

REducing unwarranted variation in the Delivery of high qUality hip fraCture services in England and Wales

4th Core Investigators' Meeting held on Wednesday 7th October 2020

Next Core Investigators' Meeting will be on Tuesday 12th January 2021

Update on progress so far:

WP1 – Quantitative analysis

Timeline: Awaiting linked datasets from PEDW and NHS-Digital (expected November 2020).

Organisational datasets are all now aligned and ready to be fitted into analysis models.

Organisational variables have been assigned to hip fracture care pathway domains.

Permissions and approvals: NHS Digital application (HES/Mortality data) now approved.

WP2 – Qualitative analysis

Timeline and permissions: In line with plans. All approvals granted. Data collection has begun at first hospital. Pilot interviews started.

Analysis of BOA reports: Analysis underway. 4 key themes identified – communication and cooperation; enthusiasm and support; availability of resources, knowledge, and training; and strategies to implement service improvement.

Plan to use findings from qualitative work to inform domains for quantitative work.

REDUCE Study Team



There was a meeting of the REDUCE Advisory Group on 30th September. Thanks to those who participated. The slide set is available for anyone who was unable to attend. The next meeting will be March/April 2021.

PPI

The latest session was held in August, with 4 members, 3 with osteoporosis (1 with caring experience for parent with hip fracture), 1 with history of hip fracture.

Aim to rank patient outcomes: Members found this challenging as all of the outcomes are linked. Covid-related concerns included wanting to reduce the time spent in hospital (while still receiving adequate care), and not knowing if they would receive the same level of care as they would have had before the pandemic. This prompted the suggestion that NHFD should issue a press release to make it clear to patients that their care is not being compromised by Covid-19. The group highlighted that pain levels and pain management was not included in the outcomes. There was also a suggestion to add patient empowerment regarding complaints and articulating concerns into future PPI work.

Additionally: The group provided feedback on a plain English summary for a grant application led by Celia, looking at the impact of COVID-19 on hip fracture services.

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