National Office of Clinical Audit

Irish Hip Fracture Database IHFD

IRISH HIP FRACTURE DATABASE SUMMARY REPORT 2025

The Irish Hip Fracture Database (IHFD) has collected information on hip fracture care in all 16 trauma-receiving hospitals in Ireland since 2012. This is the 13th national IHFD report. The audit measures how well hospitals provide evidence-based care and monitors the patient journey from admission through rehabilitation and discharge. It also supports quality improvement by helping hospitals learn from one another and compare performance. The report includes results for the Best Practice Tariff, a financial incentive that rewards hospitals for meeting key standards of care and data quality. Further background information is available on the NOCA website (See: https://www.noca.ie/audits/ihfd-what-we-measure/)

WHAT IS HIP FRACTURE AND WHY IS GOOD CARE IMPORTANT?

A hip fracture is a break in the upper part of the thigh bone (femur) near the hip joint. It is one of the most serious injuries affecting older adults and can have a major impact on independence, mobility and quality of life. In 2025, almost 4,400 people aged 60 years and older were admitted to hospital in Ireland with a hip fracture.



Recovering from a hip fracture is about much more than repairing the broken bone. Patients may need prompt surgery, specialist medical care, support to get moving again and treatment to prevent future falls and fractures. These aspects of care are measured through the seven Irish Hip Fracture Standards, which help hospitals provide high-quality, evidence-based care.

This report highlights improvements in care during 2025 and also describes how hospitals are supporting patients through rehabilitation, managing complications such as confusion and infection, improving nutritional care and measuring longer-term recovery after hip fracture. Together, these efforts aim to help patients regain their independence and return to the activities that matter most to them.

MAUREEN'S STORY



When 91-year-old Maureen O'Gorman fractured her hip after a fall at home, she feared she might never regain her independence. A retired primary school teacher from West Cork, Maureen loved walking, reading, meeting friends and enjoying the scenery around her home, while her faith has always been an important source of comfort and strength in her life. Her recovery was complicated by COVID-19, delirium and a prolonged stay in hospital, leaving both Maureen and her daughter Mary uncertain about what the future would hold.

Through the support of a multidisciplinary team, Maureen gradually rebuilt her strength and confidence. Her care was centred on what mattered most to her: maintaining her independence and staying connected to her community. Today, Maureen lives in an independent living community; enjoys daily walks; meets friends regularly; and keeps her mind active by following sport, politics and current affairs. "I'm enjoying life and going places."

Reflecting on her mother's recovery, Mary said: "What happens in rehabilitation is a game changer. We were given time, which is critical."

READ MORE ABOUT MAUREEN'S RECOVERY JOURNEY AND HEAR DIRECTLY FROM MAUREEN AND MARY IN THE FULL REPORT. SCAN THE QR CODE TO READ THE COMPLETE STORY ON PAGES 9-10 IN THE REPORT.

KEY HIGHLIGHTS 2025



98%

98% data coverage.

95%

95% of patients were brought straight to the operating hospital

39%

Irish Hip Fracture Standard (IHFS) 1: 39% of patients were admitted to an orthopaedic ward or went to the operating theatre within 4 hours of presentation

86%

86% of patients received a pre-operative nerve block for pain

61%

61% of patients had a recorded delirium assessment on day 1 of their hospital admission

79%

IHFS 2: 79% of patients received surgery within 48 hours of admission

88%

IHFS 7: 88% of patients were mobilised by a physiotherapist on the day of surgery or the day after surgery

90%

IHFS 6: 90% of patients received a specialist falls assessment

92%

IHFS 5: 92% of patients received a bone health assessment

88%

IHFS 4: 88% of patients were seen by a geriatrician or advanced nurse practitioner

75%

75% of patients received a nutritional risk assessment

3%

IHFS 3: 3% of patients developed a pressure ulcer after admission

79,993

79,993 acute hospital bed days were occupied for patients with a hip fracture

22%

22% of patients were discharged directly home

45%

45% of patients were transferred to an on-site or off-site rehabilitation unit or to early-supported discharge.

24%

Best Practice Tariff: 24%

<1%

Surgical site infection rate: <1%

10

10 of 16 hospitals are actively recording follow-on outcomes including mobility and mortality.

KEY AUDIT DEVELOPMENT

REVISION OF ORTHOGERIATRIC STANDARDS

During 2026, the Irish Hip Fracture Database (IHFD) completed a national review of the three Irish Hip Fracture Standards (IHFS) that relate to specialist care for older people. The review found that the current standards have helped drive improvements in hip fracture care nationally but could be updated to better reflect contemporary evidence and practice. Revised standards relating to orthogeriatric assessment, delirium screening and secondary fracture prevention will be introduced from January 2027.

WHY IS IT IMPORTANT?

The revised standards place greater emphasis on early specialist assessment and identifying delirium, a common condition that can cause sudden confusion after a hip fracture. Delirium is associated with poorer recovery and loss of independence, but early recognition can help healthcare teams provide appropriate treatment and support. The updated standards will also strengthen measures to reduce the risk of future falls and fractures.

A MESSAGE FROM OUR PATIENT AND PUBLIC INTEREST REPRESENTATIVE



Serving as a NOCA patient representative on the Irish Hip Fracture Database (IHFD) for four years, I have witnessed exceptional collaborative teamwork and continuous improvements in the quality of care provided to patients with hip fracture.

The 2025 audit highlights important areas of focus, including delirium recognition, nutritional care and ongoing efforts to strengthen comprehensive geriatric assessment for older adults following hip fracture. I am particularly encouraged by the growing emphasis on person-centred care and ensuring that what matters most to patients helps guide decisions about their treatment, recovery and future care needs.

The IHFD continues to value patient experiences as a catalyst for improvement. This year, Maureen's story demonstrated person-centred care at its best. Her wishes were respected, options were explored, and the outcome exceeded her expectations. In her own words, "I've a much better life now."

Her story also highlights the importance of supporting patients and families with information, education and reassurance throughout their recovery, particularly in areas such as nutrition, delirium and rehabilitation.

Congratulations to the multidisciplinary teams across Ireland for these encouraging results and for their continued commitment to improving care and outcomes for people who experience a hip fracture..

Anne O'Shea Clarke,
Public and Patient Interest Representative,
Irish Hip Fracture Database

NOCA National Office of Clinical Audit

4TH FLOOR, 118 ST STEPHEN'S GREEN, DUBLIN 2, D02 X0N1

Tel: +353 1 402 8577

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ihfd@noca.ie

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