Introduction of Early Supported Discharge to Intermediate Care Pathway for Hip Fracture

Neil Pendleton, Mark Brown, Heather Spence

Salford Royal NHS Hospital
Introduction of Early Supported Discharge to Intermediate Care Pathway for Hip Fracture

• Dr Neil Pendleton, Consultant Geriatrician and Salford Royal NHS Hospital lead for NHFD

• Mr Mark Brown, Advanced Nurse Practitioner in Orthogeriatrics Salford Royal NHS Hospital

• Ms Heather Spence, Unit Manager Heartly Green Intermediate Care Unit, Salford Royal NHS Hospital
1.8.4 Consider early supported discharge as part of the Hip Fracture Programme, provided the Hip Fracture Programme multidisciplinary team remains involved, and the patient:

- is medically stable and
- has the mental ability to participate in continued rehabilitation and
- is able to transfer and mobilise short distances and
- has not yet achieved their full rehabilitation potential, as discussed with the patient, carer and family.

1.8.5 Only consider intermediate care (continued rehabilitation in a community hospital or residential care unit) if all of the following criteria are met:

- intermediate care is included in the Hip Fracture Programme and
- the Hip Fracture Programme team retains the clinical lead, including patient selection, agreement of length of stay and ongoing objectives for intermediate care and
- the Hip Fracture Programme team retains the managerial lead, ensuring that intermediate care is not resourced as a substitute for an effective acute hospital Programme.
Intermediate Care Board Salford

• Created a collaborative group to design 4 clinical pathways for key conditions in 2009
• Directed by senior management team from Hospital Trust, Primary Care Trust and Local Social Services
• One chosen Fractured Neck of Femur
• A working group was established chaired by N Pendleton with representation of all stakeholders
Hip Fracture Working Group

- Project specific manager
- Milestones set by Board
- Clear terms of reference
- Wide membership
Salford Royal Early Supported Discharge Pathway for Hip Fracture

• Known in Salford Royal as ESD
• Development listened to all stakeholders
• Ensured consideration needs of both ward MDT, discharge team and recipients in IMC
• Built in commitment by Acute service team to follow up patient in IMC
• Pilot tested with re-drafts based on user feedback
• March 2010 Pathway introduced at Salford Royal Hospital and Heartly Green Intermediate Care unit
Salford Royal Early Supported Discharge Pathway for Hip Fracture: Evaluation

• Evaluation project undertaken in 2010 after introduction
• Continuous participation in NHFD permitted analysis with pre/post design
• Periods chosen: pre=01/01/10-31/03/10; post=01/04/10-30/06/10
• Outcomes compared: Length of Stay (LOS); mortality; re-admission; number of admissions transferred to IMC rehabilitation
Salford Royal Early Supported Discharge Pathway for Hip Fracture: Evaluation

<table>
<thead>
<tr>
<th></th>
<th>Pre ESD Pathway</th>
<th>Post-ESD Pathway</th>
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<tbody>
<tr>
<td>Number admissions</td>
<td>79</td>
<td>75</td>
</tr>
<tr>
<td>Number admissions &gt;65years</td>
<td>70</td>
<td>66</td>
</tr>
<tr>
<td>Age</td>
<td>82(65-97) years</td>
<td>82(65-98) years</td>
</tr>
<tr>
<td>Gender</td>
<td>53(76%) females</td>
<td>52(78%) females</td>
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<tr>
<td>RH/NH residents</td>
<td>13(23%)</td>
<td>14(22%)</td>
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Salford Royal Early Supported Discharge Pathway for Hip Fracture: Evaluation

Length of Stay

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<tr>
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<th>Length of Stay (days)</th>
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<tbody>
<tr>
<td>Pre-ESD Pathway</td>
<td>21</td>
</tr>
<tr>
<td>Post-ESD Pathway</td>
<td>13</td>
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# Salford Royal Early Supported Discharge Pathway for Hip Fracture: Evaluation

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<thead>
<tr>
<th></th>
<th>Pre-ESD pathway</th>
<th>Post-ESD pathway</th>
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<tbody>
<tr>
<td>Length of Stay</td>
<td>21(7-48)days</td>
<td>13(2-27)days</td>
</tr>
<tr>
<td>Mortality</td>
<td>14(20%)</td>
<td>12(16%)</td>
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<tr>
<td>Readmissions</td>
<td>9(13%)</td>
<td>11(17%)</td>
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<tr>
<td>Transfers to rehabilitation</td>
<td>37%</td>
<td>39%</td>
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Salford Royal Early Supported Discharge Pathway for Hip Fracture

• Comparable cohorts during evaluation
• Period demonstrated average of 7 days reduction in LOS with ESD pathway
• No significant effect on mortality or readmission
Salford Royal Early Supported Discharge Pathway for Hip Fracture

• The hip fracture ESD pathway standard protocol (see NHFD website resources)
• Maintained reduction in acute hospital LOS (Jan 2012-13 mean 18.7 days)
• Orthogeriatric team work across acute hospital and IMC
• Continued develop ESD pathway: now electronic
• Possible use on other index situations