



# Spinal Assessment Clinic

## Outpatients

Improving Patient Flow and Service Integration

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Government  
of South Australia

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# Today I am going to tell you about:

- > Spinal Assessment Clinic
  - Background
  - Key outcomes



# Spinal Assessment Clinic

Brief outline...

- > Team of post graduate qualified Physiotherapists
- > Assess patients with spinal pain
- > Referred to Neurosurgery
- > ?surgery indicated

# Flinders Medical Centre, SA

## Setting the Scene...



- > 580 bed
- > Services pop 350,000
- > Southern metro and country areas, Northern Territory
- > Diverse patient services
- > 60,000 ED presentations pa



# Spinal Assessment Clinic

How it started...

- > Commenced July 2010
- > Budget \$50k
- > Patients with spinal pain seeking surgical opinion
- > Referred by GP/ Specialists



# Spinal Assessment Clinic

## How it works...

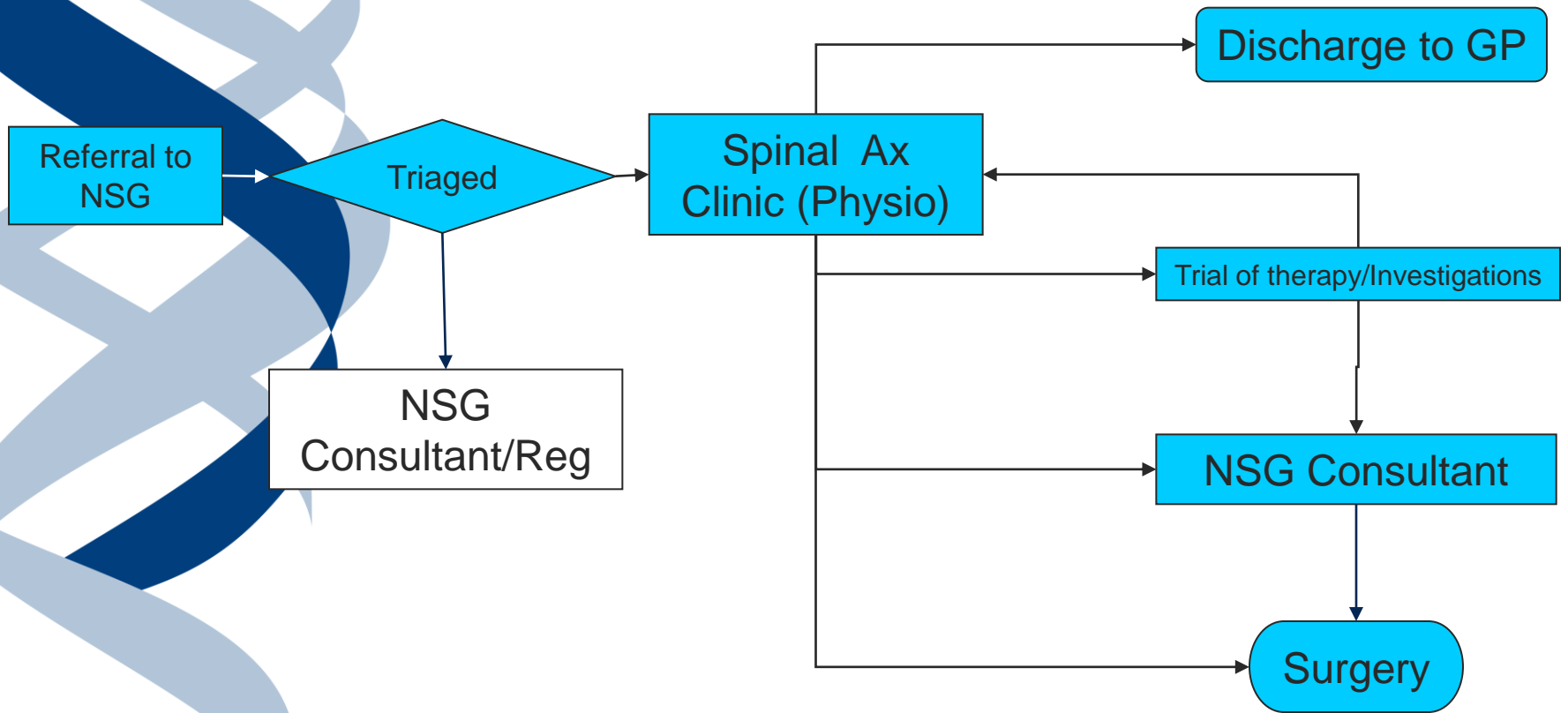
- > 2 Physiotherapists
  - Min 10 years experience
  - Post graduate clinical training
- > 2 sessions/week
  - Concurrent with Neurosurgical clinic
  - Consultant clinical lead
- > Capacity – 16 patients/week
- > High new patient to review ratio (~3:1)
- > Comprehensive assessment and management plan developed
  - collaboration with Specialist and patient.
  - 40-60 minute appts



