



# IRISH HIP FRACTURE DATABASE SUMMARY REPORT 2016

The Irish Hip Fracture Database (IHFD) was set up to measure the care for all patients over the age of 60 who suffer a hip fracture, across the 16 operating hospitals.

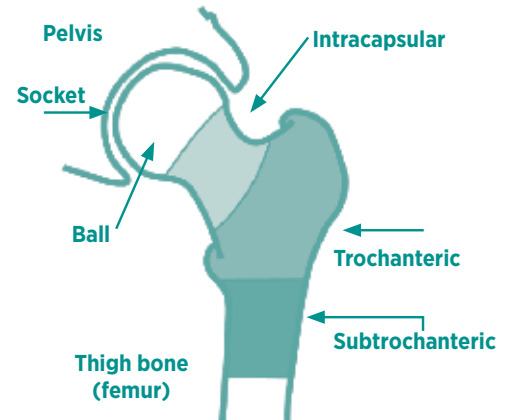
**3,629**  
HIP FRACTURES  
IN IRELAND 2016

**16**  
OPERATING  
HOSPITALS

## Here is what you need to know about the hip:

The hip joint is made up of a ball and socket joint. The ball (head of the femur) is located on top of the thigh bone and the socket sits within the pelvis. The hip joint is contained within a fibrous capsule and much of head of the femur receives its blood supply through blood vessels in the capsule.



## WHAT IS A HIP FRACTURE?

A hip fracture is any break in the upper portion of the thigh bone (femur) where the bone meets the pelvis.

## WHAT CAUSES A HIP FRACTURE?

One in three people over the age of 65 fall each year and half of them will fall again within six months<sup>1</sup>. As we age, our bones can become weaker (osteoporosis). This means that a simple fall from a standing height or less can result in the bone breaking easily. A number of factors influence this increased risk of fracture as we age. The leading cause of hip fractures are falls. A factor that influences risk of falls is slowing reflexes, meaning we cannot protect ourselves quickly enough to break the fall. This often means the hip takes the full force of the fall. A fracture may be the first sign of osteoporosis, it may also unmask other diseases leading to multiple falls or frailty<sup>2</sup>.

*The Irish Hip Fracture Database measures key clinical steps in the care of hip fracture patients. Some examples of these are:*

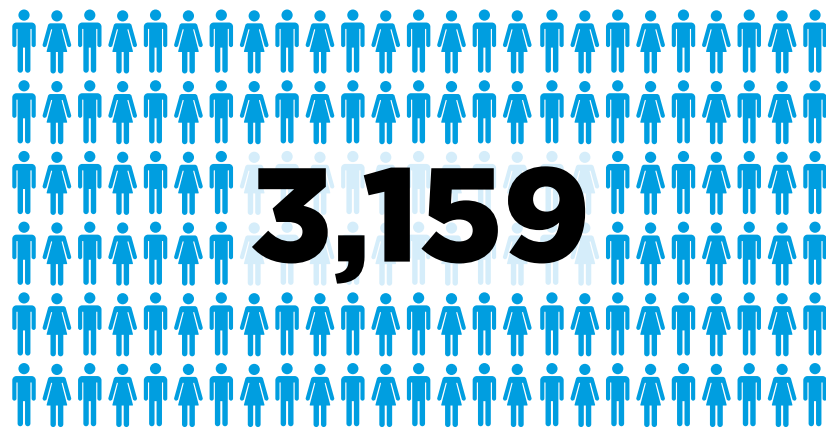
- If the patient is brought directly to a hospital that operates on hip fractures
- The time spent in the emergency department
- The time it takes for the patient to receive their operation
- If the patient is seen by an Orthogeriatrician
- If the patient has a falls risk assessment
- If the patient has a bone health assessment
- If the patient develops a pressure ulcer



