



**Implementing a new  
Orthogeriatric model to  
improve patient care and  
outcomes  
“Aiming for Excellence !”**



# Introduction

- **Hip fractures** effect 70,000 people in UK –Central challenge for UK Trauma services- 560 in Pinderfields a year.
- **Serious injury** effecting mainly older people- often sickest in hospital- Nationally 10% die in hospital within 1 month - 30% within 12 months!
- Damages quality of life , effects mobility and independence
- **National priority**, standards benchmarked through NHFD
- **Best Practice Tariff (BPT)** = Best Practice Care (**BPC**). Financial incentive - Time to theatre, orthogeriatric assessment, falls assessment, bone protection, joint care.
- **Mid Yorkshire Trust Priority** -Implemented a new ortho-geriatric model- Radical alternative to traditional models
- **Our vision** is to provide Gold standard service/centre of excellence

This presentation will demonstrate how the new ortho geriatric model introduced at Pinderfields hospital will help turn our vision into reality



# Benchmarking Standards

## What was wrong with the Traditional model of care?

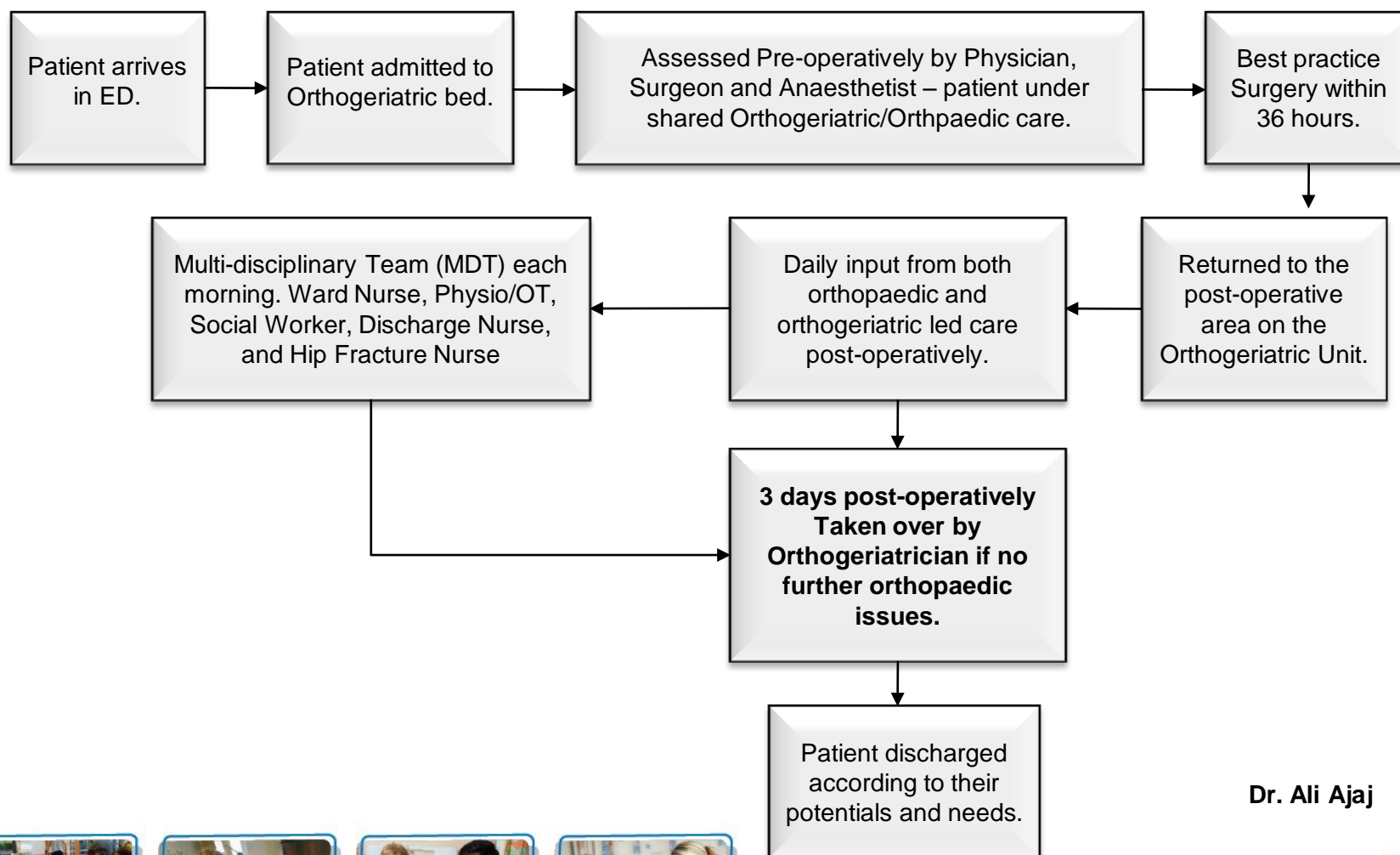
- Antiquated Nightingale Wards
- All hip fracture patients at PGH admitted under Orthopaedic Consultant on Trauma Ward – Traditional Model Care
- Ortho- geriatrician review – twice a week – no contingency plans
- Delays in operative procedures; only 39% operation within 36hrs
- Insufficient theatre capacity
- Increased length of stay in Acute Care; average LOS 19 days
- Outlying hip fracture patients; – inconsistency in care;
- 11% mortality rates
- *Only 4% patients met BPT! **We were letting our patients down!!***
- Drivers for change - QUIP Group – National incentive, BPT

