



Hip fracture: composite care processes

NICE indicator

Published: 1 August 2014

Last updated: 7 January 2023

www.nice.org.uk/indicators/ind16

Indicator

The proportion of people in the National Hip Fracture Database who have received all 8 care processes.

Indicator type

Network / system level indicator.

The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our [menu of indicators](#).

To find out how to use indicators and how we develop them, see our [NICE indicator process guide](#).

Rationale

Early surgery and coordination of care through a multidisciplinary hip fracture programme helps people recover faster and regain mobility after a hip fracture. To ensure high quality of care, it is important that all of the care processes and agreed best practice standards that make up the care pathway are delivered. This indicator measures key care processes in the hip fracture programme and aims to reduce variability of care and optimise outcomes in patients with hip fracture.

Source guidance

- [Hip fracture: management. NICE guideline CG124](#) (2011, updated 2023), recommendations 1.2.1, 1.7.1, 1.8.1 and 1.8.3
- [Nutrition support for adults: oral nutrition support, enteral tube feeding and parenteral nutrition. NICE guideline CG32](#) (2006, updated 2017), recommendations 1.2.1, 1.2.2 and 1.2.6

Specification

Numerator: The number of patients in the denominator who receive all 8 of the care processes below:

- Time to surgery is between 0 and 36 hours.
- Time to geriatrician assessment is between 0 and 72 hours, and geriatrician grade is equal to 'consultant', non-consultant career grade (NCCG) or a specialist trainee ST3 or above.
- Bone therapy medication response indicates if patient received any form of

assessment or action.

- Falls assessment response indicates if patients received any form of assessment or action.
- Valid preoperative Abbreviated Mental Test (AMT) score.
- Nutritional assessment during the admission.
- Valid postoperative delirium assessment.
- Physiotherapist assessment the day of or day following surgery.

Denominator: The number of patients on the National Hip Fracture Database who have been discharged from hospital.

Calculation: Numerator divided by the denominator, multiplied by 100.

Exclusions: Patients under 60 years old.

Data source: National Hip Fracture Database.

Minimum population: The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

ISBN: 978-1-4731-5878-8