Orthogeriatric: Acute Hip Fracture Management Model of Care

This Consumer Guide has been developed to align with the Orthogeriatric: Acute Hip Fracture Management Model of Care. This Consumer Guide will provide you and/or your carer with information regarding the level of care that you can expect to receive under the model of care.

A patient with a hip fracture will be directed to a specialist Orthogeriatric Fracture Centre

To support optimal patient outcome, SA Ambulance Service will transport a patient with a suspected hip fracture (who is within a 60 minute travel distance by road) directly to the closest Orthogeriatric Fracture Centre. Patients outside of this time range will be transported to their closest local public hospital for medical stabilisation prior to being transferred to an Orthogeriatric Fracture Centre.

The patient will receive timely and effective pain relief

A patient with a hip fracture will receive timely and effective pain relief to ensure their pain is managed and they are comfortable throughout their entire journey.

The patient will be treated under an orthogeriatric shared model of care

Orthopaedic surgeons and orthogeriatricians will provide complete patient care at the highest possible level, from the time of admission through to the time of discharge.

The patient will receive appropriate surgical management in a timely manner

Patients who are medically stable and who require surgery will be scheduled for surgery on the same day or the next day after their initial hospital presentation. Patients, who require further medical attention, prior to surgery, will be given the highest level of care. Once the patient is ready for surgery it will be scheduled as soon as possible.

The patient will be supported with early rehabilitation (movement)

Commencement of rehabilitation provides the best capacity for the patient to return to their pre-fracture mobility and function. The patient will be encouraged and supported to commence rehabilitation the day after surgery, unless advised differently by your clinical team.
The patient will have a personalised discharge plan completed with ongoing support

The patient will have multi-disciplinary team input to develop a supportive and personalised discharge plan to maximise patient potential, which will include contact information, ongoing pain management, a rehabilitation plan, and any other clinical requirements specific to the patient’s ongoing care.

The patient and/or carer receive regular consultation with all care providers

The patient and/or carer will receive regular consultation by all of the patient’s clinicians. This is to ensure both patient and/or carer are given the opportunity for all questions to be answered to assist in making important decisions and to discuss advance care directives regarding the patient’s care plan.

Aboriginal and Torres Strait Islander patients will receive culturally appropriate and respectful care

A patient who identifies as Aboriginal or Torres Strait Islander will have an Aboriginal Health Liaison Officer allocated to ensure the patient receives culturally respectful care throughout their entire patient journey.

SA Health will measure and deliver best clinical practice

Patient experience is recorded through voluntary participation in patient surveys as well as clinical audits; this data is collected and reviewed to ensure all hospitals are delivering the best model of care and to improve the safety and quality of our services.

For more information

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Public-I1-A1