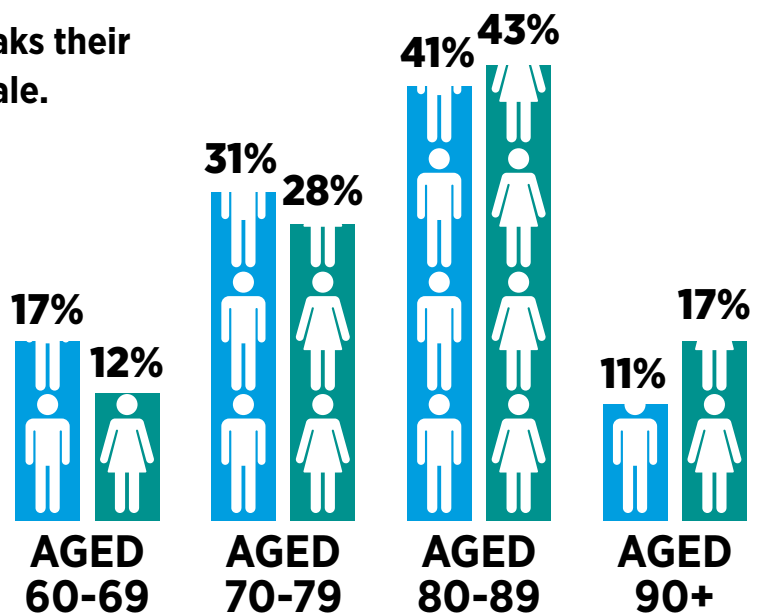
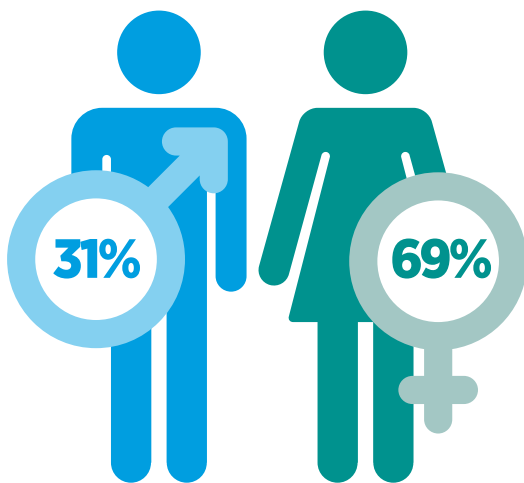
**ONE IN  
THREE  
OVER 65'S  
FALL ANNUALLY**

## The Irish Hip Fracture Database National Report 2016 shows that:

There was information entered onto the database for 3,159 patients which amounted to 86% coverage of all hip fracture patients in Ireland in 2016.



The average age of a person who breaks their hip is 80 and over two-thirds are female.

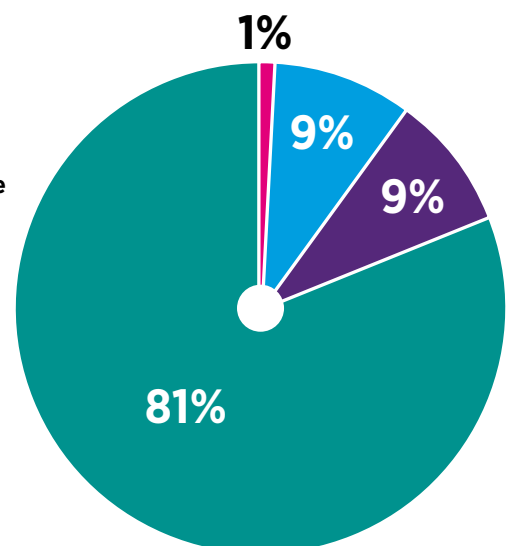


### HIP FRACTURES USUALLY OCCUR FOLLOWING A FALL AT HOME.

In 2016, 81% of hip fracture patients were brought to hospital from their home.