### **Centralisation of Trauma services March 2011**

Implementation of Ortho-geriatric model based on medical model



# Implementing an Ortho-geriatric Model of Care.



Dr. Ali Ajaj



## Initiatives and Improvements

- Orthogeriatric & anaesthetic preoperative optimisation
- Dedicated theatre for hip fractures
- Trauma Co-ordinator
- Senior anaesthetist
- Orthogeriatric nurse specialist
- Ward sisters participate in daily Trauma meeting
- Theatre Breach analysis form – **local target 24hrs**
- **Reduced LOS, from 19 days to 10 days**
- Hip fracture steering group to benchmark hip fracture pathway
- Ward Banner – Profiles the patients journey
- National Ortho geriatric conference – share good practice
- Berlin invitation! Invitation to present in Jordan, September 2012 !
- Visits from other Acute Trusts



# Mapping our Progress

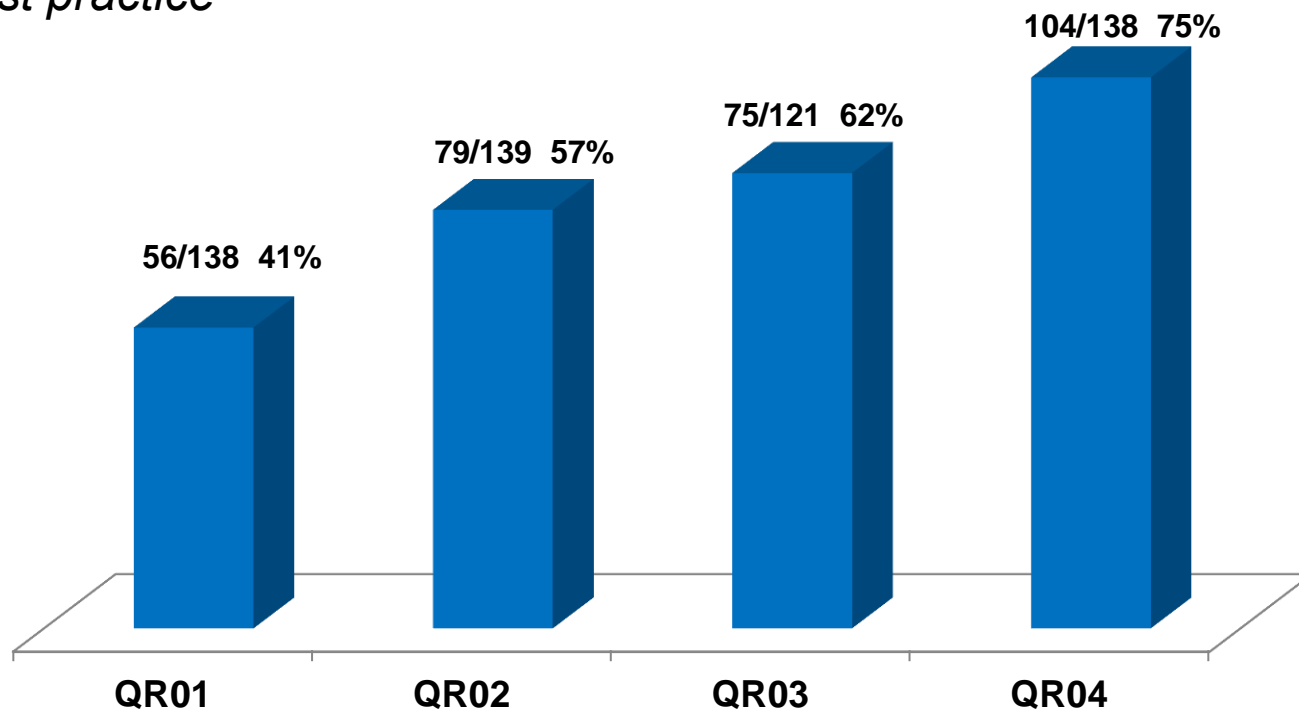
## Methodology

- 536 patients, over the age of 60 yrs, with hip fractures were admitted on to Ward 42 (Orthogeriatric Unit) from 01/04/2011 to 31/03/2012:
  - *138 patients from 01/04/2011 to 30/06/2011 (QR01);*
  - *139 patients from 01/07/2011 to 30/09/2011 (QR02);*
  - *121 patients from 01/10/2011 to 31/12/2011 (QR03);*
  - *138 patients from 01/01/2012 to 31/03/2012. (QR04);*
- Data inputted in to The National Hip Fracture Database (NHFD)



# Standard 1

*“The time of surgery was set at 36 hours rather than the 48 hrs outlined in the BOA/BGS Blue Book, as this is considered a more appropriate level of best practice”*

