Hip fracture care clinical care standard indicators: 1a-Evidence of local arrangements for the management



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Hip fracture care clinical care standard indicators: 1a-Evidence of local arrangements for the management of patients with hip fracture in the emergency department

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: Indicator 1a-Evidence of local arrangements for the management of patients with

hip fracture in the emergency department

METEOR identifier: 628064

Registration status: Health, Standard 12/09/2016

Description: Evidence of local arrangements for the management of patients with hip fracture

in the emergency department.

Rationale: Patients who sustain hip fractures are, and will continue to be, an important patient

group in the Australian healthcare system. In most instances, the first hospital contact these patients will have will be when they present to an emergency

department (Considine & Hood 2000).

Patients presenting to the emergency department with a hip fracture should be rapidly assessed and assigned to a fast track admission pathway (SIGN 2009; Hili et al. 2014). The rate of post-operative complications, including confusion, healthcare associated infection, length of hospital stay and 12 month mortality, is lower in hip fracture patients managed by a comprehensive multidisciplinary fast-

track treatment and care programme (SIGN 2009).

Indicator set: Clinical care standard indicators: hip fracture

Australian Commission on Safety and Quality in Health Care, Superseded

18/06/2018

Health, Standard 12/09/2016

Outcome area: <u>Care at presentation</u>

Health, Standard 12/09/2016

Collection and usage attributes

Computation description: Documented local arrangements for the management of patients with hip fracture in

the emergency department that address timely assessment and management of

the patient's medical conditions, including but not limited to:

diagnostic imaging

• pain control

· cognitive assessment.

The documentation may be in the form of local protocols and/or a clinical pathway.

Computation: Yes/No

Representational attributes

Representation class: Count

Data type: Real

Unit of measure: Service event

Format: Yes/No

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: Considine J & Hood K 2000. Emergency department management of hip fractures: development of an evidence-based clinical guideline by literature review and

consensus. Emergency Medicine 12(4):329-36.

Hili S, Dawe EJC, Lindisfarne EAO & Stott PM 2014. Perioperative management of elderly patients suffering a hip fracture. British Journal of Hospital Medicine

75(2):78-82.

SIGN (Scottish Intercollegiate Guidelines Network) 2009. Management of hip fracture in older people: a national guideline. NHS Quality Improvement Scotland

(NHS QIS).