

The FFN Hip Fracture Audit Special Interest Group: Context, aim, background, Pilot Phase, future plans and launch

Summary

- The aim of **the FFN Hip Fracture Audit Special Interest Group** is to promote an international clinically led, web-based hip fracture audit – **the FFN Hip Fracture Audit Database (HFAD)** – as a means of improving the quality and cost-effectiveness of the care of hip fracture, the tracer condition for the current global fragility fracture epidemic.
- Since 2013 an Interim Steering Committee has led on planning this work, developing an FFN Minimum Common Dataset (MCD) then, with an Implementation Group, setting up the Pilot Phase of the HFAD
- A preliminary report on the work of the Pilot Phase will be presented to the opening plenary session on Thursday fourth September at the FFN's 3rd Global Congress in Madrid shortly.
- The Pilot Phase will continue to the end of 2014, with a further report to follow.
- Meanwhile, plans are under development, with funding being sought, for a major expansion of the project from January 2015 to support Special Interest Group (SIG) members in participation in the FFN Hip Fracture Audit Database
- **The Special Interest Group will be formally launched at a meeting – at 12.00 on Friday 5th September – immediately after the 10.30 hip fracture audit workshop. If you are in Madrid for the Congress please come to this meeting, where participation and forward plans will be discussed.**
- Further information, including details of the preliminary report, will be distributed shortly to those who have expressed interest but are not attending Congress

Context

Hip fracture is the tracer condition for the current global epidemic of fragility fractures. It is well-defined; its care is costly; and, although the evidence-base for good care is now strong, standards of care have been shown to vary widely.

However, there is increasing evidence that audit participation – including regular feedback to monitor compliance with quality standards – can significantly improve care and outcomes. Where possible, collaborative care provided by surgeons and ortho-geriatricians is often a major factor in such improvements.

Aim

In that context, the primary aim of the SIG is the spread of good practice in audit through the use of a core Minimum Common Dataset and regular feedback to promote better care – in both quality and cost-effectiveness terms – as widely as possible via the Fragility Fracture Network HFAD initiative.

Background and Pilot Phase

An International Steering Committee with a multi-national membership of clinicians and others with expertise and experience in hip fracture care and audit carried out a consensus exercise resulting in a one-page FFN Minimum Common Dataset.

This covers case-mix, care and outcomes, and was drawn from far more detailed and extensive datasets already in use, and largely derived from the original Swedish Rikshoft audit. Brief appendices cover follow-up and surgical complications and their management. The MCD has been recognised as user-friendly, and cost-effective – taking less staff time to complete than previous datasets.

Working with Crown Informatics – the IT provider for the UK National Hip Fracture Database – the Interim Steering Group and the Implementation Group developed and launched the Pilot Phase. Five trauma units – in Germany, Malta, Slovenia and Spain – now participate, with data collection continuing through 2014.

This work – so far essentially a proof-of-concept of web-based international hip fracture audit – has demonstrated the essential feasibility of such audit. It has also addressed various practical issues in audit start-up, such as those arising from information governance compliance across several jurisdictions. The preliminary report to the Congress will cover these issues

Continuing data collection and support for the pilot sites will allow the participating teams to use the audit, with its regular feedback of credible, locally owned data for its main purpose: the improvement of care through audit-prompted clinical or service change through the use of data to promote constructive discussion among clinicians and managers interested in better care and outcomes for their patients.

In addition, the Pilot Phase will report on an MCD-based comparison of large samples of hip fracture audit data from established audits – again a proof-of-concept exercise – raising the possibility of further and wider international comparisons.

Future plans

A report to the Executive Committee of the FFN in July met with an encouraging response. There is now a business case under development to seek substantial funding for an expansion of the core functions of the audit to support steady expansion through 2015.

Ideally, with appropriate funding, the FFN HFAD will improve the support provided: through such measures as: translation of datasets, documentation and reports – so far provided only in English – into other major languages; a user-friendly web resource focusing on hip fracture care and prevention; and the provision of regional, multi-hospital bench-marked reports likely to promote greater high-level awareness of hip fracture care – and fragility fracture care generally – and thus favourably influence policy at local and perhaps national level

Launching the Special Interest Group

We believe that the time spent in development, as described above, was time well spent.

Senior expertise drawn from existing and emerging major audits, together with a major expert contribution from Crown Informatics, has resulted, we hope, in a user-friendly and cost-effective approach to the spread of hip fracture audit at local, national and international level.

Though inevitably delayed by such preparatory work, the launch of the SIG is, we believe, a major step forward. Members will have access to a powerful means of monitoring and improving the care they provide, and doing so in a way that maintains comparability locally and more widely.

In addition – through the provision of the local addition of dataset items of special interest – such as rehabilitation, anaesthetic practice, thromboprophylaxis, and pain control – the audit will encourage active clinical involvement with benefit to patients and their carers.

The aim now is to expand the audit quite quickly from early 2015 onwards. Meantime, SIG members will be able to consult with colleagues and use web-based resource material to explore the details of effective participation, and examples of the successful use of audit to improve care. Detailed proposals for participation – outlined in a pro-forma to be issued within weeks – will be received sympathetically and supportively.

Colin Currie

Chair, FFN Hip Fracture Audit Special Interest Group

(On behalf of the Interim Steering Committee and the Hip Fracture Audit Database Implementation Group)

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