

# Audit for Improvement



**Scottish Hip Fracture  
Audit**

**Kirsty Ward**



[http://www.orthopaedictraumanursing.com/article/S1878-1241\(17\)30002-3/fulltext](http://www.orthopaedictraumanursing.com/article/S1878-1241(17)30002-3/fulltext)

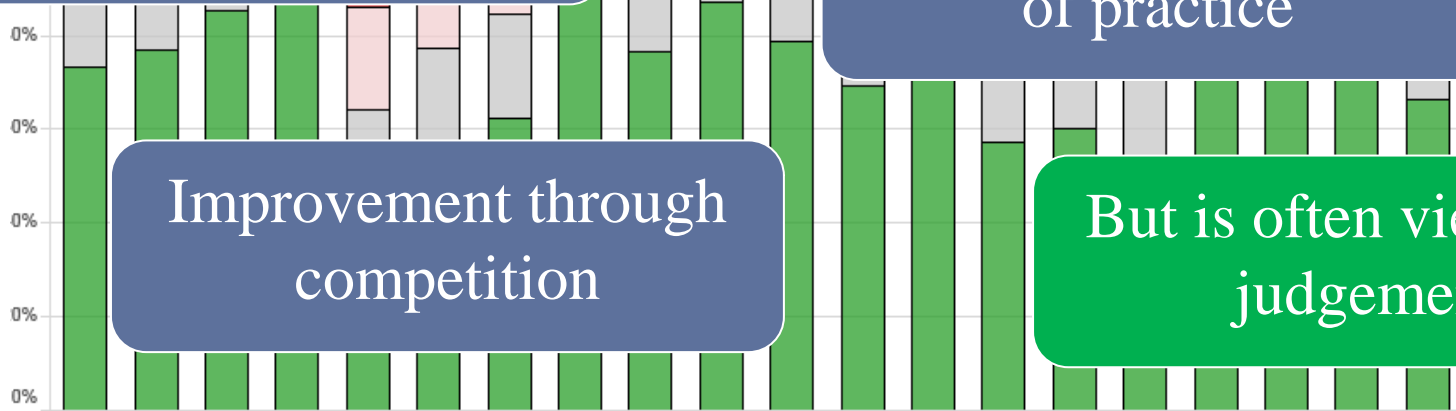
# National benchmarking has its place.....

Identify variation

Facilitates open sharing  
of practice

Improvement through  
competition

But is often viewed as  
judgement



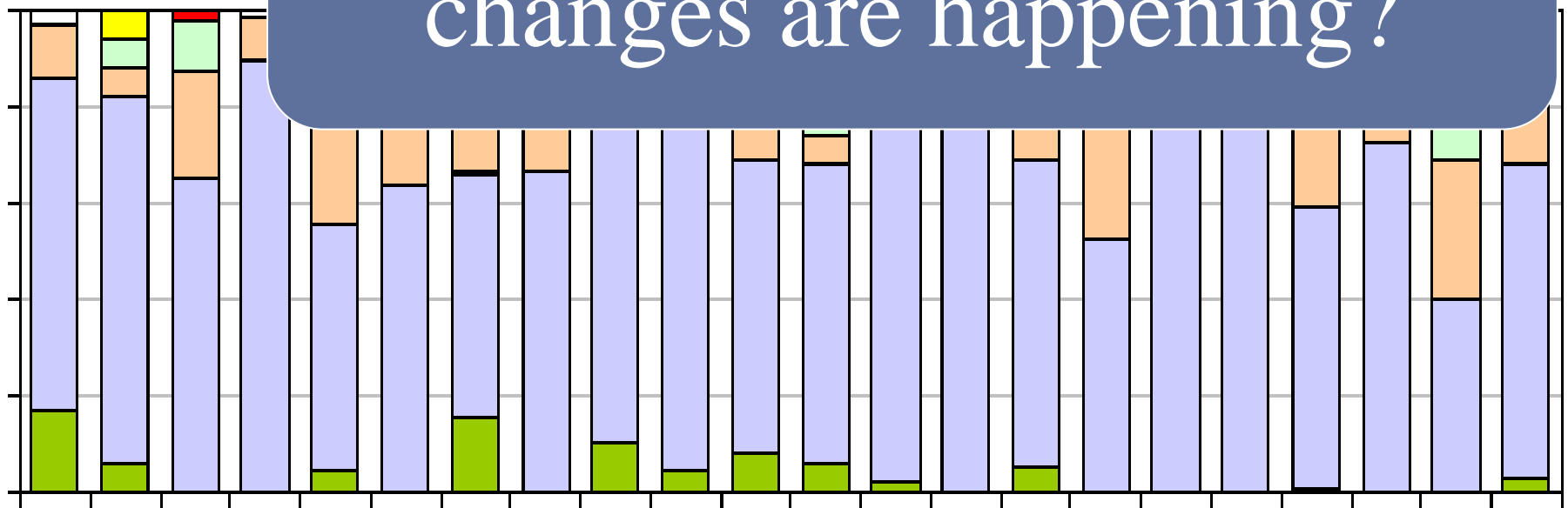
## Clinical staff often say things like;

