

Hip fracture rehabilitation in physiotherapy practice:

From hospital to home

Setting the standards for high quality rehabilitation after hip fracture to help transform lives and maximise independence

Hip fracture is a serious life-changing injury that affects older people (60 years old +). It is an emergency event the commonest reason that older people need emergency anaesthesia and surgery. More people are living longer following a hip fracture. This means that there is a growing focus on the quality of rehabilitation provided during recovery.

In 2017, the CSP commissioned the Royal College of Physicians to undertake a 'sprint' audit of hip fracture rehabilitation provision⁽¹⁾. The sprint audit involved over 130 Acute Trusts, with over 7000 patients with a hip fracture captured by the audit. Patients were followed from their acute stay, through next steps care and into community settings. This gave us the first national snapshot of hip-fracture rehabilitation provision in England and Wales.

The Hip Sprint audit, published in February 2018¹, found wide variations in the extent, quality and duration of hip-fracture rehabilitation. This has prompted the CSP to create new standards for hip fracture rehabilitation from the recommendations of the Hip Sprint audit. They link to existing quality standards and guidelines that are relevant to the rehabilitation of patients with hip fracture. These standards will enable physiotherapy teams to deliver high quality evidence based rehabilitation to their patients, and decrease the national variation currently occurring in hip fracture rehabilitation.

The hip-fracture standards at a glance:

- 1** A physiotherapist assesses all patients on the day of, or day following, hip fracture surgery
- 2** All patients are mobilised on the day of, or day following, hip fracture surgery.
- 3** All patients receive daily physiotherapy that should total at least two hours in the first 7 days post-surgery.
- 4** All patients receive at least two hours of rehabilitation in subsequent weeks post-surgery until they have achieved their goals.
- 5** All patients moving from hospital to the next phase of rehabilitation are seen by their new rehabilitation provider within 72 hours.
- 6** A physiotherapist is part of every Hip Fracture Programme's monthly clinical governance meeting.
- 7** Physiotherapists share their assessment findings and rehabilitation plans with all rehabilitation providers to enable clear communication with the MDT.

These new standards look at hip fracture rehabilitation through a physiotherapy lens