

Launch of the **Hip Fracture** Clinical Care Standard

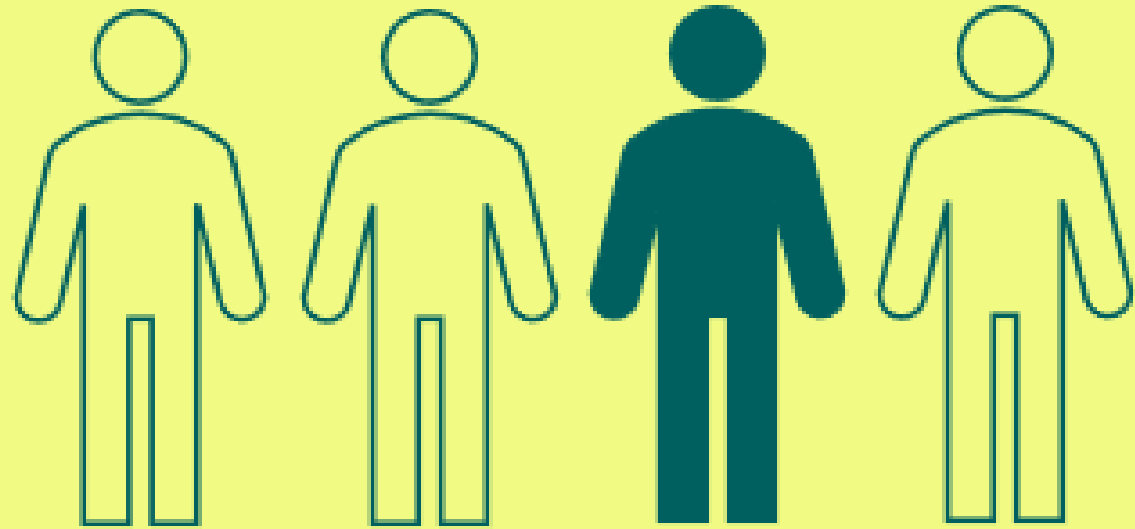
11 September 2023



Around

1 in 4

hip fracture
patients die
within 1 year



SOURCE: ANZHFR Annual Report, 2022.

**Hip fractures cost
the health system
an estimated \$595
million in 2019-2020**



SOURCE: Australian Disease Expenditure Study.



Since 2016, as a result of the Hip Fracture Clinical Care Standard

67%

of survey respondents made
changes at their
organisation

(n=82/123)

98%

of those making changes
reported improved
quality of care

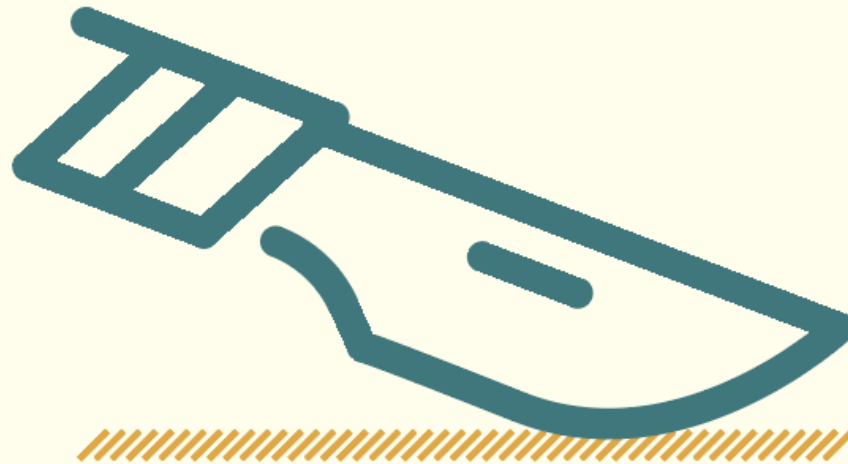
(n=80/82)