- The data doesn't fairly report what we do.
- Can we add a reason for non compliance.
- Other sites must be recording this differently

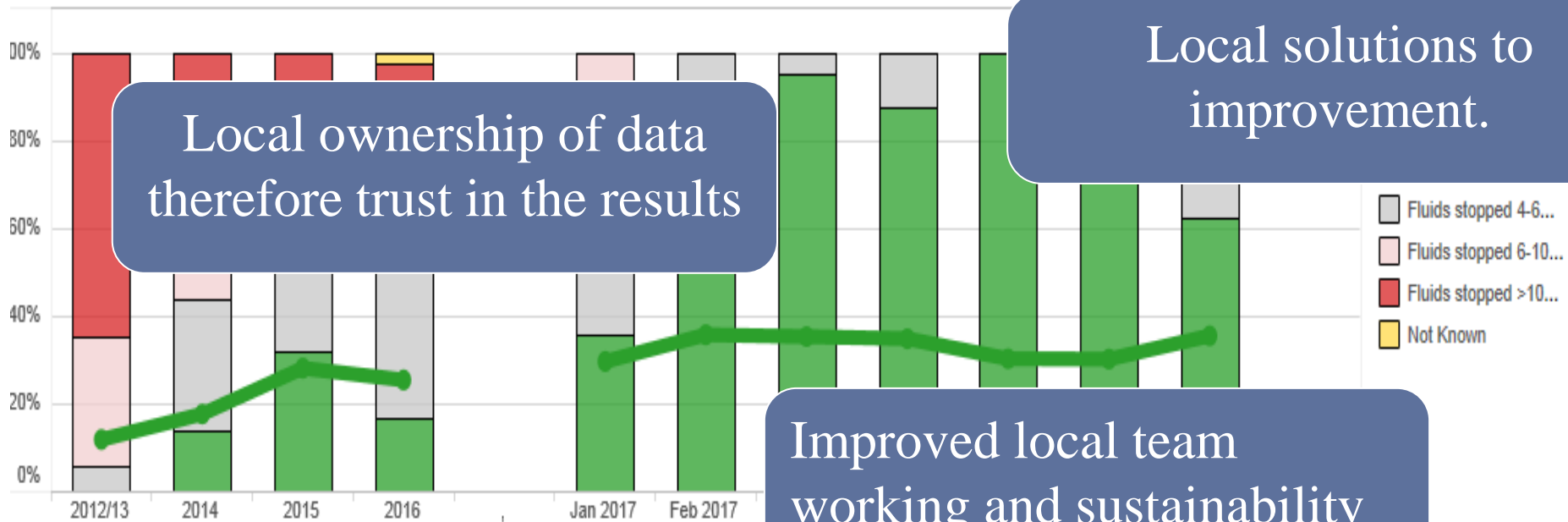



But if you add in all the exceptions you get this....

Is it easy to see where changes are happening?



No because continuous improvement happens locally.....

