

Vertebrae fractures: **Rural management** adaptions

Introduction

After feedback from patients and staff from multiple disciplines on the dissatisfaction with the current standard of care of patients who sustain vertebrae fractures, a collaboration of 24 stakeholder groups reviewed current practice to identify actual and potential deficits and gaps.

The project aimed for 100 per cent of patients who sustain a stable vertebrae fracture without spinal cord injury to be managed in a coordinated manner within the health district, with no unnecessary transfers to tertiary facilities.

Key activities

Traditionally, early transfer for all patients with vertebrae fractures was the norm, incurring substantial costs as well as adding emotional and financial strain to the patient and their family.

Multifaceted solutions included product and process standardisation, formal education including videos and enhanced clinical governance.

Key achievements

Patients are now managed in rural/low care centres by competent, trained staff with clear management plans.

Compliance and patient/staff satisfaction has increased. Cost and morbidity has decreased and patient safety and quality has been optimised.

This has been achieved by close collaboration and teamwork between two districts, product consultants, patients, families, clinical and management staff.









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