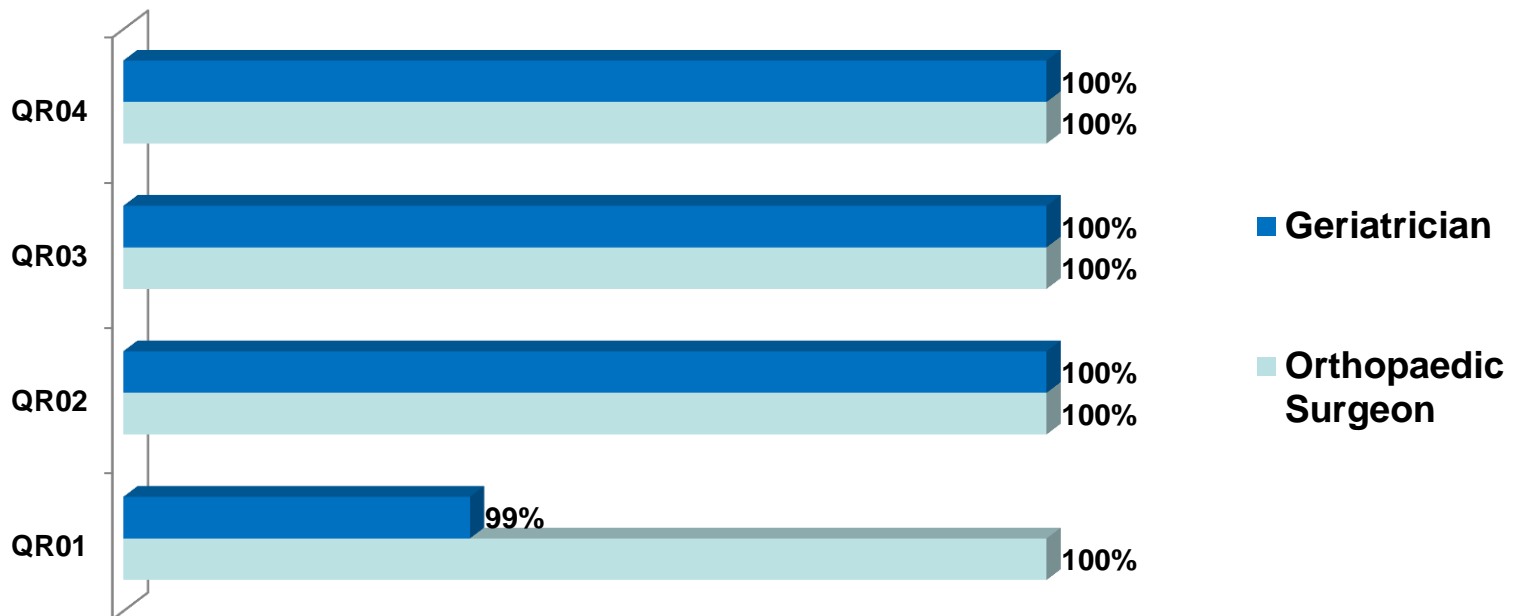


**In QR04 66 patients (48%) had their surgery within 24 hours from the time of their arrival in ED Meeting a local best practice target of 24 hours set by our Trust**



# Standard 2

***Patient must be admitted under the joint care of a Consultant geriatrician and a consultant orthopaedic surgeon***



