

## CASE STUDY

### Virtual Fracture Clinic

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The adult Virtual Fracture Clinic (VFC) was launched in 2013 and expanded to a dedicated Virtual Hand and Wrist Fracture Clinic (VHFC) in 2016. The VFC has won several awards including NHS Innovation Challenge Prize for Best Practice Adoption 2015-16, and Advancing Healthcare 2016 Overall AHP Winner and The Chief Allied Health Professions Officer's award for Entrepreneurship. The service was also rated Outstanding by the CQC in 2016. The VFC has published several Medical Journal articles evidencing the clinical and financial success of this service.

For patients, the transition to a virtual service saw an increase in satisfaction scores from 76% to 85%. Simple fractures and soft tissue injuries are discharged from the virtual clinics with self-management advice and rehabilitation plans. Of all of our patients, only 43% from the VFC and 47% from VHFC need to attend for a face to face fracture clinic appointment. These patients are now seen by a specialist in their injury, rather than in a generic fracture clinic. The table below compares attendance to hospital for new patient fracture clinic appointments in a traditional and virtual service model for an average year. The Paediatric virtual clinic is not yet running so figures are estimates. The virtual model demonstrates that an estimated 5416 new patient appointments are saved across the 3 teams. By patients seeing the correct orthopaedic specialist or advanced practice therapist, the number of follow up appointments are also reduced. It is estimated that paediatric follow up attendances will drop by 40%.

	<b>Traditional Model</b> New Patient face-to-face Appointments	<b>Virtual Model</b> New Patient face-to-face Appointments
VFC	4200	1798
VHFC	3800	1786
Paediatrics	2000 (estimated)	1000 (estimated)
<b>Total</b>	<b>10,000</b>	<b>4584 (estimated)</b>

This clearly has significant practical impacts on patients and their families, as well as hospital clinic capacity. By reducing attendance we also lessen the burden on hospital transport services and lower the socio-economic impact of hospital appointments. The environmental benefit should also be considered, with on-going efforts in Brighton and Hove to improve air quality. Assuming 50% of our patients drive to their appointment with an average return journey of approximately 6 miles, the virtual clinics model is estimated to reduce CO<sub>2</sub> emissions by 3.8 tonnes per year alongside a 45% reduction nitrous oxide and harmful particulate emissions\*.

Watch this video to learn more about this intervention: <https://vimeo.com/386666515>