



# ANZ Hip Fracture Registry

Enhancing Outcomes  
for Older People

Issue 24, September 2018

## The News in Brief

This third ANZHFR newsletter for 2018 provides an update on the considerable progress being made on both sides of the Tasman. Patient numbers continue to increase, and it is exciting to be able to advise that the combined registries have a total of 25,792 records from 70 hospitals: 20,078 from

Australia and 5,714 from New Zealand. This edition of the newsletter includes an update on participation and the flagging of changes to the Data Dictionary for 2019. We also ask you to "Save the Date" for the first ANZHFR Hip Festivals and feature St Vincent's Hospital Darlinghurst "In the Limelight".

## Update on Implementation in New Zealand and Australia

Seventy hospitals are approved to contribute data to the ANZHFR. Again this quarter, progress on implementation of the ANZHFR is presented using a "traffic light" or RAG (red amber green) system. Red is for eligible hospitals not yet approved, amber is for approved but not regularly contributing data, and green is for hospitals that regularly contribute data.

If your hospital would like to know how to get started collecting patient level data, please contact the ANZHFR at [clinical@anzhfr.org](mailto:clinical@anzhfr.org)

The New Zealand Hip Fracture Registry has 5,714 records at the end of September 2018. 21 of 22 hospitals have ethics and locality approval to contribute data and 19 of these are regularly contributing to the Registry. The Australian Hip Fracture Registry has 20,078 records at the end of September 2018. 59 of 95 hospitals have completed ethics and governance approvals to contribute data and 47 of these are regularly contributing.

### Hospitals with ethics and governance approval regularly contributing patient level data to the ANZHFR

- WA: Albany Hospital, Fiona Stanley Hospital, Joondalup Hospital, Royal Perth Hospital, Sir Charles Gairdner Hospital
- SA: Flinders Medical Centre, Lyell McEwin Hospital, Mount Gambier Hospital
- TAS: Launceston General Hospital
- VIC: Box Hill Hospital, Dandenong Hospital, Footscray Hospital, Frankston Hospital, Geelong Hospital, The Austin Hospital, The Northern Hospital
- NSW: Armidale Hospital, Bankstown-Lidcombe Hospital, Blacktown Hospital, Coffs Harbour Hospital, Concord Hospital, Gosford Hospital, John Hunter Hospital, Liverpool Hospital, Nepean Hospital, Orange Health Service, Prince of Wales Hospital, Royal North Shore Hospital, Royal Prince Alfred Hospital, St George Hospital, St Vincent's Hospital Darlinghurst, Sutherland Hospital, Tamworth Hospital, Westmead Hospital, Wollongong Hospital
- QLD: Cairns Hospital, Gold Coast University Hospital, Ipswich Hospital, Logan Hospital, Mater Hospital South Brisbane, Nambour Hospital, Princess Alexandra Hospital, QEII Jubilee Hospital, Redcliffe Hospital, Robina Hospital, Rockhampton Hospital, Sunshine Coast University Hospital, The Prince Charles Hospital, Toowoomba Hospital, Townsville Hospital
- NZ: Auckland City Hospital, Christchurch Hospital, Dunedin Hospital, Gisborne Hospital, Hawkes Bay Hospital, Hutt Valley Hospital, Middlemore Hospital, Nelson Hospital, North Shore Hospital, Palmerston North Hospital, Rotorua Hospital, Southland Hospital, Tauranga Hospital, Waikato Hospital, Wairau Hospital, Wellington Hospital, Whakatane Hospital, Whanganui Hospital, Whangarei Hospital

### Hospitals with ethics and governance approval to contribute patient-level data but data not contributed

- SA: The Queen Elizabeth Hospital, The Royal Adelaide Hospital
- VIC: Maroondah Hospital, St Vincent's Hospital Melbourne
- NSW: Bowral Hospital, Campbelltown Hospital, Port Macquarie Hospital, Shoalhaven Hospital
- QLD: Hervey Bay Hospital,
- NZ: Timaru Hospital, Wairarapa Hospital

### Hospitals identified as eligible to contribute patient-level data to the ANZHFR but not approved to contribute data

- WA: Geraldton Hospital, South West Health Campus Bunbury
- TAS: North West Regional Hospital, Royal Hobart Hospital
- NT and ACT: Alice Springs Hospital, Royal Darwin Hospital, Canberra Hospital
- VIC: Albury Wodonga Health, Ballarat Health Services, Goulburn Valley Health (Shepparton), Latrobe Regional Hospital, Mildura Base Hospital, Northeast Health Wangaratta, Royal Melbourne Hospital (Parkville), Sandringham Hospital, Southwest Healthcare (Warrnambool), The Alfred, The Bendigo Hospital, West Gippsland Healthcare Group, Western District Health Service (Hamilton), Wimmera Health Care Group (Horsham)
- NSW: Bathurst Hospital, Bega/South East Regional Hospital, Canterbury Hospital, Dubbo Hospital, Goulburn Hospital, Grafton Hospital, Hornsby Ku-ring-gai Hospital, Lismore Base Hospital, Maitland Hospital, Manning Hospital, Ryde Hospital, The Tweed Hospital, Wagga Wagga Hospital
- QLD: Bundaberg Hospital, Mackay Base Hospital
- NZ: Taranaki Hospital



## ANZHFR Hip Festivals

The objective of the Australian and New Zealand Hip Fracture Registry (ANZHFR) is to use data to improve hip fracture care. To support clinicians, administrators and hospital executives to use their data and deliver best-practice hip fracture care, the ANZHFR is commencing a series of state-based festivals to provide opportunities to share ideas on improving hip fracture care.

