

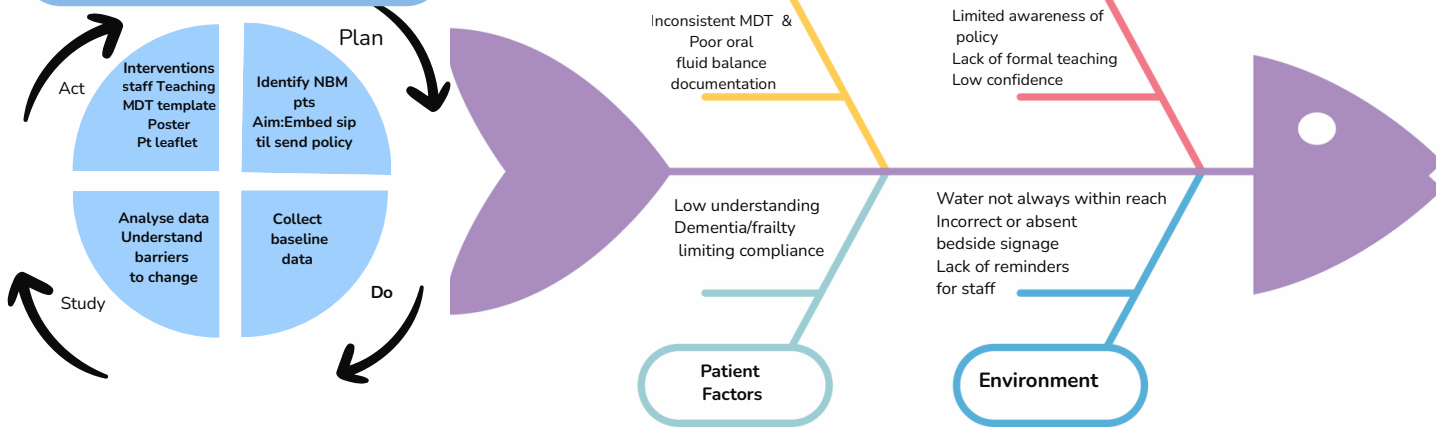
Enhancing Pre-Operative Hydration in Older Patients with Hip Fracture: A Quality Improvement Initiative

I Poomalai 1; S Hearne 1; N Morgan 1—Dept of Trauma and Orthopaedics, Leicester Hospitals NHS Trust.

Introduction

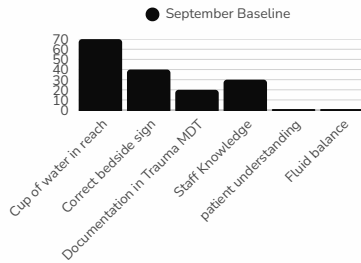
The aim of our project was to improve patient experience by fully embedding a “Sip til Send” policy in our emergency orthopaedic unit by supporting eligible patients to drink clear fluid/water (170mls per hour) till their operation. Older patients with hip fracture are often living with frailty and vulnerable to complications. Our concern was that patients with hip fracture were frequently being kept “Nil by Mouth” (NBM) for prolonged periods

METHODS PDSA cycles



DATA COLLECTION

- Demographics
- Cup of water in reach
- Correct bedside sign
- Trauma MDT Documentation
- Staff Knowledge of policy
- Patients Understanding
- Fluid balance



Drivers of change

- Patient Education
- Guidelines
- Discharge Posters
- MDT template
- Survey
- Staff Training



Information for patients

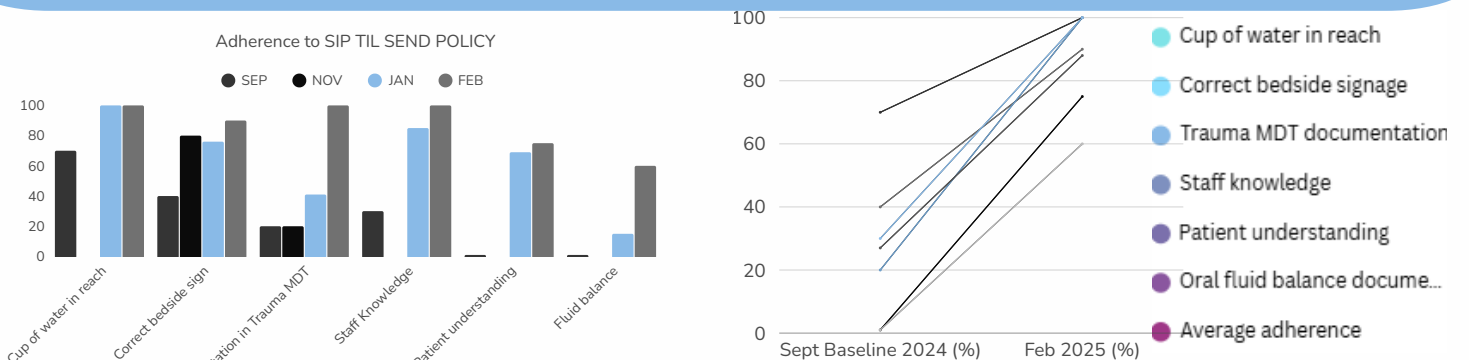
What do I need to know?

- You can have sips of plain water whilst waiting for your surgery
- You can have up to 170 ml approximately every hour (3/4 of a glass)
- You may also be given an energy drink 2 hours before your operation

What are the benefits to you?

- Avoids prolonged periods of fasting
- Keeps you hydrated before going to theatre for your surgery
- Staying hydrated may help you recover more quickly
- It can also reduce headaches, nausea and anxiety

RESULTS



CONCLUSION:

Adherence to the sip til send policy increased from 27% to 88%, accompanied by notable improvements in staff confidence, patient understanding, and documentation. We successfully embedded the “sip til send” approach advocated by the centre for peri operative care to patients awaiting emergency surgery changing the long-standing culture of keeping patients NBM for prolonged periods. Successful interventions included small group teaching sessions, use of clear signage, patient education and the adoption of a standardised template for recording trauma MDT outcomes.