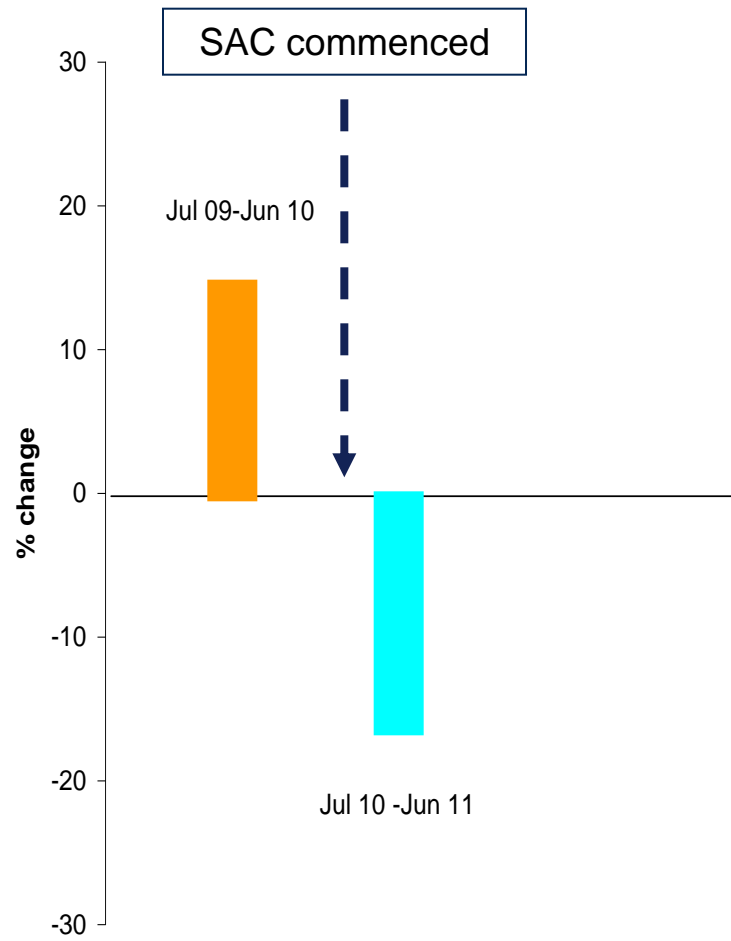
# Drivers for Change

- > Supply << Demand
  - 1,200 referral pa
  - Capacity 700 pa
- > Low surgical conversion rates
- > Early intervention
- > Similar clinics successful

