

Osteoarthritis Hip and Knee Service (OAHKS) Optimising the Patient Journey

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17-18 Sept

Outpatients: Beat the Waiting Game

Cairns



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OAHKS

Optimising the Patient Journey

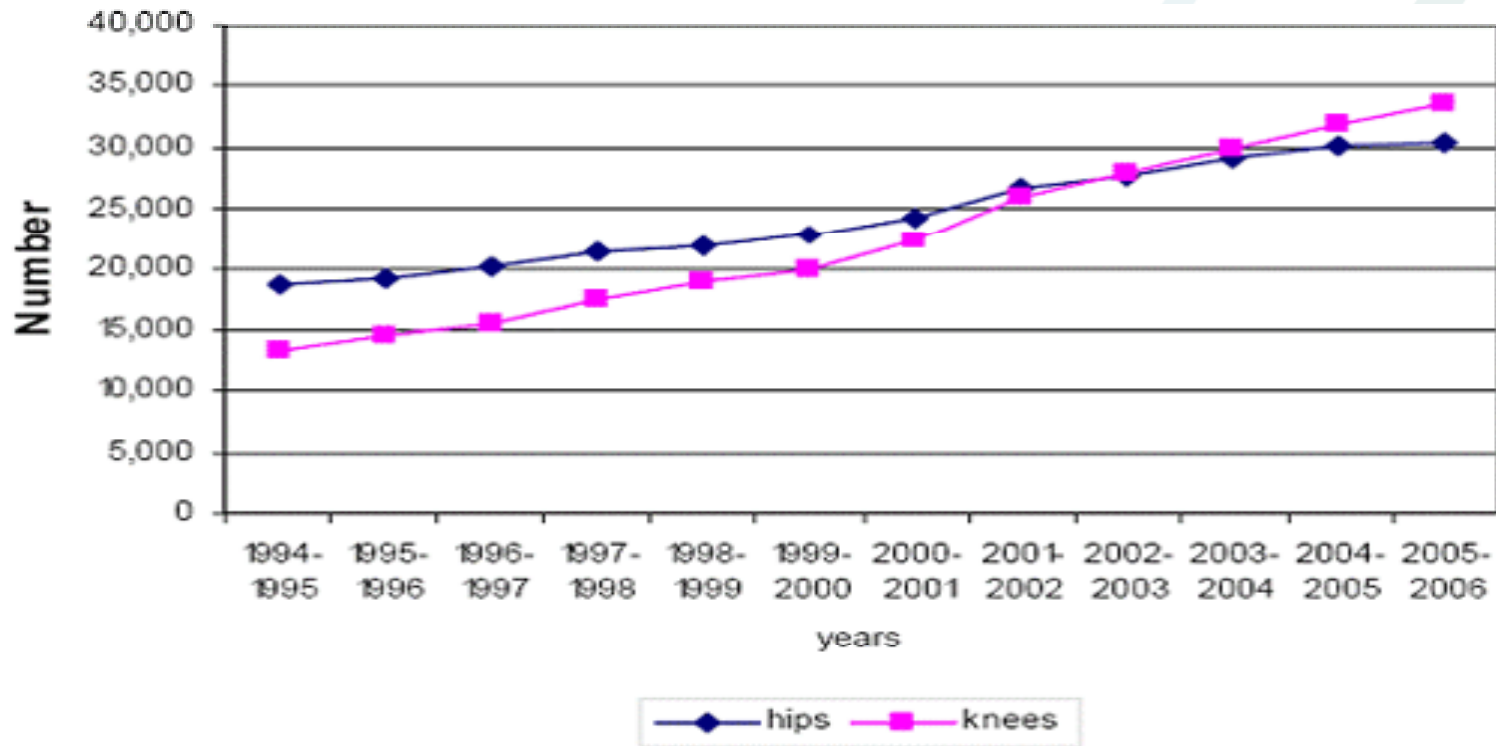
Overview

- The non optimal journey thus far
- OAHKS
- Outcomes to date
- Challenges
- Future



