

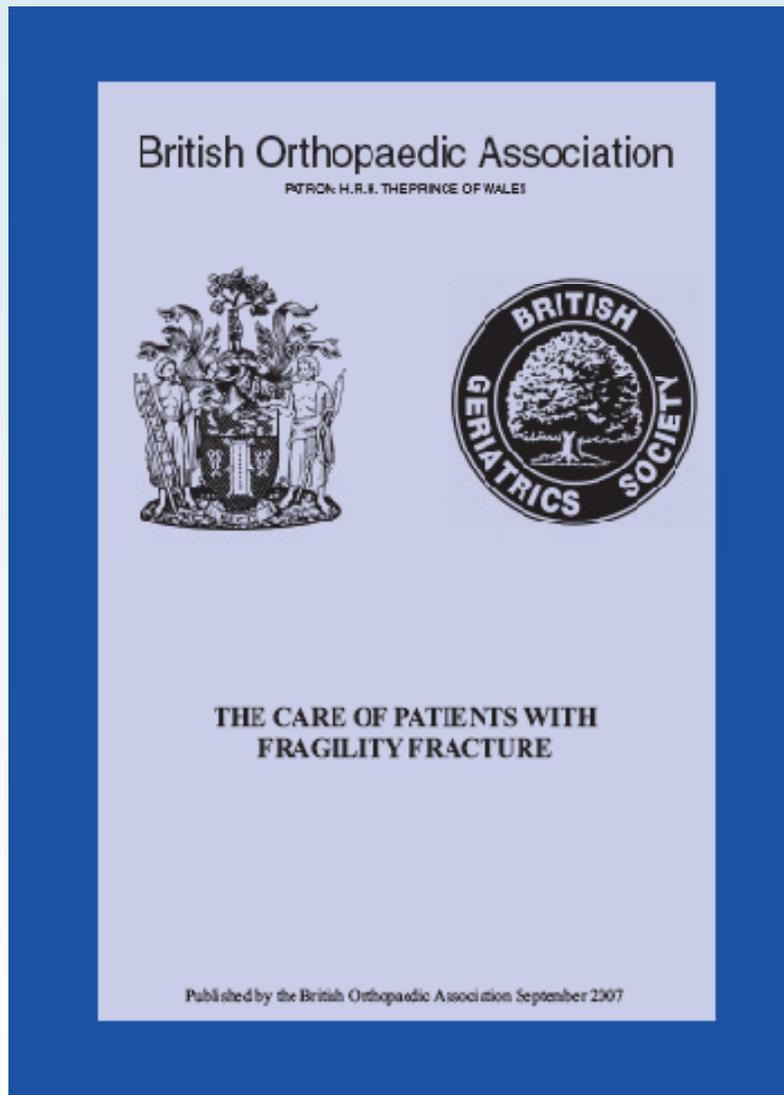
NHFD Regional Meeting
Chester, Feb 2010

Welcome

David Marsh
Professor of Clinical Orthopaedics, UCL
Co-chair, National Hip Fracture Database

Two linked initiatives

- BOA – BGS Blue Book on the Care of Patients with Fragility Fractures
- National Hip Fracture Database



Four big messages

Multidisciplinary approach to the management of fragility fracture patients

Reliable secondary prevention osteoporosis falls

Chronic disease model

Quality assurance the NHFD

BOA-BGS Blue Book

six standards for hip fracture care

1. All patients with hip fracture should be [redacted] to an acute orthopaedic ward within [redacted] of presentation
2. All patients with hip fracture who are medically fit should have [redacted] of admission, during normal working hours
3. All patients with hip fracture should be assessed and cared for with a view to minimising their risk of developing a [redacted]
4. All patients presenting with a fragility fracture should be managed on an orthopaedic ward with routine access to [redacted] [redacted] from the time of admission
5. All patients presenting with fragility fracture should be assessed to determine their need for [redacted] to prevent future osteoporotic fractures
6. All patients presenting with a fragility fracture following a fall should be offered multidisciplinary assessment and intervention to [redacted]

The NHFD Project

- jointly led by BOA and BGS

- Measures compliance with Blue Book standards
- A web-based national database, aiming to include every UK fracture unit
- Feed back to units their performance compared to national
- A professional steering group to manage analysis of, and access to the data
- Extensible for research
- Adopted by HQIP as a national clinical audit

NHFD Goals

- To change the behaviour of health workers who look after patients with fragility fractures
 - Prompt multidisciplinary care
 - Reliable secondary prevention
- To change the attitude of healthcare providers and commissioners to musculoskeletal medicine/surgery
 - Raise fragility fractures, especially hip fractures, up the agenda
- To provide a platform for clinical research
 - to improve surgical methods, medical care, rehabilitation, models of care

National Clinical Director for trauma

- Blue Book / NHFD provided the tools
 - Also helped build the case for a NCD
- NCD has provided the clout
- Progress has been rapid
 - Just in time before financial shutters come down

From April 2010

- Reimbursement to Trusts for each case of hip fracture will vary according to the quality of care
- Two criteria will be used
 - Time to theatre less than 36 hours
 - Involvement of orthogeriatrics in the acute phase
- Compliance for each case will be determined from the record in the National Hip Fracture Database

You need all three

This is a great opportunity

- To secure enhanced orthogeriatric input to your fracture service
- To secure better theatre access
- To secure resources to input to the NHFD

But only in 2010 - 2011

Top-own, bottom up

- DoH-led regional meetings
 - Aimed at commissioners
- NHFD-led regional meetings
 - Aimed at frontline staff

And you are...?

Orthopaedic surgeons	19
Geriatricians	17
Nurses	42
Managers	9
Others	6
TOTAL	93

What you should aim to take away

- A clear idea of what you are going to aim for in the next 12 months in your own unit