

Innovative role for physiotherapists aimed at freeing surgeons to see new orthopaedic patients

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Toronto, Ont. – The Holland Orthopaedic and Arthritic Centre is responding to the government's call to reduce wait times for hip and knee joint replacements and increase surgical volumes, by engaging advanced practice physiotherapists to screen patients prior to the surgical consult and to conduct postoperative follow-up assessments.

The new model of care has extended the scope of physiotherapists and represents a shift in traditional roles in order to meet the high demand for hip and knee replacement surgery. In preparation for their expanded role, physiotherapists shadow surgeons and receive specialized training based on a residency model.

The goal is to maximize the surgeon's skill-set in the outpatient clinic and reduce the time spent by surgeons in providing routine surgical follow-up. In the new role, Advanced Practice Physiotherapists screen referrals to the centre in order to facilitate a focused surgical consult for appropriate patients. "The screening function of the Advanced Practice Physiotherapists ensures that surgeons are not spending time assessing patients that don't actually need or want surgery," says Susan Robarts, the centre's first Advanced Practice Physiotherapist that began working in the new role in November 2005. "In addition, it provides an ideal opportunity to educate patients on treatment options and how to manage their symptoms. You can imagine how frustrating it must be to wait and wait for a surgical consultation only to be told you don't need surgery and then be sent away." Advanced practice physiotherapists have also been trained to provide the follow-up assessments that are conducted three times in the first year and every two years onward and provide telephone support for patients.

"This initiative translates into an immediate impact on service delivery program-wide," says Dr. Jeffrey Gollish, Medical Director at the Holland Centre. "The development of the Advanced Practice Physiotherapist role responds to our need to reduce wait times and increase surgical volumes, with the long term goal of allowing surgeons to devote a larger proportion of their time to seeing new patients and to surgery. It's an absolute necessity to develop roles like this in light of the growing numbers of patients requiring hip and knee replacements."

Patient satisfaction was a significant consideration when the new model was evaluated. "The comfort level of patients was forefront in our minds," says Deborah Kennedy, Manager of Program Development for Hip and Knee Replacement at the Holland Centre. "After surgery, patients have a lot of questions about exercises and activity resumption. Patients have told us that they feel reluctant to ask questions at their follow up visits because they know the surgeons are very busy. These questions can be answered effectively by an experienced physiotherapist."

A recent satisfaction survey to evaluate the new model of care found patient satisfaction to be very high. In comparing the physiotherapist-lead clinics to those lead by surgeons, there was no difference in the mean satisfaction scores.

"From assessing my mobility and movement during three visits after my surgery, to fielding my detailed questions on exercise, my experience with the new model of care has been very positive," says patient Donna Yates, who had a total knee replacement in May 2006. "My concerns about whether what I was going through was the 'normal experience' were always answered, and the physiotherapist also helped me to develop an exercise program. I felt relaxed asking detailed questions that I felt the surgeons may not have the time to answer."

The Holland Centre is one of the largest hip and knee joint replacement centres in Canada, performing over 2000 procedures annually. It is the first government-designated Hip and Knee Centre of Excellence in Canada.

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- 30 -

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