# Standard 3

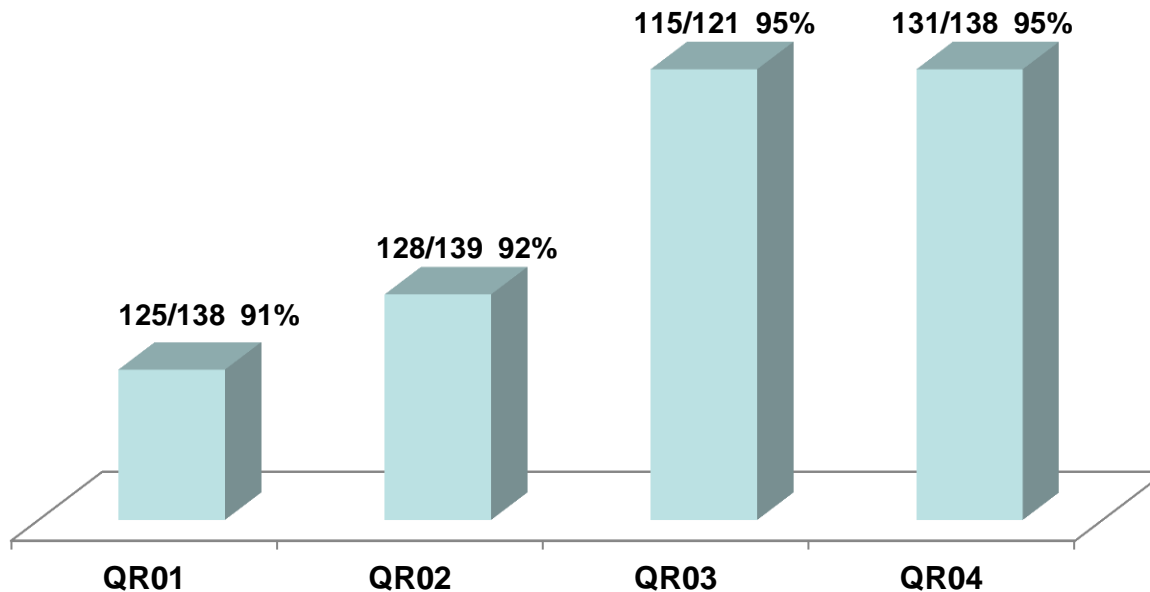
*“To capture the joint admission criteria, 2 GMC numbers are required: Consultant Orthopaedic Surgeon and Consultant Geriatrician. Entry of the GMC number for an individual patient indicates that the responsible Consultants satisfied that the agreed assessment protocols were followed”*

