



Rural Collaborative Guideline Implementation Evaluation of a hub and spoke multidisciplinary team model of care for orthogeriatric inpatients: a before and after study of adherence to clinical practice guidelines



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Background: An innovative hub and spoke multidisciplinary team using inter-professional collaborative practice was implemented in June 2010 in a rural setting by establishing the Sub-Acute Care Team (SCT).

Aim: To evaluate whether adherence to orthogeriatric inpatient clinical practice guidelines increased after SCT implementation.

Methods: This before and after study describes a medical record audit of inpatients aged 65 years and older who sustained a lower limb fracture from a fall, were admitted to a regional facility and subsequent rural facility. The audit included 42 inpatients admitted before the SCT (April 2009-April 2010) and 35 inpatients admitted after the SCT (April 2011-April 2012). The SCT used orthogeriatric clinical practice guidelines to inform inpatient care. Adherence to the guidelines was measured by answering ten questions representative of the guidelines. Chi-square or Fisher's exact tests were used for each question to identify if the proportion of inpatients receiving guideline based care changed significantly after SCT implementation.

Results: After SCT implementation an increase in the adherence to guidelines was statistically significant ($p < .05$) for; handover, nutrition support, falls prevention, bladder management and more than 5 guideline based care questions. Additionally, more than 60% of the inpatients received care related to weight bearing status, patient/carers discussion, bladder management, osteoporosis management, handover and nutrition support.

Conclusions: Adherence to orthogeriatric inpatient clinical practice guidelines increased after the implementation of the SCT. The mechanisms likely to have contributed include the multidisciplinary hub and spoke model, inter-professional collaborative care and the comprehensive multidisciplinary handover.

Implications for Practice: This model is likely to be effective in improving care for other frail inpatient populations.

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