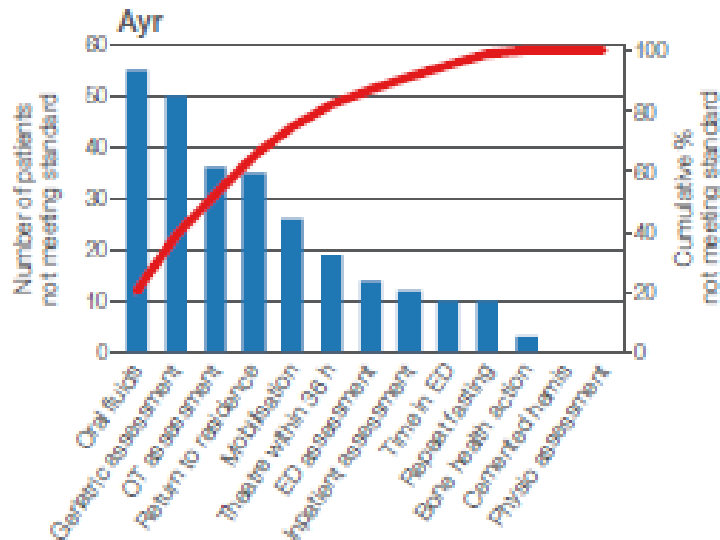




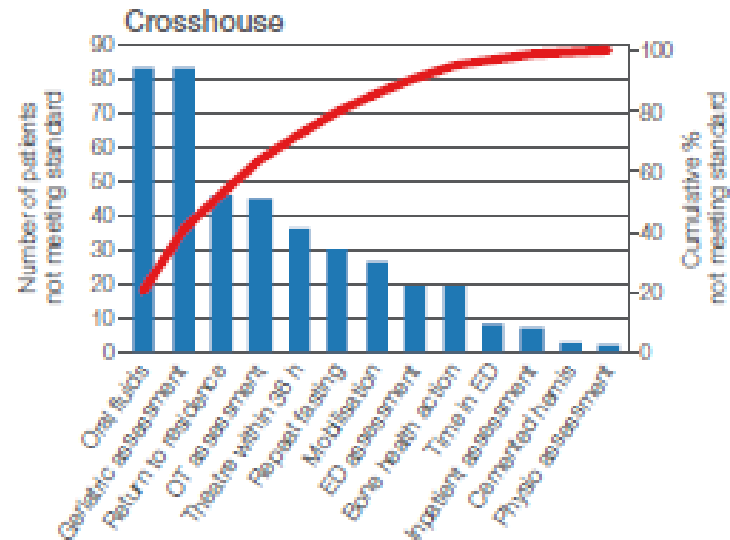
# So where do exception reports fit in?

- Monthly list
- Review prior to monthly meeting
- Prepare any background info
- MDT review and plan to improve
- Repeat each month

# Pareto chart as a tool



*Ayr Hospital: Oral fluids stopped in excess of four hours prior to surgery, access to Geriatric assessment.*



*Crosshouse Hospital: Oral fluids stopped in excess of four hours prior to surgery, access to Geriatric assessment.*





# Why is the ED bundle important?

- **Provision of pain relief** - FIB recommended
- **Screening for delirium** – using 4AT
- **EWS** – identifying deterioration
- **Bloods** – baseline status
- **IV fluids** – frequent fluid depletion
- **Pressure area risk assessment** – high risk group and development can affect outcome

# Why is the in-patient assessment bundle important? ( within 24hrs)

- **Baseline cognitive function-** high risk group
- **Falls risk-** high risk for further fall
- **Nutritional status** – prevention and management of malnutrition and dehydration
- **Pressure area care** – high risk group, development can negatively impact on outcome

# Does extended fluid fasting make a difference?

- Comfort and patient experience
- Can exacerbate existing dehydration
- Extended periods indicate lack of realistic theatre scheduling

# Why does this matter?

*‘The principle focus is the safe return of patients to their original place of residence within 30 days of sustaining a hip fracture. Returning to the patient’s original place of residence quickly is reported as one of the most important outcomes to both patients and relatives.’*

Website - [www.shfa.nhs.scot.uk](http://www.shfa.nhs.scot.uk)

Twitter - #scothipaudit @kirstymward

Monthly reports -

[nss.specialtyinformationportal@nhs.net](mailto:nss.specialtyinformationportal@nhs.net)