# Hip fracture care clinical care standard indicators: 1a-Evidence of local arrangements for the management



© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY4.0 (CC BY4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

# Hip fracture care clinical care standard indicators: 1a-Evidence of local arrangements for the management of patients with hip fracture in the emergency department

## Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

**Short name:** Indicator 1a-Evidence of local arrangements for the management of patients with

hip fracture in the emergency department

METEOR identifier: 628064

**Registration status:** Health!, Standard 12/09/2016

**Description:** Evidence of local arrangements for the management of patients with <a href="https://hipfracture">hip fracture</a>

in the emergency department.

Rationale: Patients who sustain hip fractures are, and will continue to be, an important patient

group in the Australian healthcare system. In most instances, the first hospital contact these patients will have will be when they present to an emergency

department (Considine & Hood 2000).

Patients presenting to the emergency department with a hip fracture should be rapidly assessed and assigned to a fast track admission pathway (SIGN 2009; Hilli et al. 2014). The rate of post-operative complications, including confusion, healthcare associated infection, length of hospital stay and 12 month mortality, is lower in hip fracture patients managed by a comprehensive multidisciplinary fast-

track treatment and care programme (SIGN 2009).

Indicator set: Clinical care standard indicators: hip fracture

Australian Commission on Safety and Quality in Health Care, Superseded

18/06/2018

Health!, Standard 12/09/2016

Outcome area: <u>Care at presentation</u>

Health!, Standard 12/09/2016

# Collection and usage attributes

**Computation description:** Documented local arrangements for the management of patients with hip fracture in

the emergency department that address timely assessment and management of

the patient's medical conditions, including but not limited to:

• diagnostic imaging

• pain control

cognitive assessment.

The documentation may be in the form of local protocols and/or a clinical pathway.

Computation: Yes/No

### Representational attributes

Representation class: Count

Data type: Real

Unit of measure: Service event

Format: Yes/No

### Source and reference attributes

**Submitting organisation:** Australian Commission on Safety and Quality in Health Care

**Reference documents:** Considine J & Hood K 2000. Emergency department management of hip fractures: development of an evidence-based clinical guideline by literature review and

consensus. Emergency Medicine 12(4):329-36.

Hili S, Dawe EJC, Lindisfarne EAO & Stott PM 2014. Perioperative management of elderly patients suffering a hip fracture. British Journal of Hospital Medicine

75(2):78-82.

SIGN (Scottish Intercollegiate Guidelines Network) 2009. Management of hip fracture in older people: a national guideline. NHS Quality Improvement Scotland

NHS QIS).