Quality Statements

1. Care at presentation
2. Pain Management
3. Orthogeriatric model of care
4. Timing of surgery
5. Mobilisation and weight bearing
6. Minimising risk of another fracture
7. Transition from hospital care

TIME TO SURGERY REDUCED

48
hours



36
hours

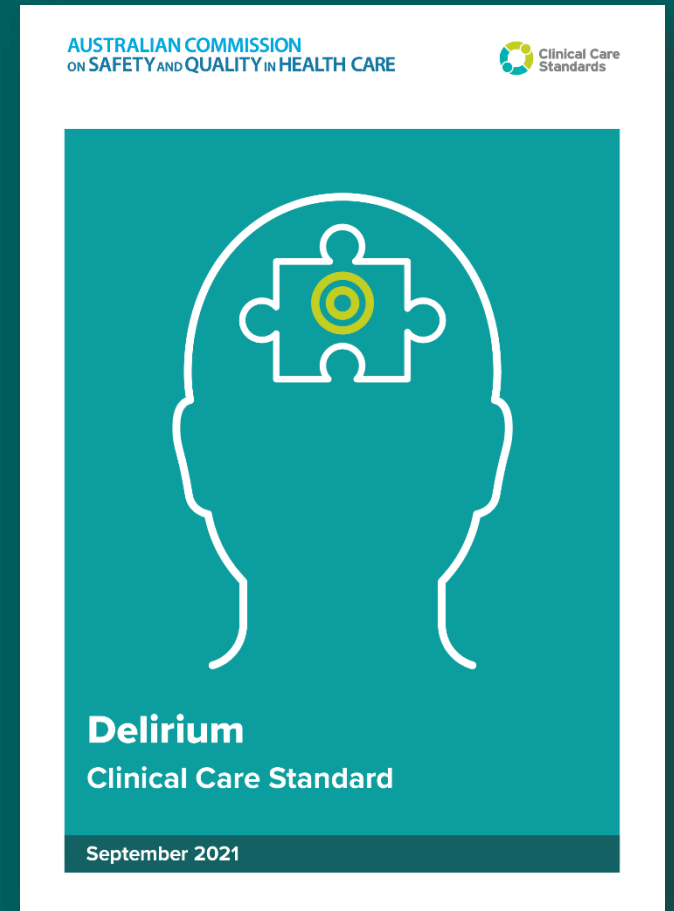
Frailty, nutrition and delirium

3 Orthogeriatric model of care

Indicator 3a: Proportion of patients with a hip fracture who had a clinical frailty assessment using a validated tool.

Indicator 3b: Proportion of admitted patients with a hip fracture who were assessed for delirium after surgery.

Indicator 3c: Proportion of admitted patients with a hip fracture who received protein and energy oral nutritional supplements during their admission.



Transfers and transitions

- Nerve blocks prior to transfer
- Bone protection medicines prior to discharge



2

Pain management

Indicator 2c: Proportion of patients with a hip fracture who were transferred from another hospital for treatment who received a nerve block prior to transfer.

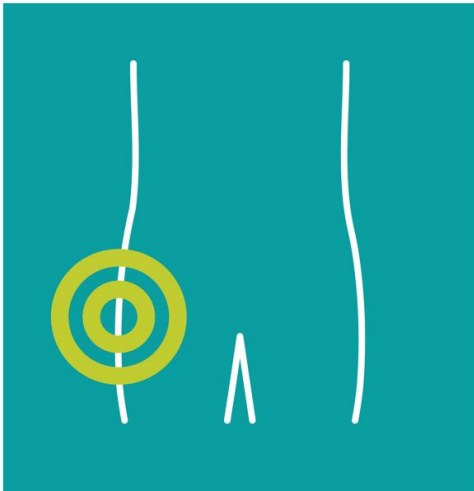
Cultural safety and equity

**Hip fracture
rates are higher
in Aboriginal
and Torres Strait
Islander people**



AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

Clinical Care
Standards



Hip Fracture
Clinical Care Standard

September 2023

CLINICAL CARE STANDARD

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

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Standards

Hip fracture care in Australia
11 September 2023

Hip fracture is a debilitating injury mostly occurring in people aged over 65 years. The revised Hip Fracture Clinical Care Standard will improve outcomes for patients and reduce their risk of another fracture.

