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OBJECTIVE

To create a new model for expedited access and assessment for patients referred for hip and knee replacement surgery.

SYNOPSIS

The Holland Orthopaedic & Arthritic Centre of Sunnybrook Health Sciences Centre was designated by the Ministry of Health and Long Term Care in 2005 as a Centre of Excellence for hip and knee replacement surgery. The volumes are projected to increase to over 4,000. The Holland Centre currently performs over 2,200 hip and knee replacements and is leading in innovations in care models and new care provider roles.

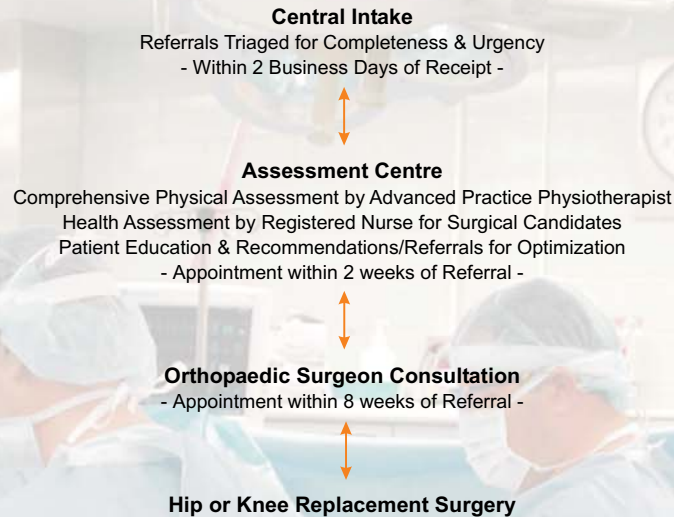
BACKGROUND

In late 2006, the TC LHIN hospitals began to implement its Hip and Knee Replacement Project. The first phase has identified a way to increase capacity for joint replacement and improve patient outcomes by developing a single standardized referral, intake and assessment process for patients. The Holland Centre has been designated as the future site of the Central Intake Centre and will be the first of two Assessment Centres.

PROGRAM ELEMENTS

- ✓ Standardized Consultation Referral Form for referring physicians
- ✓ Central Intake with single point of contact
- ✓ Patient choice of specific surgeon or first available appointment
- ✓ Expedited access, triage & assessment
- ✓ Role for Advanced Practice Physiotherapists in pre-operative assessment & post-operative review
- ✓ Standardized letters to referring physicians
- ✓ Care paths for surgical and non surgical patients
- ✓ Consultation with orthopaedic surgeon as required
- ✓ Single wait list for consultation - surgeon & hospital profiles
- ✓ Standardized assessment tools, including urgency criteria
- ✓ Referral tracking database

PROCESS & WAIT TIME TARGETS



FRAMEWORK FOR CHANGE

- Process & Role Redesign
- Collaboration/Consensus/Communication
- Champions
- Human Resource Strategy
- Information Systems/Technology
- Physical Facilities
- Evaluation

LESSONS LEARNED

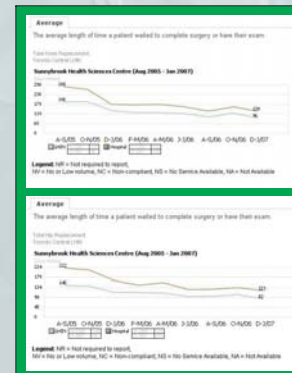
- ✓ Strong collaboration and communication among team members is key in introducing change and developing confidence in a new model and non-traditional roles
- ✓ Identifying champions among the stakeholder groups is very important
- ✓ A 'Rapid Cycle' approach allows small process changes to be piloted, evaluated, and adapted before large scale change is introduced
- ✓ Change is supported by using a process that is stakeholder driven and evidence-based
- ✓ Introducing new roles, such as the Advanced Practice Physiotherapists, maximizes available human resources and promotes retention of highly skilled professionals

OUTCOMES

Early evaluation demonstrates:

- ✓ Timely access and shorter wait times for consultation
- ✓ Single wait list: 10% of patients are choosing first available appointment versus specific surgeon
- ✓ Optimized use of orthopaedic surgeons' time:
 - ♦30% of patients are determined not to be surgical candidates or, when fully informed, decide to delay surgery and pursue other treatment options
 - ♦80% of patients directed to orthopaedic surgeon from Assessment Centre require surgery
 - ♦increased surgeon availability for surgical management
 - ♦routine follow-up reviews after discharge can be independently managed by Advanced Practice Physiotherapists
- ✓ High patient satisfaction

Next Steps: This model is to be implemented across the TC LHIN over the next six months. Further evaluation is planned to document improvements in access, wait times, patient satisfaction and outcomes.



Resource Support: The Holland Centre received a one-time grant through the Ontario Wait Time Strategy for salary support for an Advanced Practice Physiotherapist for one year. The TC LHIN has provided support in facilitating collaboration across the LHIN hospitals to design a standardized model and assessment tools. The initiative is also being enabled through the development and implementation of IM/IT solutions to collect, measure and report "Wait 1" through the Ontario Wait Time Strategy.