

Media Release

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New standard to improve hip fracture care

Patients with hip fracture should receive surgery within 48 hours of hospital presentation and start moving around the day after surgery, according to a new care standard launched by the Australian Commission on Safety and Quality in Health Care (the Commission).

The *Hip Fracture Care Clinical Care Standard* supports high-quality care for patients with a confirmed or suspected hip fracture, and was released today by the Commission, in collaboration with the Health Quality & Safety Commission New Zealand.

The standard covers presentation to hospital, through to discharge, for people over 50, or for people under 50 who have a hip fracture due to osteoporosis or osteopenia.

Hip fractures are more common in older people, and with Australia's large ageing population, will place an increasing burden on the health system.

In Australia, an estimated 19 000 people over the age of 50 are hospitalised each year with a hip fracture, often after falls. Hip fractures can be potentially devastating injuries and can cause severe pain, loss of independence, disability and death.

The total direct cost in Australia of hip fracture linked to osteoporosis and osteopenia in people aged 50 and over has been estimated at \$695 million in 2012, most of which is in hospital care.

Chair of the Commission Board, Professor Willis Marshall said: "Not all patients with a hip fracture are receiving best practice care. Time to surgery, pain management and minimising risk of another fracture are all areas that can be improved.

"The *Hip Fracture Care Clinical Care Standard* recommends that patients receive surgery within 48 hours of presentation, if necessary, and be offered a falls and bone health assessment and a tailored care plan to reduce the risk of another fracture."

Evidence from one Australian study showed wide variation between hospitals in the time that hip fracture patients wait for surgery. The percentage of patients who received surgery within 48 hours ranged from 40 to 83% between hospitals. The new standard acknowledges that the 48-hour timeframe may not be feasible for some rural hospitals, and this may require them to build networks with other facilities to help patients receive timely care.

Research also shows that variation in the time that hip fracture patients wait for pain relief could be improved, with time to analgesia in the emergency department ranging from a median of 43 to 115 minutes between states.

Experience in the United Kingdom, where a similar hip fracture standard was introduced in 2007, showed a significant reduction in 30-day mortality rates, and an increase in early surgery rates from 54.5% to 71.3%, within four years.

The new standard is accompanied by a set of indicators, also developed by the Commission, which hospitals and health services can use to measure variation from best practice and achieve improvements in health outcomes.

The Commission has been working with the Australian and New Zealand Hip Fracture Registry, which collects information on hip fracture care and which hospitals and clinicians can use as a tool to review their practice against the indicators and, by extension, the standard.

Co-Chair of the Australian and New Zealand Hip Fracture Registry, Professor Jacqueline Close said: "Lives can be dramatically improved by applying best practice principles and through timely, coordinated care that considers the ongoing needs of each patient."

Professor Marshall welcomed the release of the Australian and New Zealand Hip Fracture Registry's first Annual Report into care of patients in Australia and New Zealand.

"The Registry plays a vital role in improving data collection on hip fracture care. Through data collection and feedback, it aims to reduce mortality, rates of complications, treatment delays, and maximise outcomes for older people after a fractured hip," said Professor Marshall.

Download the *Hip Fracture Care Clinical Care Standard* at www.safetyandquality.gov.au/ccs from Tuesday, 13 September 2016.

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The Australian Commission on Safety and Quality in Health Care

The Australian Commission on Safety and Quality in Health Care (the Commission) is an Australian Government agency that leads and coordinates national improvements in the safety and quality of health care based on the best available evidence. By working in partnership with patients, consumers, clinicians, managers, policy makers and health care organisations, our aim is to achieve a sustainable, safe and high-quality health system. As a result of its work, the Commission has an ongoing program of significant national activity with outcomes that are demonstrating direct patient benefit as well as creating essential underpinnings for ongoing improvement. The Commission aims to use its role as the national body for safety and quality in health care in Australia to ensure that the health system is better informed, supported and organised to deliver safe and high quality care.

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