In-Hospital Hip Fracture in Elderly (65+) Patients

Name: In-Hospital Hip Fracture in Elderly (65+) Patients
Short/Other Names: In-Hospital Hip Fracture (65+)

Description: This indicator measures the rate of in-hospital hip fractures among acute care inpatients age 65 and older. For further details, please see the General Methodology Notes.

Interpretation: Lower rates are desirable.

HSP Framework Dimension: Health System Outputs: Safe
Areas of Need: Getting Better

Geographic Coverage: All provinces/territories except Quebec
Reporting Level/Disaggregation: National, Province/Territory, Region, Facility, Peer Group
Indicator Results: https://www.cihi.ca/en/cihi-health-indicators

Identifying Information
Name: In-Hospital Hip Fracture in Elderly (65+) Patients
Short/Other Names: In-Hospital Hip Fracture (65+)

Indicator Description and Calculation

Description: This indicator measures the rate of in-hospital hip fractures among acute care inpatients age 65 and older. For further details, please see the General Methodology Notes. The indicator is expressed as a rate of in-hospital hip fractures per 1,000 inpatient cases.

Calculation: Description
Risk-adjusted rate = Observed cases ÷ Expected cases × Canadian average

Unit of analysis: Single admission

Calculation: Geographic Assignment
Place of service

Calculation: Type of Measurement
Rate - per 1,000

Calculation: Adjustment Applied
The following covariates are used in risk adjustment:
For a detailed list of covariates used in the model, please refer to the Model Specification document.

Calculation: Method of Adjustment
Poisson regression

Denominator
2. Age at admission 65 years and older

3. Sex recorded as male or female

Exclusions:
1. Records with admission category of cadaveric donor or stillbirth (Admission Category Code = R or S)

Description:
Cases within the denominator with a post-admission hip fracture
Inclusions:
1. One of the following ICD-10-CA codes, coded as type 2:
   • Fracture of neck of femur (S72.0)
   • Intertrochanteric fracture (S72.10)
   • Unspecified trochanteric fracture (S72.19)
   • Subtrochanteric fracture (S72.2)

Numerator

Exclusions:
1. Other specified misadventures during surgical and medical care (one of the above S codes and Y65.8 coded as type 9)

OR
2. Fracture of bone following insertion of orthopedic implant, joint prosthesis or bone plate (M96.6 coded as type 2 or T81.88 coded as type 2)

Background, Interpretation and Benchmarks
In-hospital hip fractures are largely preventable and represent a patient safety concern.

Rationale
In addition to the profound impact hip fractures can have on the independence and quality of life of elderly patients, such injuries occurring within hospital are also associated with longer lengths of stay and increased health care costs.

This indicator is intended to help hospitals monitor prevention efforts; high rates should be used to identify areas for improvement.

Interpretation
Lower rates are desirable.
HSP Framework Dimension
Areas of Need Targets/Benchmarks

Health System Outputs: Safe Getting Better

Not applicable


Availability of Data Sources and Results

Data Sources: DAD

Type of Year: Fiscal

First Available Year: 2012

Last Available Year: 2016

Geographic Coverage: All provinces/territories except Quebec

Reporting Level/Disaggregation: National, Province/Territory, Region, Facility, Peer Group

Result Updates: Every year

Web Tool: CIHI Health Indicators

URL: https://www.cihi.ca/en/cihi-health-indicators

Updates: Not applicable

Quality Statement: Caveats and Limitations: Rates for Quebec are not available due to differences in data collection.

Trending Issues: Not applicable

Comments: Not applicable