



Meeting the Quality  
and Productivity Challenge

# Hip Replacements

## Improving the Care Pathway

### Topics include:

- Meeting the Quality and Productivity Challenge: Hip Replacement
- Hip Replacement: the evidence
- An overnight Hip Replacements service: a case study
- Ensuring productivity and length of stay improvements do not impact negatively on readmission rates, quality and community services
- Care Pathways as a tool to improve practice and reduce variation
  - a. Hip and Knee Pain Pathway
  - b. A Care Pathway for Hip Replacement
  - c. Involving patients, setting outcome goals and identifying variation
- Improving patient outcomes for Hip Replacement: learning from the National Joint Registry
- Key characteristics of high performing Hip Replacement pathways

### Chair and speakers include:

**Mr Peter Kay**

*President*

The British Orthopaedic Association

**Mr Graham Gie**

*President The British Hip Society and  
Consultant Orthopaedic Surgeon*

**Roger Taylor**

*Research Director Dr Foster Unit  
Imperial College London*

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Meeting the Quality and Productivity Challenge

# Hip Replacements

## Improving the Care Pathway

**"Whilst the average length of stay for neck of femur fractures with hip replacements in English acute trusts is 19 days, locally this ranges from 7 days in the best performing trust up to 43 days for the worst performing."**

SOURCE: DR FOSTER INTELLIGENCE, AVERAGE LENGTH OF STAY FOR HRG 3.5 CODES H86 'NECK OF FEMUR FRACTURE WITH HIP REPLACEMENT W/ CC' AND H87 'NECK OF FEMUR FRACTURE WITH HIP REPLACEMENT W/O CC', 2009 DATA EXCLUDING DAYCASE SPELLS.

This one day conference will be chaired by **Mr Peter Kay** *President* The British Orthopaedic Association and will open with **Mr Graham Gie** *President* The British Hip Society and *Consultant Orthopaedic Surgeon* who will discuss meeting the quality and productivity challenge. Key to this will be enhancing the Hip Replacement service, which will include a number of case studies of good practice. This will be followed by **Roger Taylor** *Research Director* *Dr Foster Unit* Imperial College London who will present some key facts and figures to show variations in length of stay for Hip Replacement, how mortality and revision rates compare across organisations and internationally and conclude with co-morbidity and mortality rates. Improving productivity and reducing length of stay are two fundamental areas where progress can be made in order to improve the Hip Replacement service.

The morning continues with a focus on improving productivity and reducing length of stay for Hip Replacements and will discuss a QIPP approach to Hip Replacement, redesigning the patient pathway, simple measures for patients, looking at costs and saving, enhanced recovery and the one day hip, identifying the factors influencing length of stay and spreading good practice within the Trust. The case studies will focus on a 24 hour hip replacement service at Hastings and Eastbourne NHS Trust recommended as an example of high quality care in action by the Department of Health and NHS Evidence followed by a second case study on developing enhanced recovery within a 24 hour hip replacement service.

Following lunch the conference will focus on care pathways for Hip Replacement with a number of speakers presenting on using care pathways as a tool to improve practice and reduce variation. The final session will conclude the day by discussing improving patient outcomes by learning from the National Joint Registry and discussing the key characteristics of high performing Hip Replacement pathways.



10.00 **Chairman's introduction**

10.10 **Meeting the Quality and Productivity Challenge: Hip Replacement**

**Mr Graham Gie**

*President*  
The British Hip Society and  
*Consultant Orthopaedic Surgeon*

- meeting the quality and productivity challenge
- improving the Hip Replacement service: case studies of good practice
- moving forward and developing consensus on optimal practice

10.45 **Hip Replacement: the evidence**

**Roger Taylor**

*Research Director Dr Foster Unit*  
Imperial College London

- what is the variation in length of stay for Hip Replacement across organisations?
- how do mortality and revision rates compare across organisations and internationally?
- co-morbidity and mortality: reducing variation in service provision

