## World Congress of Enhanced Recovery After Surgery and Perioperative Medicine Abstract Submission

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## WHAT IS THE POTENTIAL EFFECT ON NATIONAL BED CAPACITY IF ERAS WAS APPLIED TO ALL FRACTURED NECK OF FEMUR PATIENTS?

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## Presentation Preference: Oral or Poster

**Objectives:** ERAS has been shown in some UK hospitals to be successful at improving outcomes such as length of stay (LOS), mortality, and discharge destination when applied to fractured neck of femur (FNOF) pathways. The objective of this study was to model the potential effect of applying Enhanced Recovery principles to all FNOF patients across England

**Methods:** Dr Foster software was used to interrogate Hospital Episode Statistic data. Non-elective admissions with a primary diagnosis of FNOF from Nov 2013 to Oct 2014 were analysed. Mean LOS for FNOF patients following an ERAS pathway at Poole Hospital was calculated, and compared to the national mean (all acute non-specailist hopsitals). Modelling was applied to evaluate the number of bed days that could be saved if ERAS was introduced and practice was changed nationally to achieve the same LOS as at Poole Hospital.

**Results:** 63,802 FNOF hospital spells were identified and the national mean length of stay (LOS) for patients was 19.3 days. The mean LOS at Poole Hospital over the same time period was 12.3 days (983 spells). This was 6.8 days less than the case-mix adjusted expected LOS, and 7 days less than the national mean. If all of the acute non-specialist hopsitals achieved the same LOS as Poole Hospital, then 439,733 bed days could be saved in the year.

Conclusion: FNOF is the most frequent emergency surgical pathway seen in most English hospitals. There is considerable variation in LOS between hospitals. The case-mixed adjusted data suggests that this is due to differences in practice and not patient case-mix. In addition to the likely improvement in quality of care for patients as seen in other surgical procedures, if ERAS was introduced to FNOF pathways nationally there would be highly significant economic and capacity benefits. This is of extreme importance at a time when financial pressures and the need for bed capacity have never been greater.

Disclosure of Interest: None Declared