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Non Optimal Journey



Ref:
www.health.vic.gov.au/oahks

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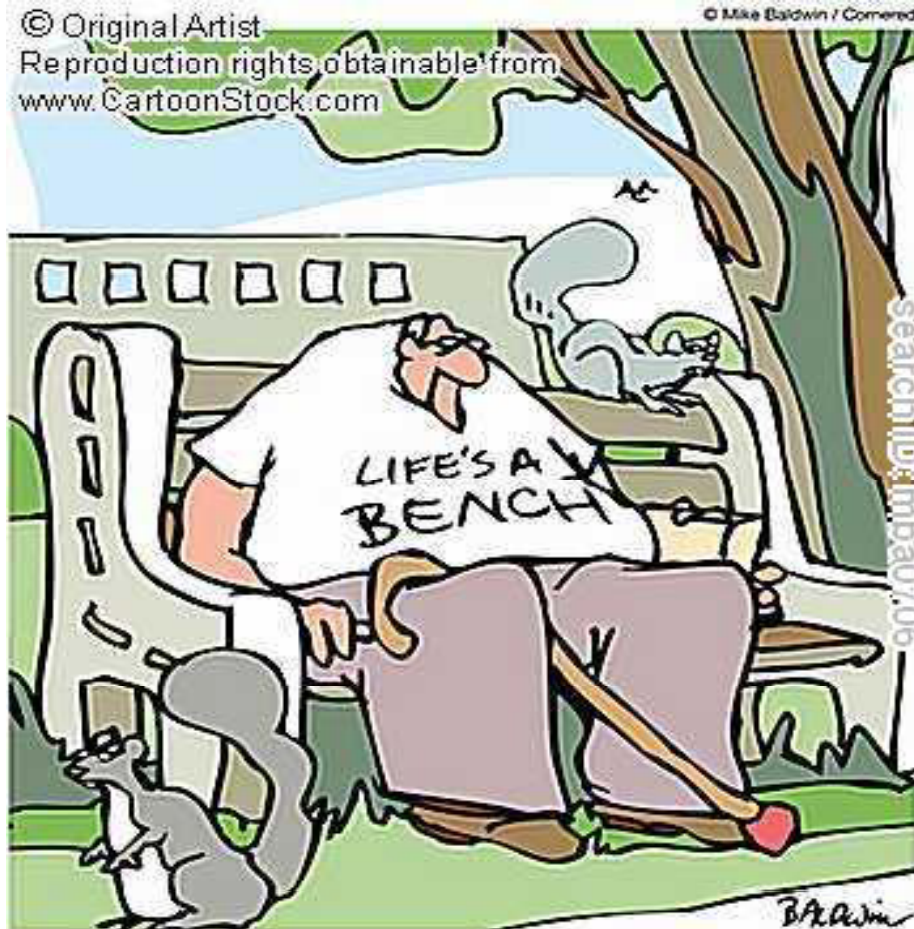
Non Optimal Journey

- Wait time for initial appointment
- Orthopaedics surgeons – scarce resource
- GP referral
- Lack of conservative management
- BMI >30
- Referral for surgery
- Time based wait for surgery