NATIONAL DATA

Each year **19,000** people present with a hip fracture

1 in 4 people with a hip fracture die within a year

Aboriginal and Torres Strait Islander people are more likely to have a hip fracture.
Men are 50% and women 26% more likely compared with non-Indigenous Australians

Hip fractures cost the health system **\$595 million** in 2019-20

HOSPITAL CARE IN 2022

78% of patients had surgery within 48 hours

Hospitals' average time to surgery varied from **16 to 92 hours**

Only 45% of people walked on the first day after surgery

Only 32% of people left hospital on bone protection medication

Source: ANZHF Annual Report 2023

KEY CHANGES IN THE 2023 STANDARD

- 1 SURGERY IN 36 HRS**
Time to surgery reduced from 48 to 36 hours of presenting at any hospital.
- 2 MULTIDISCIPLINARY CARE**
Identify and manage malnutrition, frailty and delirium.
- 3 PAIN MANAGEMENT**
Offered a 'nerve block' injection in the groin to provide fast pain relief.
- 4 CULTURAL SAFETY**
Better communication to ensure First Nations people receive safe and equitable care.

FIND OUT MORE AT: safetyandquality.gov.au/hipfracture-ccs

FACTSHEETS

AUSTRALIAN COMMISSION
ON SAFETY AND QUALITY IN HEALTH CARE

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Hip Fracture
Clinical Care Standard

GUIDE
for consumers

1 Care at presentation

? What is a hip fracture?
A hip fracture is a break at the top of the thigh bone (femur) near the pelvis usually as the result of a fall. It is a common debilitating injury mostly occurring in people aged over 65 years old. As we get older, our strength and balance can reduce, and our bones become thinner due to conditions like osteoporosis. This means that we are more likely to fall and even a fall from a standing height can break a bone.

What the standard says
A person presenting to hospital with a suspected hip fracture receives care that is guided by timely assessment and management of medical conditions, including cognition, pain, nutritional status and frailty. Arrangements are made according to a locally endorsed hip fracture pathway.

What this means for you
When you arrive at hospital, the clinical team will assess you to see if you have a hip fracture (broken hip). They will also check any other health conditions so that you can have an operation quickly if you need one. As part of the assessment, you will need an X-ray and blood tests. Your clinician will:

- Check your overall health and ability to function before your injury
- Ask about any existing health conditions you may have
- Ask about any medicines that you are taking that may affect your surgery
- Make sure your pain is controlled
- Talk to you about possible reasons for your fall
- Check for any problems you may be having with your memory, thinking or communication that could mean you are at risk of delirium (a serious condition where there is a change in mental state that alters awareness, such as seeing or hearing things)
- Ask if you identify as Maori or Aboriginal and Torres Strait Islander, or need access to a translator.

Your priorities and choices are important, and your clinical team will support these wherever possible. Let them know if there are family members, friends or carers that you would like to have included in decisions about your care.

What is the Hip Fracture Care Clinical Care Standard?
The Hip Fracture Care Clinical Care Standard contains seven quality statements describing the care you should be offered if you have a hip fracture. You can use this information to help you and your carer make informed decisions in partnership with your treating team.
This guide explains each quality statement and what it means for you.
For more information or to read the full clinical care standard visit: safetyandquality.gov.au/ccs.
Note: The word 'clinician' is used in this document to refer to all types of healthcare providers who directly provide health care, including paramedics, nurses, doctors, pharmacists, Aboriginal health practitioners, psychologists and physiotherapists.

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Hip Fracture Clinical Care Standard 2023 | 1

CONSUMER GUIDE

safetyandquality.gov.au/hipfracture-ccs