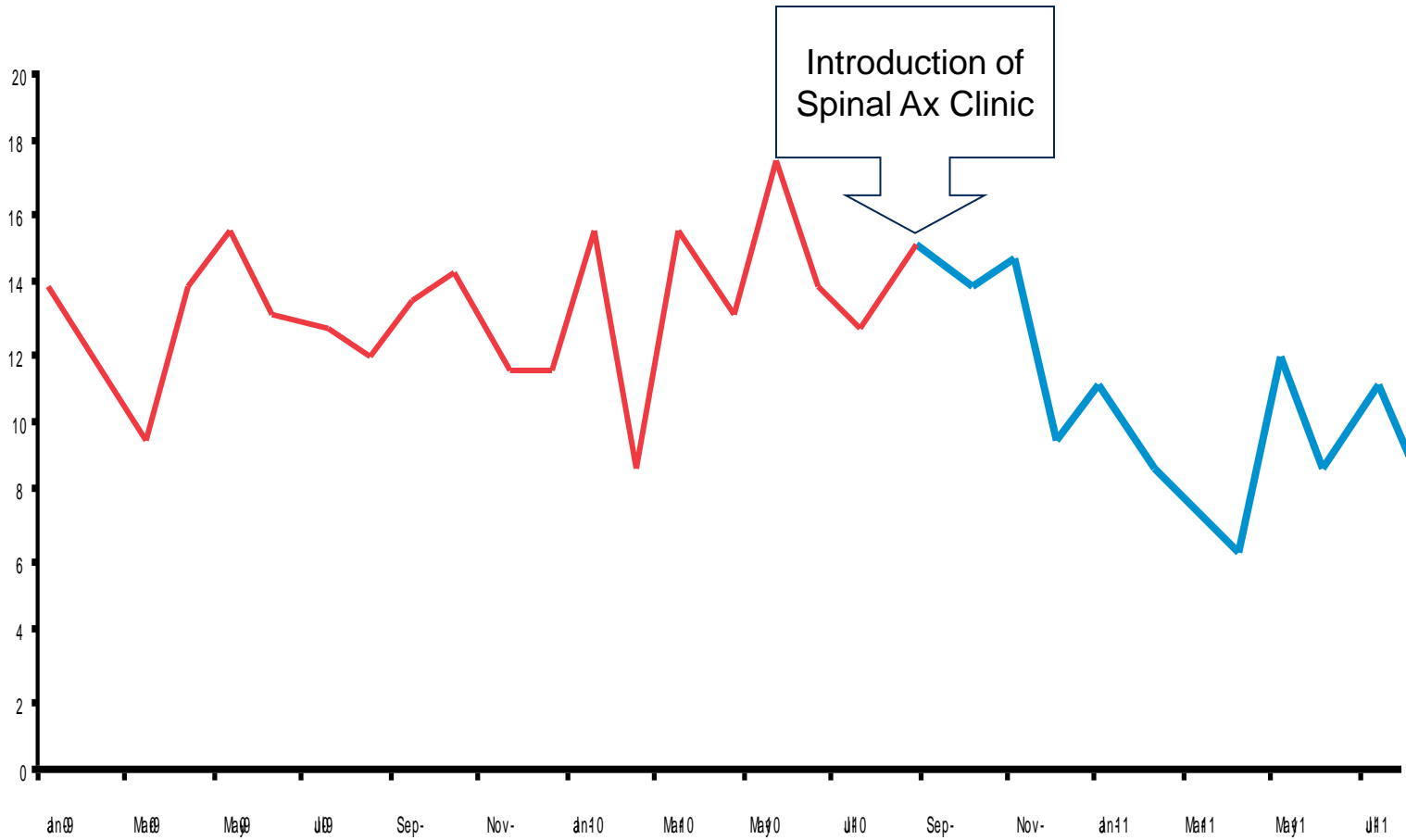
# Patient Journey



# Results- Waiting list



# Results - DNA rates





## Results - Patient satisfaction

- > 97% overall care excellent or very good
- > 97% seen within 15 mins of appt time
- > 93% completely satisfied with involvement in management plan
- > n=30 (ongoing)



# Results – Spinal Assessment Clinic

- > 18% wait list reduction (vs 15% increase)
- > 4% conversion to surgery rate
- > 49% discharged at first appointment
- > >90 % attendance rates
- > New patient to review = 2.7 to1  
(vs 0.4 to 1 historically)
- > High level of patient satisfaction
- > Under budget



# What worked?

## Broadly speaking...

- > Delivery of high quality care
  - Highly experienced and qualified Physiotherapists
  - Long appointment times
- > Good relationship between Physio and NSG
- > Executive level support
- > Medical “Champion”
- > Engaging all levels of staff
- > Link in with key strategic directions of health service



# What worked?

## Clinic specific

- > High new to review ratios
- > Pool of 4 clinicians
- > Clinics concurrent with NSG
- > Quarantining of outpatient staff
  - Less clinic cancellations
  - Run on time



## Conclusion

- > Need for change
- > Role of Spinal Assessment Clinic
- > Cost effective, high quality care model
- > High levels of patient satisfaction



# Acknowledgements

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