11.15 Questions and answers, followed by coffee and exhibition at 11.25

**FOCUS: IMPROVING PRODUCTIVITY AND REDUCING LENGTH OF STAY FOR HIP REPLACEMENT**

11.50 **An overnight Hip Replacements service**

**Mr Hugh Apthorp,**

*Consultant Orthopaedic Surgeon*  
Hastings and Eastbourne NHS Trust  
*This has been recommended as an example of*  
*High Quality Care in Action by the Department of Health and*  
*NHS Evidence*

- redesigning the patient pathway
- Team Working
- our overnight service: patient feedback
- the SHA Perspective: understanding variation in Hip Replacement by organization and individual surgeon
- looking at costs and savings
- Service Management
- Managing change in multidisciplinary groups

12.20 **Enhanced Recovery: case study '24 hour hips'**

**J C John**

*Clinical Lead & Consultant Anaesthetist*  
Robert Jones and Agnes Orthopaedic  
and District Hospital NHS Trust

- enhanced recovery and the one day hip
- identify the factors influencing length of stay
- how we have achieved a reduction in length of stay
- spreading good practice within the Trust
- key barriers to change and how to overcome them

12.50 Questions and answers, followed by lunch and exhibition at 13.00

**FOCUS: IMPROVING THE CARE PATHWAY FOR HIP REPLACEMENT**

14.00 **Care Pathways as a tool to improve practice and reduce variation**

**a. Hip and Knee Pain Pathway**

**Michelle Gerard-Wilson**

*Orthopaedic Specialist Nurse*  
Hwyel Dda NHS Trust

- developing a care pathway for hip pain
- the impact on inappropriate referral rates
- a walk through the pathway

**b. A Care Pathway for Hip Replacement**

**Angela Hughes**

*Care Pathways Manager*  
Cardiff and Vale Health Board

- process mapping to identify current practice and priorities for change
- using variance to improve the pathway
- costing the pathway to identify cost benefit

**c. Involving patients, setting outcome goals and identifying variation**

**Mr Colin Howie**

*Consultant Orthopaedic Surgeon* NHS Lothian and  
*Member* The Kinemax Outcomes Group

- involving patients in developing care pathways for Hip Replacement
- identifying goals within the pathway
- variation as a source of potential improvement

15.30 Questions and answers, followed by tea and exhibition at 15.40

**FOCUS: IMPROVING PATIENT OUTCOMES**

16.00 **Key characteristics of high performing Hip Replacement pathways**

**Mr Rob Middleton**

*Consultant Orthopaedic Surgeon and Clinical Lead*  
Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust  
and *Primary Hip and Knee Replacement Pathway Lead, Orthopaedic*  
*Rapid Improvement Programme*  
The NHS Institute for Innovation and Improvement

- national data on variation for benchmarking
- developing the metrics for a high quality service
- monitoring and comparing outcomes in the long term
- monitoring patient outcomes: and update from the NHS Institute Rapid Improvement Programme for Orthopaedics

16.30 **Looking forward: The National Joint Registry Perspective**

**Prof Paul Gregg**

*Acting Chairman*  
The National Joint Registry Steering Committee, *Consultant*  
*Orthopaedic Surgeon, & Past President,*  
The British Orthopaedic Association

- looking forward: the potential role of the National Joint Registry in meeting the quality agenda for Hip Replacements

16.50 Questions and answers, followed by close

# Hip Replacements

## Improving the Care Pathway

THURSDAY 30 SEPTEMBER 2010 76 PORTLAND PLACE, LONDON



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76 Portland Place, London, W1B 1NT. A map of the venue will be sent with confirmation of your booking.

### Date

Thursday 30 September 2010.

### Conference fee

- £365 + VAT (£428.88) for NHS, social care, private healthcare organisations and universities.
- £300 + VAT (£352.50) for voluntary sector/charities.
- £495 + VAT (£581.63) for commercial organisations.
- £300 + VAT (£352.50) for IHM members.

The fee includes lunch, refreshments and a copy of the conference handbook. VAT at 17.5%.

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This conference is recognised by the IHM, supported by the British Hip Society, and CPD accredited by the Royal College of Physicians, London.

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