National Hip Fracture Database lay info RE public data:

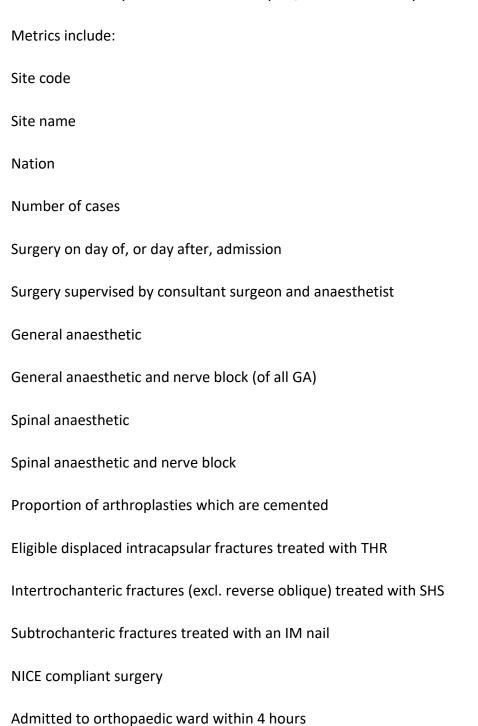
Hip fracture is the most common serious injury in older people. It is also the most common reason for older people to need emergency anaesthesia and surgery, and the commonest cause of death following an accident. The National Hip Fracture Database (NHFD) is a clinically led web-based audit of hip fracture care and secondary prevention in England, Wales and Northern Ireland. It collects data on all patients admitted to hospital with hip and femur fractures and improves their care through auditing which is fed back to hospitals through targeted reports. Launched in 2007, the NHFD improves quality of care for hip and femoral fracture, particularly collaborative care. Now patients are far more likely to have both medical and surgical needs addressed early and effectively. As a result, patients proceed promptly to surgery; and the early identification and treatment of medical problems allows earlier rehabilitation, which promotes independence and an earlier return home. The publication of the NHFD annual report is now moving into its seventeenth year of documenting casemix, care and outcomes of over 65,000 cases from all eligible acute hospitals each year. With over a million records, it is the most extensive hip fracture audit in the world.

The information collected in the NHFD is primarily based on National Institute for Health and Care Excellence (NICE) recommendations. The audit also collects data on Best Practice Tariff, applicable in England only, which contains multiple metrics and whether sites have performed to a set standard on these.

In most years, the audit also reviewed hospitals' policies, procedures and staffing. You will find information such as whether the organisation has regular MDT meetings which discuss NHFD data and whether the hospital has a dedicated hip fracture ward. The patient and organisational information collected is publicly available here. FFFAP and NHFD encourage the use of the publicly available data for research and also NHS service improvement work. If you have any questions, or want more information, please contact NHFD@rcp.ac.uk

Data available for the NHFD at data.gov

- Facilities audit data (the data available depends on the metrics collected which are usually different each year)
- List of participating hospitals for that year, their database codes, geographical regions, ICB codes and ICB names
- Data analysed for that calendar year, for the annual report.



Mental test score recorded on admission Perioperative medical assessment Physiotherapy assessment by the day after surgery Mobilised out of bed by the day after surgery Nutritional risk assessment Delirium assessment Not delirious when tested post-op. Received falls assessment Received bone health assessment Met best practice criteria Case ascertainment Acute length of stay (days) Overall hospital length of stay (days) Documented final discharge destination Discharge to original residence within 120 days Hip fractures which were sustained as an inpatient Documented not to have developed a pressure ulcer Documented not to have had a reoperation within 120 days 120 day follow up

Crude 30 day mortality rate

Case-mix adjusted 30 day mortality rate