



Hip fracture rehabilitation in physiotherapy practice:

From hospital to home

Setting the standards for high quality rehabilitation after hip fracture to help transform lives and maximise independence

Hip fracture is a serious life-changing injury that affects older people (60 years old +). It is an emergency event the commonest reason that older people need emergency anaesthesia and surgery. More people are living longer following a hip fracture. This means that there is a growing focus on the quality of rehabilitation provided during recovery.

In 2017, the CSP commissioned the Royal College of Physicians to undertake a 'sprint' audit of hip fracture rehabilitation provision. The sprint audit involved over 130 Acute Trusts, with over 7000 patients with a hip fracture captured by the audit. Patients were followed from their acute stay, through next steps care and into community settings. This gave us the first national snapshot of hip-fracture rehabilitation provision in England and Wales.

The Hip Sprint audit, published in February 2018, found wide variations in the extent, quality and duration of hip-fracture rehabilitation. This has prompted the CSP to create new standards for hip fracture rehabilitation from the recommendations of the Hip Sprint audit. They link to existing quality standards and guidelines that are relevant to the rehabilitation of patients with hip fracture. These standards will enable physiotherapy teams to deliver high quality evidence based rehabilitation to their patients, and decrease the national variation currently occurring in hip fracture rehabilitation.

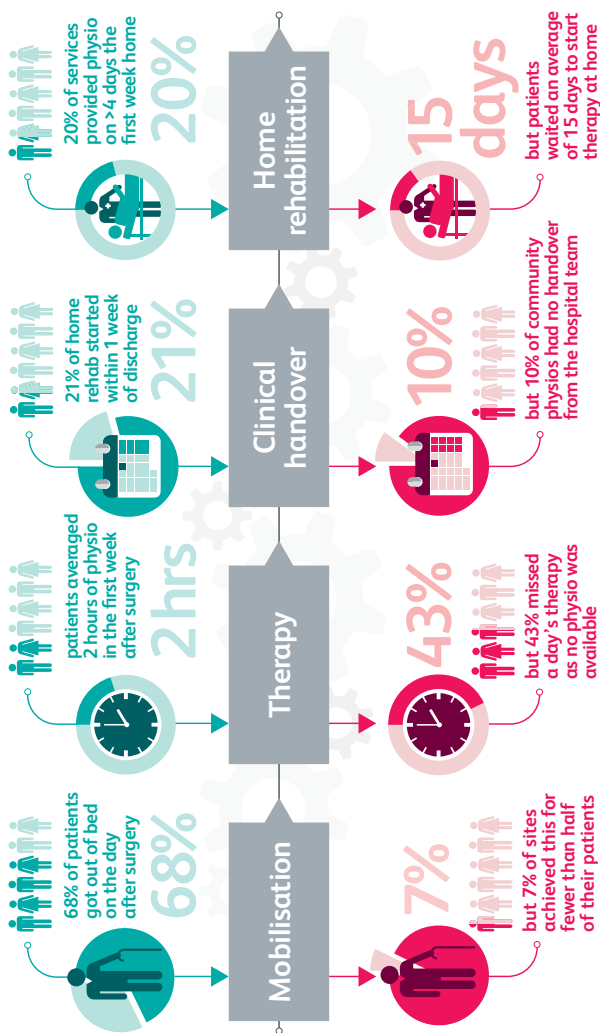
Hip fracture rehabilitation occurs along a whole care pathway from hospital to home. A patient-centered approach to care means understanding the whole care pathway and working to ensure that improved systems, processes and communication along, and within, that pathway mean that each patient receives optimal care that enable them to regain their full potential.

These new standards look at hip fracture rehabilitation through a physiotherapy lens

The hip-fracture standards at a glance:

- 1 A physiotherapist assesses all patients on the day of, or day following, hip fracture surgery
- 2 All patients are mobilised on the day of, or day following, hip fracture surgery.
- 3 All patients receive daily physiotherapy that should total at least two hours in the first 7 days post-surgery.
- 4 All patients receive at least two hours of rehabilitation in subsequent weeks post-surgery until they have achieved their goals.
- 5 All patients moving from hospital to the next phase of rehabilitation are seen by their new rehabilitation provider within 72 hours.
- 6 A physiotherapist is part of every Hip Fracture Programme's monthly clinical governance meeting.
- 7 Physiotherapists share their assessment findings and rehabilitation plans with all rehabilitation providers to enable clear communication with the MDT.

The key findings from HipSprint audit summarised:



Key References

Royal College of Physicians. The Physiotherapy Hip Fracture Sprint Audit. London. 201 www.fffap.org.uk/FFFAP/landing.nsf/phfsa.html

Scottish Intercollegiate Guidelines Network. Management of hip fracture in older people CG111. Edinburgh. Scottish Intercollegiate Guidelines Network. 2009. www.sign.ac.uk/sign-111-management-of-hip-fracture-in-older-people.html

National Institute for Health and Clinical Excellence. Hip Fracture: Management CG124. London: National Institute for Health and Clinical Excellence 2011. www.nice.org.uk/guidance/cg124

National Institute for Health and Clinical Excellence. Hip Fracture in adults QS16. London: National Institute for Health and Clinical Excellence 2012. www.nice.org.uk/guidance/qs16

National Institute for Health and Clinical Excellence. Falls in older people: Assessing risk and prevention CG161. London: National Institute for Health and Clinical Excellence 2013 www.nice.org.uk/guidance/cg161

National Institute for Health and Clinical Excellence. Falls in older people QS86. London: National Institute for Health and Clinical Excellence 2015. www.nice.org.uk/guidance/qs86

National Institute for Health and Clinical Excellence. Delirium: Prevention, diagnosis and management CG103. London: National Institute for Health and Clinical Excellence 2010. www.nice.org.uk/guidance/cg103

National Institute for Health and Clinical Excellence. Dementia: assessment, management and support for people living with dementia and their carers NG97. London: National Institute for Health and Clinical Excellence 2018. www.nice.org.uk/guidance/ng97

National Institute for Health and Clinical Excellence. Intermediate Care including reablement NG74. London: National Institute for Health and Clinical Excellence 2017. www.nice.org.uk/guidance/ng74

Public Health England. Muscle and bone strengthening and balance activities for general health benefits in adults and older adults. London. Public Health England. 2018 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721874/MBSBA_evidence_review.pdf

Key Resources for service improvement

NHS Improvement: Improvement Hub <https://improvement.nhs.uk/improvement-hub/>

Quality Service Improvement and Redesign Tools <https://improvement.nhs.uk/resources/quality-service-improvement-and-redesign-qsir-tools/>

PDSA Cycles and the Model for Improvement <https://improvement.nhs.uk/resources/pdsa-cycles/>

Sustainability Model <https://improvement.nhs.uk/documents/2174/sustainability-model.pdf>

Seven Steps to Measurement for Improvement <https://improvement.nhs.uk/resources/seven-steps-measurement-improvement/>

Patient Experience Improvement Framework <https://improvement.nhs.uk/resources/patient-experience-improvement-framework/>

NHS Education for Scotland: The Knowledge Network Quality Improvement Zone <https://learn.nes.nhs.scot/741/quality-improvement-zone>

Access data about your local service

www.fffap.org.uk/FFFAP/landing.nsf/phfsa.html

Find out about hip fracture rehabilitation in your local area by accessing the HipSprint heat-map of services. Search the map for trusts, hospitals, community centres and other physiotherapy services. Compare the data from your own service with other services and the new HipSprint standards to help you identify where local quality improvement works needs to be focussed.

Further information enquiries@csp.org.uk