

# Usual Care in Geriatric Rehabilitation after Hip Fracture in the Netherlands

## Introduction

After acute hospital admission, frequently patients with a hip fracture are discharged to skilled nursing homes providing geriatric rehabilitation (GR). There is limited evidence-based studies regarding specific treatment times and assessments during GR. This study aims to describe the usual care for hip fracture patients during GR in the Netherlands

## Method

Descriptive study analyzing the care pathways from six GRs, regarding health care professionals involved, allocated treatment time per profession, total length of rehabilitation trajectory and assessment instruments. Based on the diagnostic treatment combination (DBC), of 25 participants, the registered actual treatment time per profession was calculated.

## Results:

The CP pivoted on three health care professionals: medical team (MT), physiotherapy (PT), and occupational therapy (OT). The allocated time from the care pathways showed some discrepancy to the calculated mean of the DBCs. First week: MT 120-180 minutes DBC 120(SD:59) minutes, PT 120-230 minutes DBC 129(SD:58) minutes and OT 65-165 minutes DBC 93(SD:61) minutes. Week two onwards MT 15-36 minutes DBC 49(SD:29) minutes, PT 74-179 minutes DBC 125(SD:50) minutes and OT 25-60 minutes DBC 47(SD:44) minutes. Dieticians, psychologists, and social workers were sporadically mentioned. The choice of assessment tools and screening tools were not consistent in all CP

## Retrieved care pathway and DBC registration with number of participants per geriatric rehabilitation facility

GR	Care pathway	DBC registration	Number of participants
A	yes	yes	4
B	yes	yes	5
C	yes	no	0
D	yes	yes	1
E	yes	yes	2
F	yes	yes*	5
G	no	yes	5
H	no	yes*	3

**Mean treatment time per geriatric rehabilitation facility in minutes per week as described in the care pathways compared to the actual mean time according to DBC registration of 17 hip fracture participants**

## Key conclusions

Currently in the Netherlands, the usual care in GR after hip fracture, is difficult to define due to the diversity in care pathways and large practice variability.