Falls and Fragility Fracture Audit Programme

Update for Healthcare Conference
5\textsuperscript{th} November 2014

Dr Helen Wilson
Member of FFFAP Executive Board
Content

• The Falls and Fragility Fracture Audit Programme
• The Falls Audit
• The National Hip Fracture Database
• The Fracture Liaison Service Database
• The Future
Clinical Effectiveness and Evaluation Unit

‘relentless in its pursuit of improvements in healthcare’

- defines standards of healthcare (developing clinical guidelines)
- measures care (mainly through national clinical audit)
- uses data to support healthcare improvement in a variety of clinical conditions
Falls and Fragility Fracture Audit Programme (FFFAP)

- Falls Audit
- NHFD
- Fracture Liaison Service Database
Audit Cycle

1. Select topic
2. Agree standards of best practice
3. Define methodology
4. Pilot and data collection
5. Analysis and Reporting
6. Make recommendations
7. Implement change
8. Re-audit

Action
Planning
Audit
How does data improve quality?

Facts do not cease to exist just because they are ignored.  Aldous Huxley
Falls and Fragility Fracture Audit Programme (FFFAP)

Falls Audit

- NHFD
- Fracture Liaison Service Database
Falls Audits

National audit of the organisation of service for falls and bone health in older people 2006, 2009, 2010

National clinical audit of falls and bone health in older people 2007

Feasibility Audit of inpatient falls 2011
CG21 extension
NICE QS for Falls in Care Settings

Quality Standards:

• Set ambitious but achievable goals for NHS
• About 12-16 high-level statements based on NHS Evidence accredited sources
• Include potential measurement sources through which providers of NHS funded care can demonstrate the quality of their services to commissioners
• National audits are a key source of evidence of compliance
• To raise the quality of hip fracture care
• To promote collaborative working
• To provide local data to support service development
• To provide national data for benchmarking
• To improve cost-effectiveness of care
Audit requires standards

Blue book
Six Standards of Care

- Patients admitted to an orthopaedic ward within 4 hours
- Surgery within 48 hours
- Orthogeriatric medical support
- Pressure sore assessment and minimisation
- Bone Health assessment
- Multidisciplinary falls risk assessment
NHFD

- Developed in 2004
- Funded by Industry
- Supported by BOA and BGS
- Based on the Central Cardiac Audit Database which started in 1996 (MINAP)
- Launched in 2007
- First national report in 2009
Update on the NHFD

Funded by HQIP
Hosted by RCP
New structure reporting into FFFAP Board
Recently moved to new IT provider – Crown informatics
Some minor changes to data set soon
Sprint Audits
Management of Outliers

Trusts informed and asked to check data
Offered visit by BOS / BGS team
Review of whole hip fracture programme
Regular clinical governance meetings
Falls and Fragility Fracture Audit Programme (FFFAP)

- Falls Audit
- NHFD

Fracture Liaison Service Database
Fracture Liaison Service Database

Capture all fragility fractures
Ensure falls and bone health assessment
To reduce further fractures
FLS-DB

• ‘FLS’ is the shorthand for any clinical system designed to ensure that this happens
• FLS-DB aims to improve systems by measuring the success of what is currently in place
• Following the example of the NHFD
NEW FRACTURE

INPATIENT ORTHO/TRAUMA WARD

OUTPATIENT FRACTURE CLINIC

FALLS RISK ASSESSMENT

EXERCISE CLASSES

Rx FOR FRACTURE 2Y PREVENTION

EDUCATION PROGRAMME

PRESCRIPTION ISSUED BY GP

Fracture Liaison Nurse (FLN)

Royal College of Physicians

Setting higher standards
HOW DOES AUDIT IMPROVE QUALITY OF CARE?
BEST PRACTICE TARIFF IN HIP FRACTURE: THREE YEARS OF PROGRESS
Political driver: Best Practice Tariff

- High **volume** service area
- **Variation** in clinical practice
- Improve *both* **quality** and **value**
- Excellent source of clinical **data**

Hip fracture
Cholecystectomy
Stroke
Cataract Surgery
Best practice care costs less...

Cost profile of meeting best practice

Tariff to reflect this profile over time
Base tariff for each HRG
Additional payment for best practice
Reduction in base tariff for current compliance rate

Payment per patient
Current price

Current tariff structure
Best practice tariff structure

2-part tariff for best practice
Definition of characteristics

• Surgery within 36 hours
• Joint care under Orthopaedic and Geriatricians
• Agreed protocols between Ortho/Apaesth/Geri
• Review by senior Geriatrician within 72 hours
• Senior Geriatrician led Multidisciplinary meetings
• Falls and Bone Health Assessment
• Pre and Post op AMTS
BPT

- First introduced in England in 2010
- (not applicable in Wales or Northern Ireland)
- Tariff started at £480
- Increased to £860 and is now £1500
Effect of BPTs

- Hip fractures
- Day case surgery
- Acute stroke

- Variable success
- Concern re quality of data
Expansion of Orthogeriatrics

2003  Only 4% Trusts had shared care  
      11% intending to implement

2009  20% of Trusts had five or more ward rounds per week

2013  50% of Trusts have five or more ward round per week
      57% patients are seen pre-operatively by orthogeriatrician
Trends in care April 08 to March 13

Graph showing trends in bone therapy or assessment, falls assessment, surgery within 36 hours, pre-operative assessment by geriatrician, and mortality at 30 days from April 2008 to March 2013.

Royal College of Physicians
Setting higher standards
The Effects of BPT

Over the last two years the number of hospitals receiving money through BPT has increased from 57% to 87%

Achievement of BPT has increased from 24% of patients to 60%
Quarter by quarter BPT criteria compliance and BPT achievement: 2010–2013
SPRINT AUDITS
Anaesthesia sprint audit of practice (ASAP)

- BGS/BOA/NHFD/AAGBI joint study
- Extension of NHFD for 3 month period
- Prospective audit linked to OUTCOME
- Data collected by anaesthetists – good quality
- Aimed for 10,000 patients
Background to ASAP

• little evidence to guide perioperative care

• controversy exists over optimal anaesthetic management

• NHS Hip Perioperative Network (HipPeN) collaborated with the NHFD to conduct a sprint audit
Standards

AAGBI SAFETY GUIDELINE

Management of Proximal Femoral Fractures 2011

Published by
The Association of Anaesthetists of Great Britain and Ireland
21 Portland Place, London, W1B 1PV
Telephone 020 7631 1650 Fax 020 7631 4352
info@aagbi.org
www.aagbi.org

June 2012
Falls and Fragility Fracture Audit Programme (FFFAP)

- Falls Audit
- NHFD
- Fracture Liaison Service Database
References


British Orthopaedic Association. The care of patients with fragility fracture (The Blue Book) 2007


2010 AGS/BGS Clinical Practice Guideline: Prevention of Falls in Older Persons


Fracture Prevention Services: an economic evaluation. DoH Nov 2009