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DHS – OAHKS

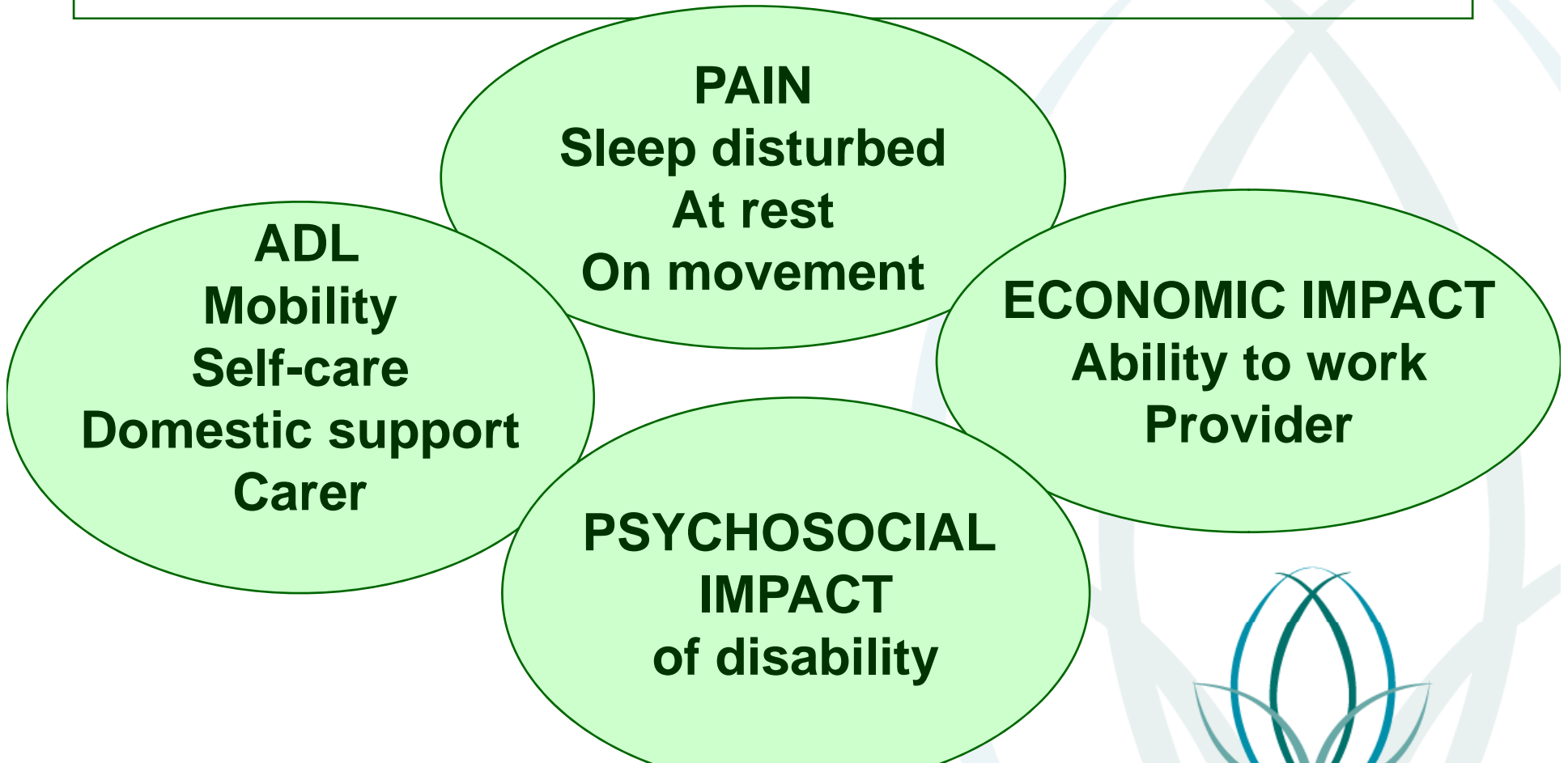


**Aims to provide optimal timely care for those with OA hip and Knee



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MAPT HIP AND KNEE QUESTIONNAIRE



RECENT DETERIORATION



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MAPT HIP AND KNEE QUESTIONNAIRE

