

PhysioSprint 2017
Audit data collection sheet
1. Acute ward
NHS Number

To link patient to their NHFD record and other parts of the pathway

Patient ID label
This site/service

Insert 3 letter NHFD hospital identification code for this acute unit

This information will not need to be entered into audit database

Discharged to

Insert 3 figure ID code for the unit/team patient is discharged to

This information will not need to be entered into audit database

WHEN?
Date of admission to this ward

Date of operation

WELL PLANNED REHABILITATION
Were SMART rehabilitation goals documented in the patient's notes within 72 hours of admission to this ward?

- Yes** Documented in patient's MDT records
Yes Documented in physiotherapists' notes
No because Not appropriate in this case
 Not done in this case

PROMPT POST-OP. MOBILISATION
Was the patient transferred (standing or hoisted) out of bed on the day after operation?

- Yes** *This may be in any fashion, including hoisting and may be by physiotherapists, nurses or any member of the MDT*
No because Inadequate post-op. pain control (You may tick more than one reason)
 Symptomatic hypotension
 Bed-bound before this hip fracture
 Appropriate equipment or seating not available
 No provision for routine physiotherapist-led mobilisation
 Patient too agitated or refused
 Other documented contraindication
 Not done in this case (eg. because of staff shortage)

HIGH QUALITY REHABILITATION
Day of operation
Defining the intensity and quality of therapy
Day 0
Day 1
Day 2
Day 3
Day 4
Day 5
Day 6
What rehab. was provided each day of the first week after admission to this ward? * Please tick as many as apply on each occasion

Mobilised ("bum off bed")							
Gait re-education							
ROM exercise							
Strength training							
Balance training							
Transfer practice							

If patient was not successfully mobilised, what is the main reason why not? * Please tick the single most important option

Bed-bound before fracture							
Documented contraindication							
Insufficient staff							
No weekend cover							
Equipment or seating not available							
Patient refused							
Patient has moved on or deceased							
Not done							

For how long was the patient mobilising or receiving physiotherapy?

Total minutes (estimated)							
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What staff were involved in providing this?

Number of physios							
Number of physio assistants							
Number of nurses/HCA							