



9th Core Investigators' Meeting was held on Wednesday 12th January 2022

Next Core Investigators' Meeting will be held on Wednesday 13th April 2022

Update on progress so far:

WP1 – Quantitative analysis

Publication plan:

- “Multiple hospital organisational factors are associated with adverse patient outcomes post hip fracture in England and Wales: the REDUCE record-linkage cohort study” was submitted in January
- Recovery of patient mobility and residence analysis and paper progressing well
- Outcomes at one year including mortality and health care costs analysis is also in progress using health economics data (see below)
- Further paper planned regarding osteoporosis treatment at discharge and refracture risk/reoperation over one year

Health Economics

First results on costs have been presented and discussed:

- Inpatient costs up to 3 months and 12 months before and after hip fracture were calculated for patients included in the Quantitative Analysis (WP1)

Patient hospital stays and readmissions during the period were valued using reference costs for Department of Health and Social Care reference costs. Next steps:

- Explore associations between health care costs and organisational domains, using the same approach as previously used for other outcomes
- Sensitivity analysis to the costing and statistical assumptions to test robustness of cost findings

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

WP2 – Qualitative analysis

Analyses complete – currently focusing on outputs.

Three papers to come out of qualitative work:

1. Barriers and facilitators to service delivery
2. A model of multidisciplinary teamwork in hip fracture care
 - Theoretically-informed sociological work
 - Five components of effective MDT teamwork identified, encompassing range of skills, processes and values
3. A mixed methods study of hip fracture care during COVID-19
 - Working with Mr Richard Holleyman, Newcastle, who is analysing NHFD facilities audit data
 - Informed by literature on organisational resilience

WP3 – Implementation Toolkit

Key messages and themes to improve hip fracture care have been identified in the quantitative and qualitative work packages to inform the design of the toolkit.

Tools will include:

- Clinical Governance & MDT effectiveness templates
- Quality Improvement and business case development tools
- Pathway checklists
- Job descriptions & competencies
- eLearning training (junior/rotation staff)

The toolkit will be produced and improved by iterative process with service users, and input from the PPI group.



Screenshot from January's Core Investigator Meeting!

Contact: Marianne Bradshaw, REDUCE Research Administrator, marianne.bradshaw@bristol.ac.uk

Website: <https://www.bristol.ac.uk/translational-health-sciences/research/musculoskeletal/rheumatology/research/hip-fractures>

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