QR01	QR02	QR03	QR04
137/138 (99%)	139/139 (100%)	121/121 (100%)	138/138 (100%)



# Standard 4

***Patient must be assessed by a geriatrician in the preoperative period (within 72 hours of admission)***

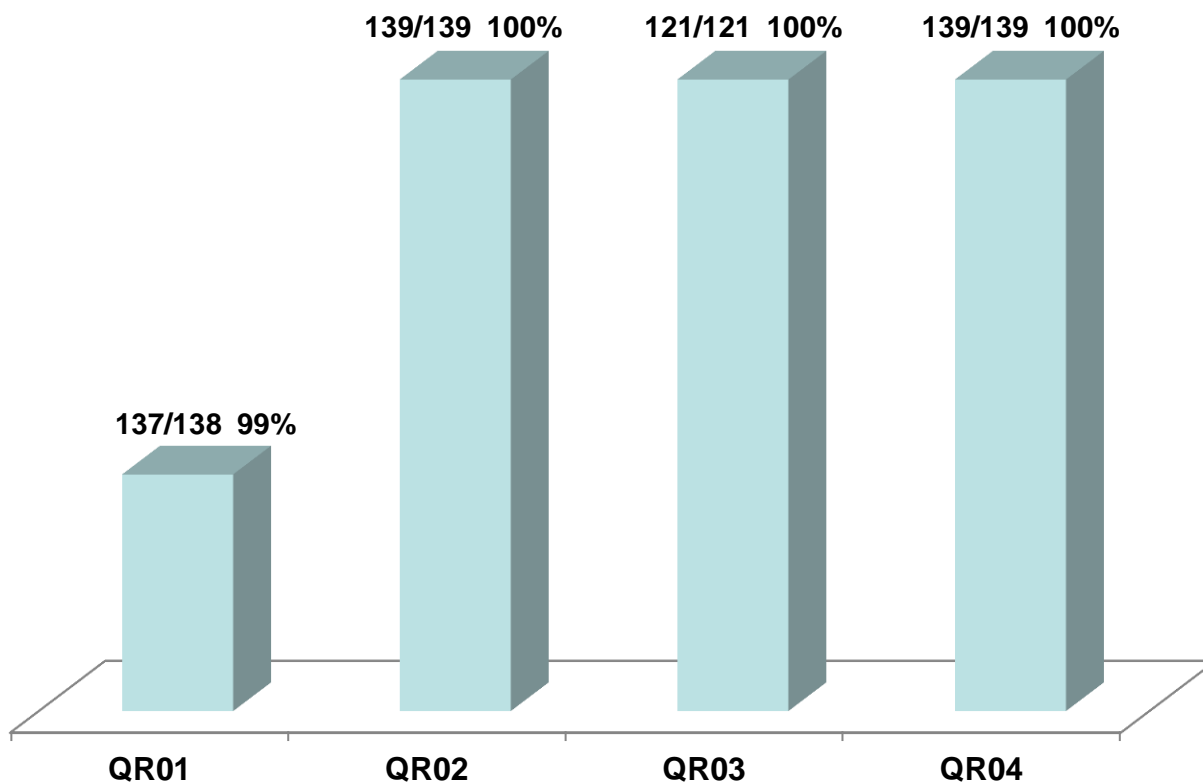


# Standard 5 MDT

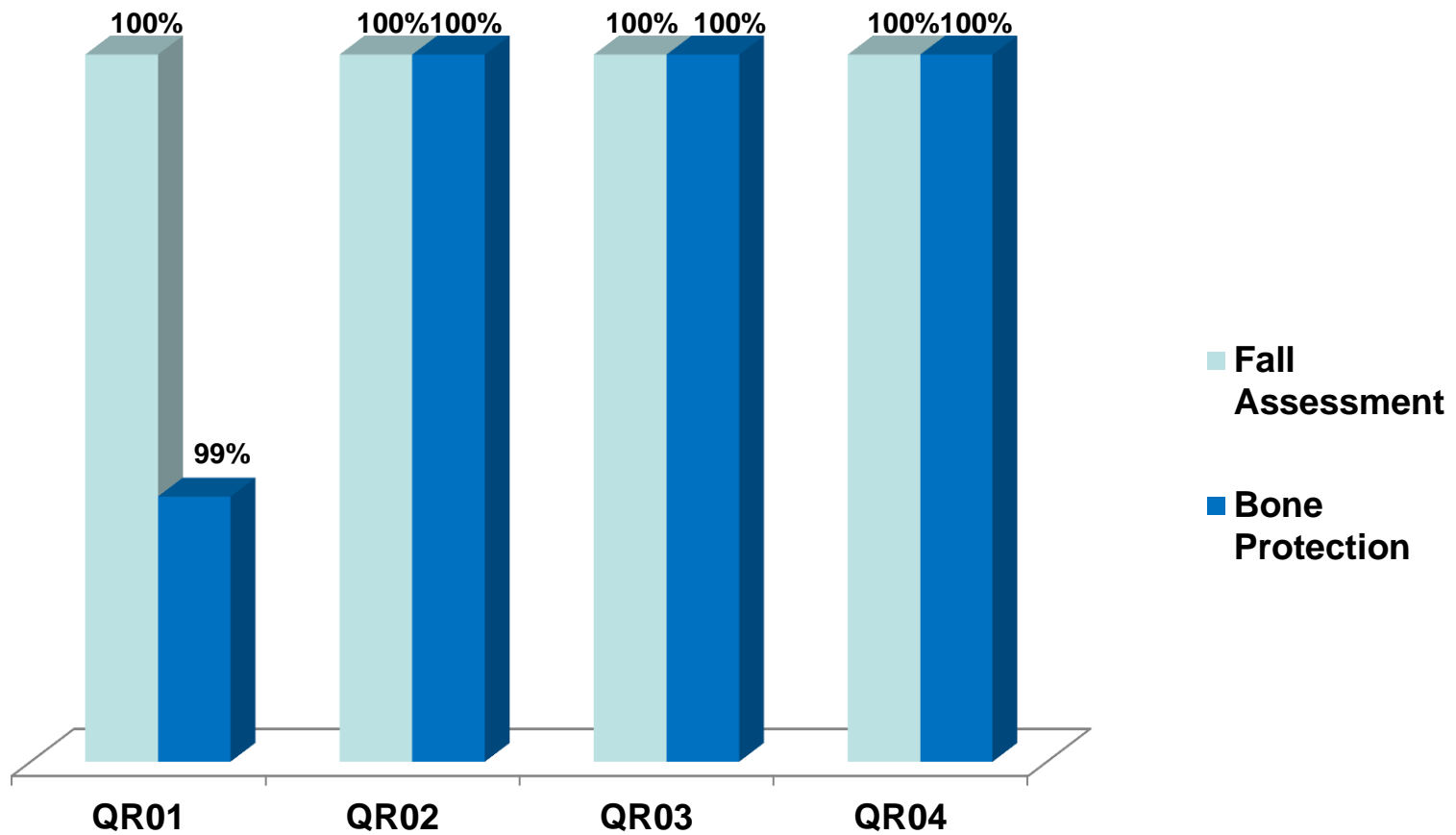
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*Bringing together community and hospital services*