- Home
- Nursing home or other long stay facility
- Transfer from another hospital
- All Other Sources





14% OF PATIENTS WERE ADMITTED TO A WARD FROM THE EMERGENCY DEPARTMENT WITHIN 4 HOURS

14%



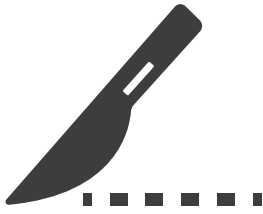
6% OF PATIENTS WENT STRAIGHT TO THEATRE FROM THE EMERGENCY DEPARTMENT

6%



PERCENTAGE SEEN AT ANY TIME DURING ADMISSION BY A GERIATRICIAN

56%



75% OF PATIENTS RECEIVED THEIR SURGERY WITHIN 48 HOURS

75%



77% OF PATIENTS WERE MOBILISED ON THE DAY OF OR DAY AFTER SURGERY  
93% OF THOSE WERE MOBILISED BY A PHYSIOTHERAPIST

77%



54% OF PATIENTS RECEIVED A SPECIALIST FALLS ASSESSMENT

54%



Pressure Ulcers to Zero

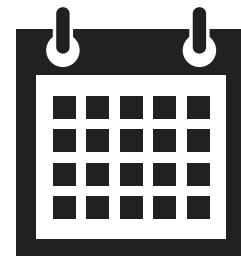
5% OF PATIENTS DEVELOPED A PRESSURE ULCER GRADE 2 OR HIGHER FOLLOWING ADMISSION TO HOSPITAL

5%



57% OF PATIENTS RECEIVED A BONE HEALTH ASSESSMENT

57%



THE MEDIAN LENGTH OF STAY IN HOSPITAL FOR HIP FRACTURE PATIENTS WAS 12 DAYS

12

# 2016 IHFD NATIONAL REPORT

## KEY RECOMMENDATIONS



Every hospital participating in the IHFD should have a hip fracture committee to ensure that the data from the IHFD is being used to drive continuous quality improvement in hip fracture care. IHFD audit reports should also be made available to the Hospital and Hospital Group Quality and Safety Committee.



Each hospital participating in the IHFD should provide a multidisciplinary orthogeriatric service.



Each hospital providing hip fracture surgery should be resourced to provide a seven day a week service to trauma patients- including prompt access to theatre, medical support and early mobilisation by a physiotherapist.



NOCA will provide guidance and support to all of the local hip fracture committees.



NOCA will continue to work with hospitals directly to put processes in place to support the current dataset and new data points to assure data quality and thereby supporting the provision of high quality reporting.

### REFERENCES

1. Health Service Executive, National Council on Ageing and Older People, and Department of Health and Children (2008). Strategy to Prevent Falls and Fractures in Ireland's Ageing Population.[Online]. Available from: <http://www.lenus.ie/hse/bitstream/10147/46105/4/HSEStrategyFalls.pdf> [Accessed 18/07/2017].
2. Bandeen-Roche, K., Xue, Q., Ferrucci, L., Walston, J., Guralnik, J., Chaves, P., Zeger, S. and Fried, L. (2006). Phenotype of Frailty: Characterization in the Women's Health and Aging Studies. The Journals of Gerontology Series A: Biological Sciences and Medical Sciences, 61(3), pp.262-266.

**NOCA** National Office of  
Clinical Audit

2ND FLOOR, BLOCK B, ARDILAUN, 111 ST STEPHENS GREEN, DUBLIN 2.

**Tel: +353 1 402 8577**

IF YOU WISH TO READ THE FULL REPORT LOG ONTO OUR WEBSITE

**[www.noca.ie](http://www.noca.ie)**

IF YOU HAVE ANY QUERIES OR COMMENTS PLEASE FEEL FREE TO EMAIL

**[ihfd@nocai.ie](mailto:ihfd@nocai.ie)**

FOLLOW US ON TWITTER

**[@nocai\\_irl](https://twitter.com/noca_irl)**