www.melbourneinstitute.com/wp/wp2006n24.pdf

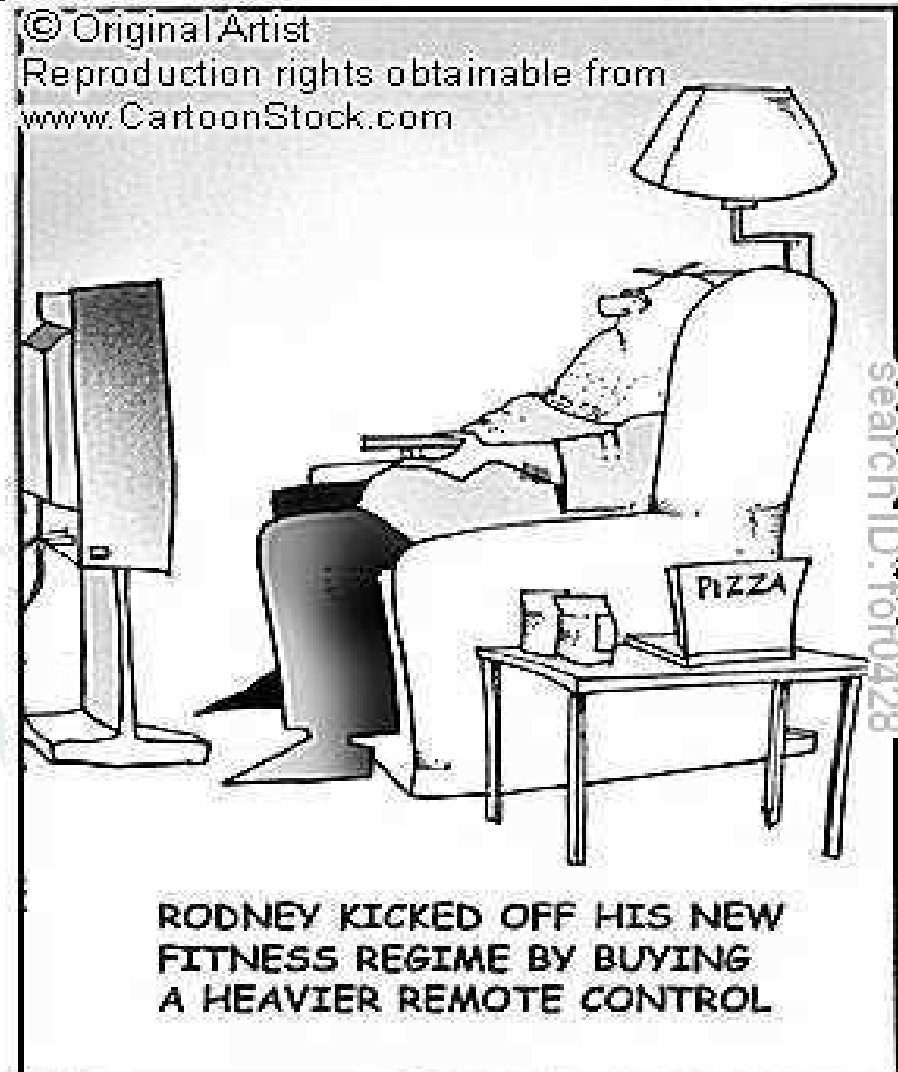
www.health.vic.gov.au/oahks



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OAHKS Musculoskeletal Coordinator

- Assess and monitor patients
- Prescribe home exercises
- Refer conservative management
- Patient education
- Communicate with GPs



