- Implementation of early supported discharge programmes allowed reduction in length of acute hospital stay (from 14.2 in Jan 2020 to 8 in March 2020).
- Improving access to pacemaker check services.

## 86 Adherence to Best Practice Tariffs (BPT) for Neck of Femur (NOF) Fracture Admissions During the COVID-19 Pandemic

A. Basha<sup>1</sup>, A. Singh<sup>2</sup>, C. Barmpagianni<sup>3</sup>

<sup>1</sup>London Northwest Health Care <sup>1</sup>University Trust, London, United Kingdom <sup>2</sup>Imperial Healthcare NHS Trust, London, United Kingdom <sup>3</sup>London North West University Healthcare NHS Trust, London, United Kingdom

**Introduction:** For patients with fragility hip fractures, care needs to be promptly organised to undertake a holistic assessment and preparation for surgery. The aim of the Best Practice Tariffs (BPT) is to promote hip fracture programmes that provide best practice in the care and second-ary prevention of fragility fractures. **Method:** 

- Retrospective audit.
- Time frame: 11/03/2020 22/04/2020.
- Data retrieved from trauma management and radiology systems.

## **Results:**

- Among 33 patients with mean age of 82, 61 % showed compliance to BPT criteria.
- 39% did not meet the criteria: 33% had delayed surgery >36 hours, 3% had delayed orthogeriatric assessment, and 3% not fit for surgery.
- 33 % delayed surgeries due to requirement for medical optimisation, and further investigation.
- Among COVID patients: 41.6 % mortality rate, of which 40 % were perioperative.
- There was a loss of BPT income (around £17k) during these unprecedented times. However, the provisions of NOF care did not fluctuate despite extreme pressures on our services.

## **Conclusions:**

• Ensuring all members of the MDT have access to clinical management system.