# Standard 6

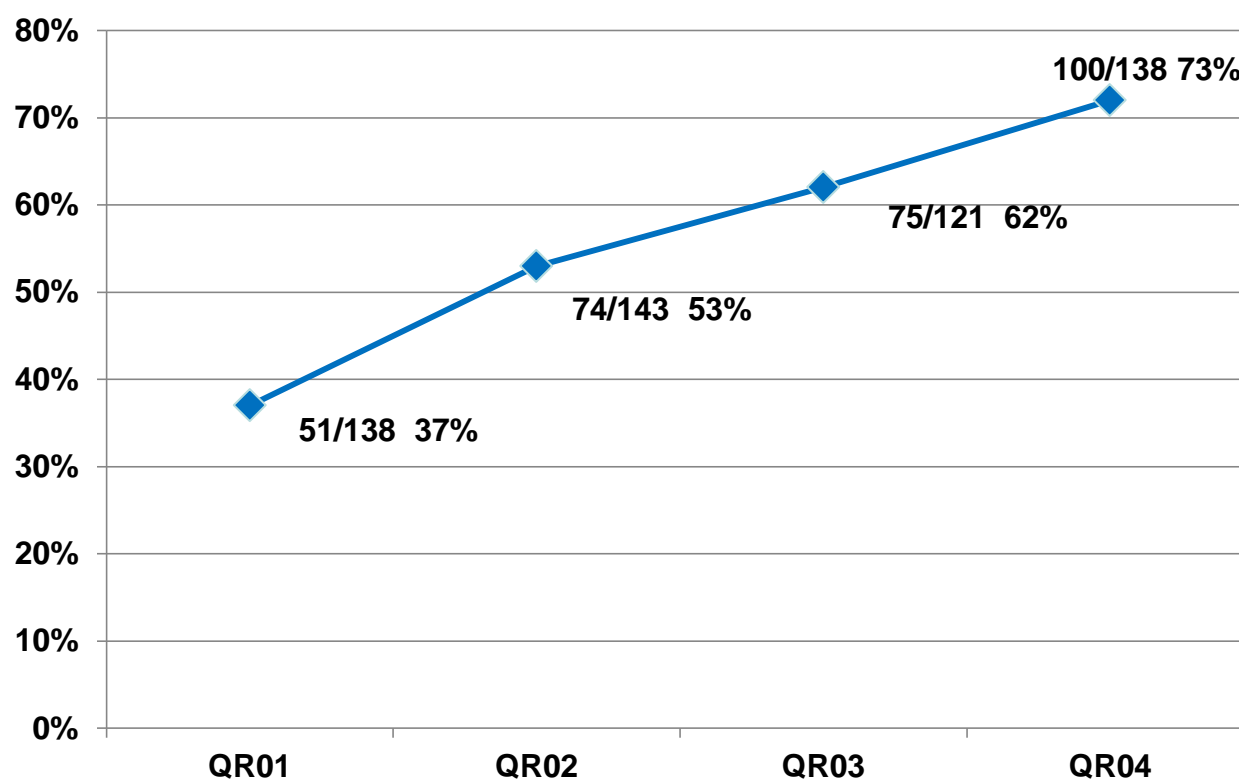


# Patient who met all the Best Practice Tariff Standards

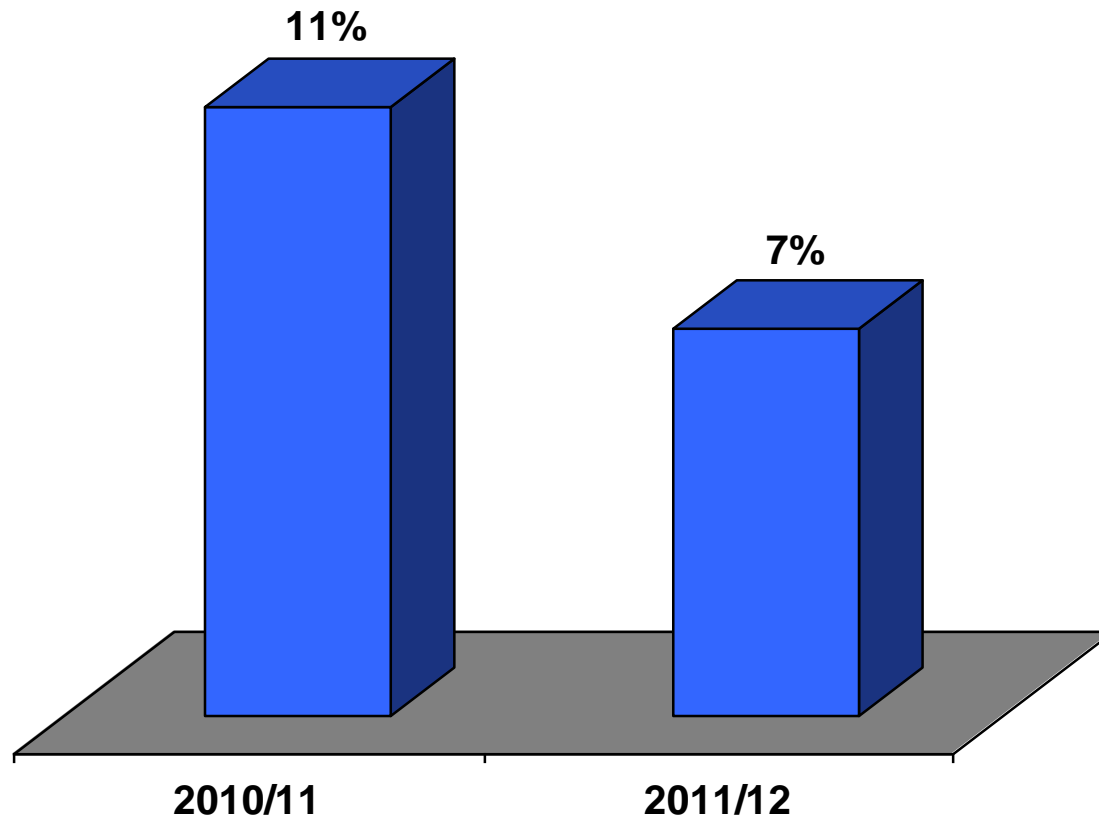
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# Mortality Rates



# Overcoming initial Challenges

- **Insufficient staffing levels – severe knowledge and skills gaps – compromised patient safety**;- Bridged with Competency based training programme -Senior Leadership
- **Reduced patient visibility – cubicles- compromised patient safety - Increased Patient falls** – introduced intentional rounding & sensor pads – now reduced falls by 70%
- **Pressure sores and infections** –Competency based Education /Training – Substantial reduction of both
- **High staff sickness levels(mainly inherited),low staff morale**; - Team building sessions, news letter, employee of the month
- ***Unavailability of Ring fenced hip fracture beds due to bed pressures- Challenge!***

***Patient and visitor ward rounds -Feed back is excellent***



## Where Next? Future Vision

- To continue to benchmark good practice & further improve patient care
- Meet our own Trust target - operation within 24hrs
- Annual, National Orthogeriatric conference
- Share our journey and vision with other Trusts
- Dr Ali Ajaj presenting our model in Jordan !
- Become a centre of excellence



# Conclusion

Evidence from Best Practice Tariff highlights significant improvements in all six standards from April 2011 to March 2012, with 72% of patients now meeting the BPT compared to only 4% under the Traditional model of care..

The hip fracture pathway ensures high quality care for our older hip fracture patients through well co-ordinated multidisciplinary team work, pre-operative optimisation of care and prompt surgery.

This is achieved through continuous benchmarking of the hip fracture pathway, MDT senior leadership and a shared vision with the **patients experience at the centre of every thing we do !..**

Our model has made a significant difference, it has **transformed the care of our vulnerable older patients and saved lives!!!**

**We are proud to announce that our new orthogeriatric model has been awarded the “Excellence in service delivery award” at Mid Yorkshire hospitals NHS Trust**