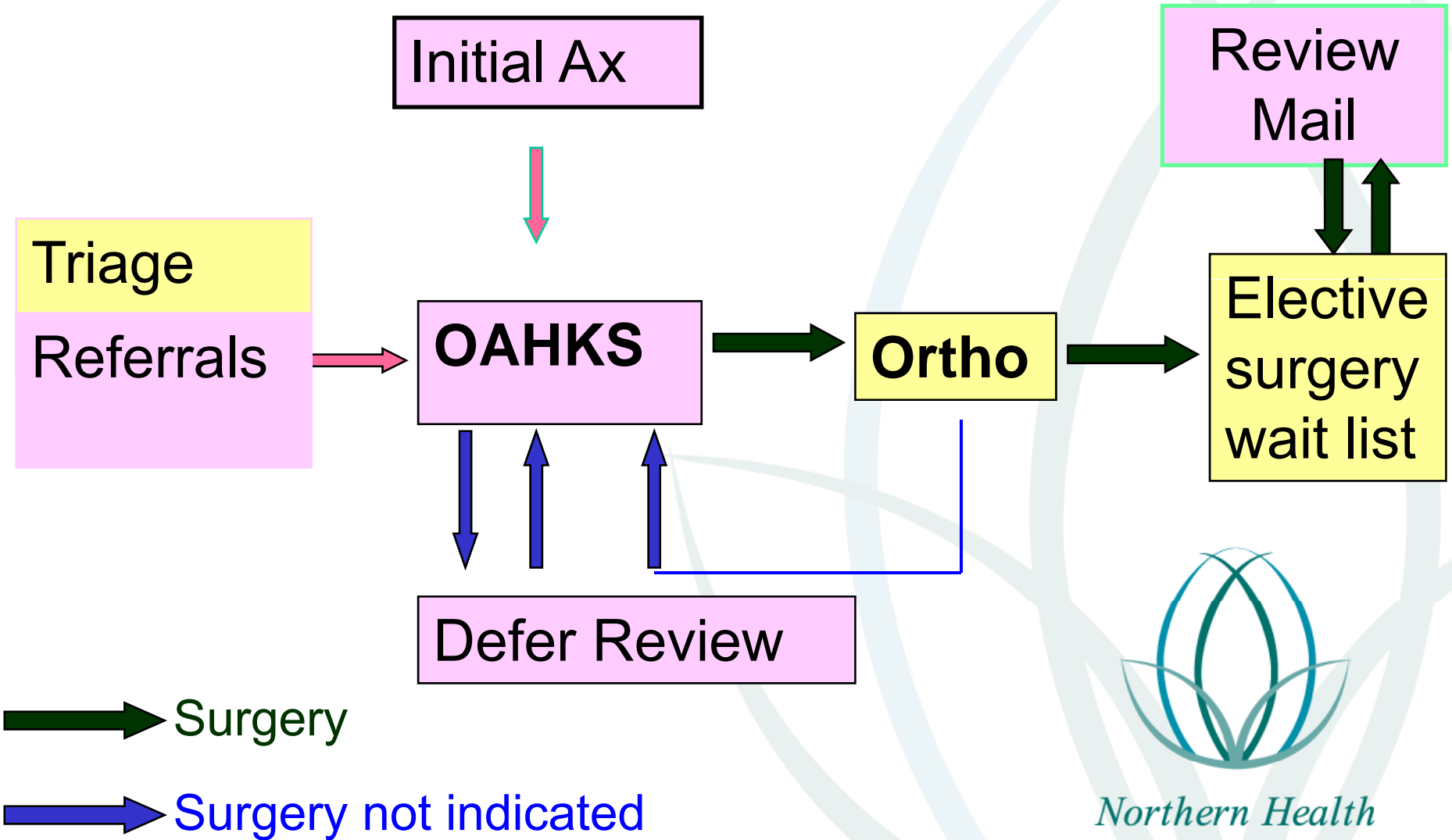
OA Hip & Knee Service

- Northern Health Phase III
- Service commenced 30th September 2008
- OAHKS clinics TNH CHS
- Dietician clinic