The inaugural series of state-based Hip Festivals will offer a forum to learn from each other, highlight examples of best practice, and identify and share issues and solutions that are common across hospitals to help drive improvement in hip fracture care. **For more information about any of the Hip Festivals, please contact ANZHFR Project Officer Karen Lee via email: [k.lee@neura.edu.au](mailto:k.lee@neura.edu.au)**

### Why should you attend?

- Learn from existing practice to improve care for your hip fracture patients
- Provide an opportunity to network with others to share ideas on improving hip fracture care
- Reflect on your current practice and identify ways to improve the care provided
- Update you on developments in hip fracture care
- Generate strategies for improving care at your hospital

### Who should attend?

Anyone involved in providing care to older people who have broken their hip – clinicians and support staff across the spectrum of care, health and hospital executives, staff of residential aged care facilities.

### When, where and cost?

The first two Festivals will be held in Perth and Sydney this year, with other regions to follow in the first half of 2019. There is no cost to register for the Festivals.

The Western Australia event will be held at the Fiona Stanley Hospital Education Centre on **Tuesday, 23rd October 2018**.

The NSW event will be held in partnership with the NSW Agency for Clinical Innovation (ACI) at the SMC Conference & Function Centre in Sydney on **Tuesday, 4th December 2018**. The ACI will be holding an additional workshop the following day, by invitation only, focusing on specific aspects of hip fracture care. This will form the foundation for the NSW Hip Fracture Care Clinical Initiative as part of the [Leading Better Value Care](#) program. Further information and a save the date will be circulated to NSW Local Health Districts shortly. For any queries about this workshop please contact Helen Vaz, ACI Project Officer via email: [helen.vaz@health.nsw.gov.au](mailto:helen.vaz@health.nsw.gov.au)

# SAVE THE DATE

Western Australia  
23rd October 2018  
Fiona Stanley Hospital Education Centre

New South Wales  
4th December 2018  
SMC Conference & Function Centre, Sydney

## ANZHFR Data Dictionary - Upcoming Changes

The Data Dictionary has again been reviewed and there are some changes to the patient-level data variables from 1st January 2019. The new Data Dictionary v11 will apply to patients admitted from 1st January 2019. For the remainder of 2018, please record patient-level data using the variables in the current Data Dictionary v10.2.

### Summary of Changes in v11

1. Additions to the Comments section in four variables to improve consistency of data recording between sites
2. Change to the coding frame of one variable based on feedback from users
3. Retirement of all eight variables at 30 day follow-up
4. Addition of one variable to the patient level audit for screening of malnutrition

Updated versions of the Data Dictionary and the Patient Level Form will be sent to local users in December 2018 and both documents will be available from the ANZHFR website. The changes to the web-based Registry will "go live" on 1 January 2019.





## In The Limelight: St Vincent's Hospital Darlinghurst

The participation of St Vincent's Hospital Darlinghurst in the Australian and New Zealand Hip Fracture Registry (ANZHR) has been a significant undertaking, but one that is proving to be a worthwhile investment of time and resources. Hip fracture represents a 'watershed event' in the course of a person's health, so having the Registry inform and encourage reflection on clinical practice is of major importance. St Vincent's journey thus far with the Registry has been one of growth, learning and increased interdisciplinary collaboration.

As the size of the database has grown, it has become a job for more than one person. As such, our senior orthopaedic nurses have become involved. They speak to our patients about the Registry, and collect and add data. This process is evolving as a fantastic learning opportunity for our team, where our nurses are learning in-depth information about a patient's journey through the experience of the person who has fractured their hip. I have greatly enjoyed engaging and educating our nurses about the national Hip Fracture Care Clinical Care Standard, not only from the nursing perspective but also from the surgical, allied health, and rehabilitation perspectives, and the experience of a patient transitioning back to home.

St Vincent's Hospital delivers a 'shared care' model of care for our patients with a hip fracture. This model of care involves provision of an ortho-geriatric service headed by Professor Sandy Beveridge. This provides a team approach to care between the surgical orthopaedic team and the medical geriatric team. The addition of the ANZHR has complimented this shared model of care, and it provides a wonderful reference point for reflection on the current delivery of hip fracture care, as well as inspiration for future planning and quality improvement projects. So far, the Registry has informed the design of an ortho-geriatric case conference form, which is currently being trialled. The form prompts review of key

goals of care for the patient including the use of nerve blocks, cognitive screening, bone health screening and post discharge planning and interventions.

Looking forward, we hope to improve dissemination of Registry data to "bring to life" information for the purpose of feedback and quality improvement. We aim to initiate a 3-monthly reporting meeting by inviting the various medical and surgical teams and departments to allow all to see their hard work in 'black and white' and review areas for improvement.

Further, the follow-up phone call has been extremely well received by patients and their families. The longer-term 120-day follow-ups provide a unique opportunity to gauge a person's recovery and their progress through rehabilitation, and to screen for appropriate and effective use of analgesia. It is a wonderful opportunity to stay connected with those who may be vulnerable and benefit from further engagement with health services. Our anaesthetics team see the potential of the Registry follow-up to improve identification and education of patients who may be using opioids inappropriately, as this is a significant problem in our community.

The potential of the Registry to stimulate and encourage research projects, improve practice and provide recognition for local achievement, is a wonderfully positive addition to St Vincent's mission to provide excellence in health care for our community. The Registry is one-step towards closing the care gap for patients who suffer this often life changing injury.

**Katherine Paulette RN**  
Orthopaedic Care Coordinator  
St Vincent's Hospital Darlinghurst

