care Orthopaedic Nurses (ECON) in trauma wards
6. Anaesthetic Guideline for peri-operative patients
7. 20mins Rule in theatre
8. Review of snack provision
9. Patient Feedback

Our latest project - ‘Theatre Buddies’
We are currently exploring how best to facilitate carers accompanying cognitively impaired patients to theatre to alleviate patient distress.

Results – some of our successes
The analgesia protocol is now embedded:
- Using the Analgesia Protocol in Trauma Wards

Fascia-Iliaca blocks are integral to A&E assessment:
- National Audit Data – Fib insert position

Delirium screening (4AT) is routine now:
- 4AT checked on admission

Our patients’ recommend our care:
- Patient feedback

Comprehensive Geriatric Assessment is better and our staff value the ECON service:
- National Audit Data – CGA in QEUH

The latest national audit data shows that 100% of QEUH hip fracture inpatients have their MUST, Falls risk and Pressure Care risk assessments performed within 24 hours of admission to the trauma wards.

Conclusions
We feel the HIPQIP approach has engaged, motivated and used the talents of staff to improve safety and enhance care within our organisation. This is sustainable due to the commitment of all involved and the ready access to national audit data.

References: Scottish Standards for Hip Fracture Care 2018