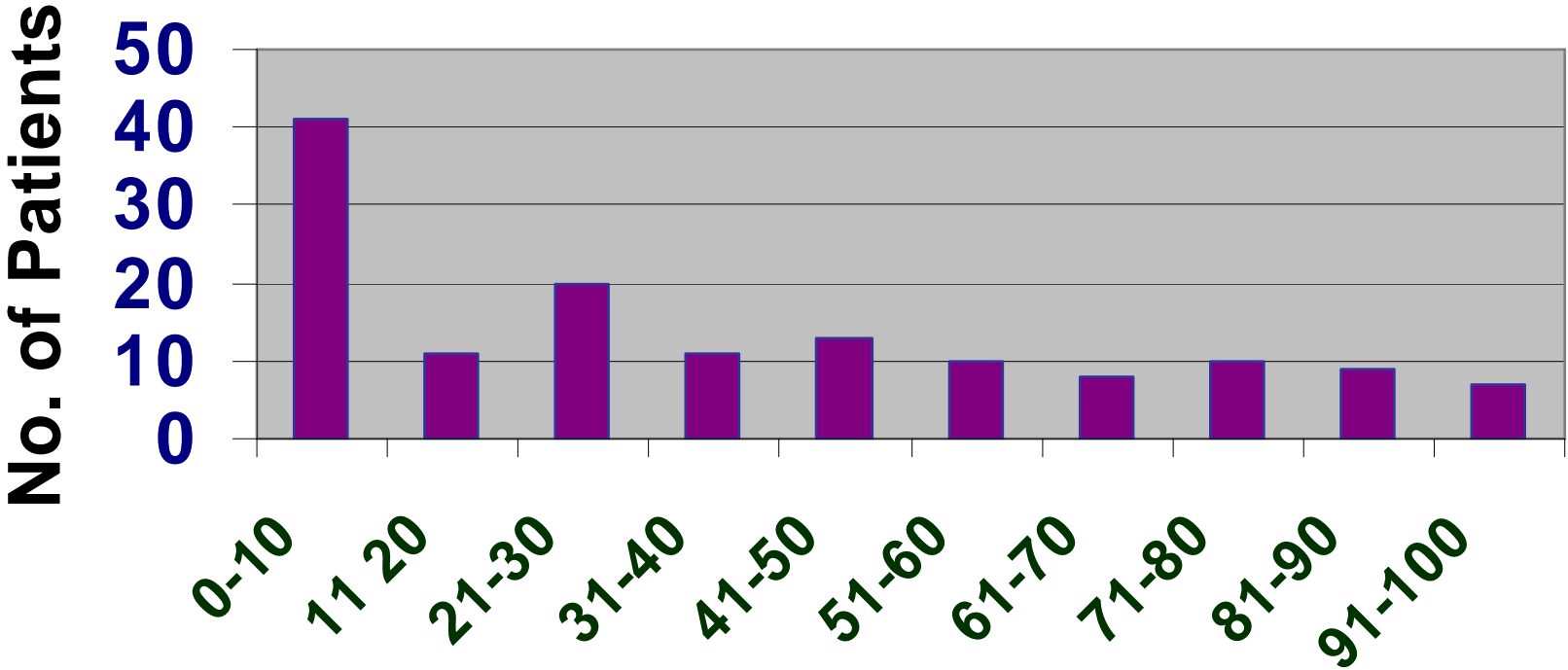


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OAHKS Pathway



MAPT Score Profile



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Review Deferred Patients

Initial review - 3 months

- MAPT >30
- Recent decline

Initial review - 6 months

- MAPT <30
- Stable function

Subsequent Review

- Rooms
- Mail



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Orthopaedic Referral

Standard Referral

- MAPT \geq 60
- Within 3/12

Fast Tracking

- Patients with MAPT \geq 90 fast tracked to orthopaedic surgeons
- Within 2/52



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Outcomes

New referrals

Attended 287

FTA 11%

Reviews = 76

FTA 22%

Outcome

Deferred - 61%

Ortho surgeons - 38%

Conversion to Surgery rate – 72%



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Outcomes

- Median time to first appt - 104.5 days
 - 14 wks
- Interquartile range - 63.5 - 127 days
 - 9 -18wks
- Max time to first appt - 515 days ***
 - 18mths

- Pre OAHKS time to first appt up to 3 years.



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Referrals

- Physiotherapy referrals 51%
 - BHS
 - BEEC
- Dietician 68% accepted



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OWL

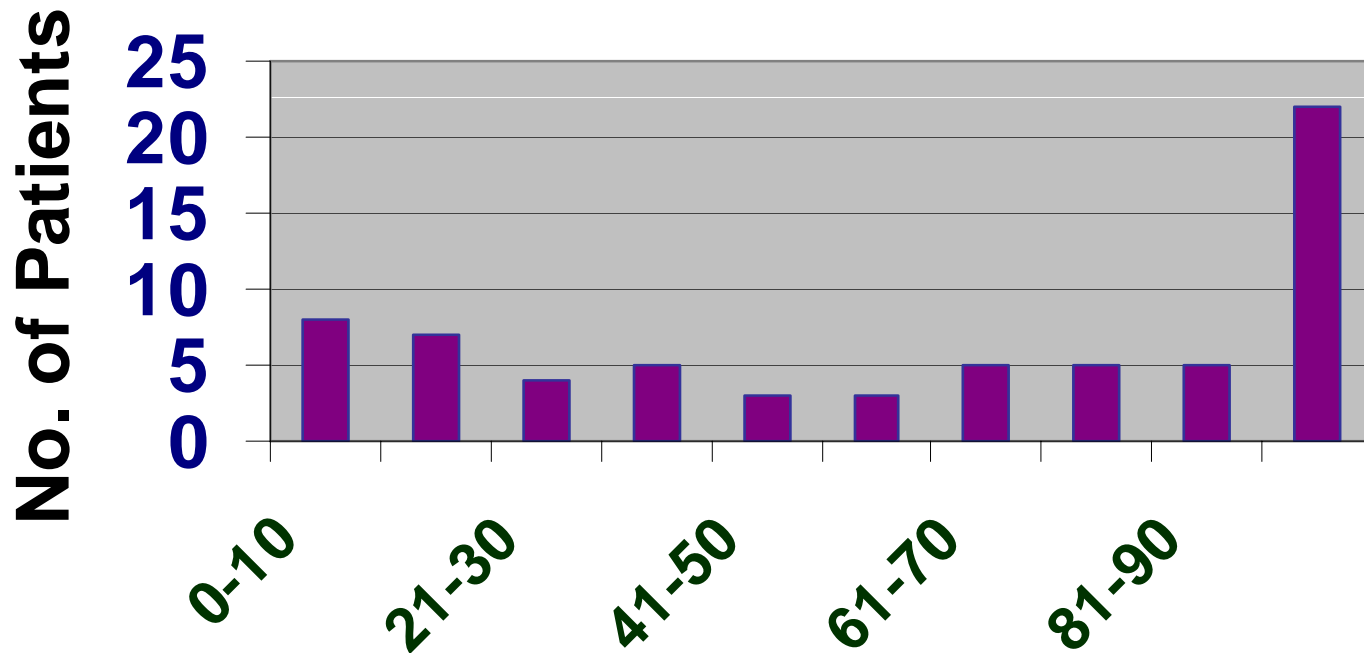
- ESAC uses the MAPT and days waited to prioritise patients for surgery
- Pts monitored with MAPT
- Aim for those >90 to be a priority
- Competing factors – DHS Categories, availability of theatre space, prosthesis



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Waiting for Surgery

MAPT Score Profile



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Challenges

- Entrenched traditional medical philosophy
- Co-location of clinics
- Clinic space
- Finding the Right Person for the task
- Risk Management
- Administration
- Funding
- Access community resources



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OAHKS in the Future

- Patient satisfaction
- GP referral form
- Research



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