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An Audit Monitoring AMTS and 4AT Documentation for Hip Fracture Patients as per the Best Practice Tariff Guidelines in a District General Hospital

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Background: A quarter of patients admitted with neck of femur (NOF) fractures suffer from post-operative delirium. The introduction of the Best Practice Tariff in 2010 by NHS England aimed to improve and standardise NOF care including the diagnosis and management of delirium. This uses the Abbreviated Mental Test Score (AMTS) pre-operatively and the 4AT post-operatively (introduced in 2017) to better manage delirium in NOF patients, to prevent complications and longer admissions. The aims of this audit are to assess the rates of timely documentation of these scoring systems for NOF patients, implement interventions to improve this and reassess documentation rates throughout the year. The audit standard was 100% documentation rates of both scores at the correct time.

Methods: Point prevalence data was collected in August 2019 of NOF patients admitted to the hip fracture unit. Clinicians involved in the management of NOFs were surveyed to identify how documentation of these scores could be improved. A teaching session was delivered in October 2019 and then the data was assessed again in November 2019, January and May 2020. Another teaching session was delivered in December 2019 after junior doctor rotation at their induction.

Results: Mean number of patients per cycle was 20. The first cycle demonstrated a 57% AMTS documentation rate and 89% 4AT documentation rate. The survey of 16 clinicians showed deficiencies about when and where to document both scores. The repeat cycles showed an improvement in AMTS documentation to 83%, 83% and then 80%; and 93%, 100% and 100% in 4AT documentation.

Conclusion: An improvement in documentation rates of both scores was shown, however only the 4AT met the audit standard. This may be due to rotation of junior doctors. Future work could include expansion of patient numbers, further repeat cycles and continual use of the teaching session at inductions.

Biography

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