

Update on our multi-year plan to improve care, promote wellness and provide Nova Scotians more timely access to hip and knee replacement surgeries

This update is published by Nova Scotia Health Authority's Perioperative Services Program. More information on our progress and targets is available on our website.

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Improving Care and Access to Joint Replacement Surgery

Waiting for hip and knee surgery has a big impact on the lives of some Nova Scotians. They can be in pain, have trouble getting around, lose time from work, and be kept from activities they enjoy.

Having surgery sooner can improve the lives of patients and may also lead to better results. That is why Nova Scotia Health Authority has a new multi-year hip and knee action plan underway. The plan will help even more Nova Scotians receive surgery and other supports they need to be well.

We are making progress on our plan and new government funding is allowing us to invest in people, equipment, new technologies, and other improvements that will help us begin clearing the backlog of patients waiting for surgery. Our plan will also help us increase our focus on wellness, better support patients and bring the wait times down to the national six-month target over time.

As we work to put our plan in place we can learn a lot from patients and their families. Patient representatives who have had experience with hip and knee replacements are supporting our planning. By sharing their experiences and ideas they will help us keep the needs of patients front and centre in our planning.



What our plan means for Nova Scotians...

- Those who may need hip and knee replacements can expect their wellness to be a priority and the same quality, patient-centred care, wherever they receive services.
- Patients waiting now can expect surgery by March 2020 – sooner in most cases.
- Those added to the surgery list from April 2020 onward, should expect their surgery within six months.

FAST FACTS



What hospitals offer hip and knee replacement surgeries?

Hip and knee replacement are very specialized surgeries that require specialized health care providers, operating rooms, equipment and surgical tools. Five Nova Scotia hospitals offer these surgeries:

- Aberdeen Hospital
New Glasgow
- Cape Breton Regional Hospital
Sydney
- Dartmouth General
- QEII Health Sciences Centre
Halifax Infirmity site
- Valley Regional Hospital
Kentville

What do hip and knee replacements cost?

The average cost to the health system is \$7500* for each total hip replacement and \$6000* for each total knee replacement.

*Based on 2015/16 -2016/17 data for typical patients at the QEII/Dartmouth General. Includes direct costs only. Data sources: MIS, Case Costing, Perioperative Services

Helping More Nova Scotians Get the Care They Need

Since our Hip and Knee Action Plan was announced in October 2017, our teams have been working to plan for new resources, new processes and new approaches to care. At the same time, they have been doing more hip and knee cases by:

- running longer operating room hours
- continuing to do cases during peak vacation times where possible
- providing operating room time for hip and knee cases when time is freed up from other surgeries, and more.

As a result of these efforts, 8.1% more Nova Scotians were able to have their surgery in 2017-2018. **In fact, for the first time in many years, we were able to reduce our wait list, with 4.6% fewer Nova Scotians waiting at the end of the year, than when it began.** We expect this success to continue and increase as the pieces of our plan are put into place.



Our Multi-Year Plan

Today across Nova Scotia patients with hip and knee joint problems can have very different experiences. How they are referred for surgery, the waits they experience and the supports and care they receive before and after surgery can vary.

Our plan means that all patients will be able to count on timely initial assessments and consistent, proven approaches to care, wherever they receive our services. It involves key investments and new approaches to care that will work together to reduce our wait lists and offer patients more choice, more supports to be well and a better, overall experience.

Our plan isn't simply about doing more cases to reduce our wait lists. We are making wellness a bigger focus in the care we offer before, during and after surgery, so that we can help patients live their best lives possible.

Our plan involves:

- Enhancing and expanding Orthopedic Assessment Clinics (OACs)
- Expanding our teams and capacity
- A standardized care pathway to guide quality care at each hip and knee replacement site
- Improving how we schedule operating rooms
- Better measuring and reporting of our targets and progress
- Improved communication and engagement

Enhancing and Expanding Orthopedic Assessment Clinics

The foundation of our plan is to enhance and expand Orthopedic Assessment Clinics (OACs) to make these valuable services available to patients of each joint replacement site.

Some form of these services are offered to patients now, but what each offers is very different. Our plan will make similar resources and supports available to benefit all patients.

OACs will be a patient's first point of contact when their primary care provider feels they may need a hip or knee replacement. Rather than being referred to a surgeon and perhaps waiting several months or more for their first appointment, all patients will instead be referred to an OAC. These clinics will work with patients to determine what they need and connect them with the services that are right for them.

Similar approaches are now used in Cape Breton and Halifax with good results.

OACs will also help us manage wait lists and will give patients more choice. Patients will be able to go to the facility or surgeon with the shortest wait, if they wish.

Expanding our Teams and Capacity To Deliver Care

Having a larger team and introducing other supportive roles will help us complete more surgeries and improve care.

Our plan includes funding to hire four new orthopedic surgeons, four new anesthesiologists, and other supporting roles in our operating rooms.

A new surgeon started at Valley Regional Hospital in April and others have been recruited to join our teams by the fall.

More than 60 other providers will join our Orthopedic Assessment Clinics, operating rooms or our inpatient units to support patients from their referral, through to their recovery.

OAC Teams Connect Patients to Care and Support



OACs coordinate the care that patients receive and support them on their path to wellness.

Each will involve a team of care providers that may include nurses, social workers, physiotherapists, occupational therapists, dietitians and others.

Patients will be contacted after their referral is made and be given an appointment to meet with a member of this team. The team will go over their file, check their mobility, weight and blood pressure, review test results and more. They will also talk to patients to understand how their hip or knee problem affects them and to learn about their goals and what they prefer -- *they want to join their friends for walks again, they are willing to travel if it means having surgery sooner.*

This visit will help determine if a patient is a good candidate for surgery, if their condition may mean they will need surgery down the road, or if there are things they will need help with in order to be ready for surgery (e.g. lose weight or stop smoking).

After this assessment the team may refer a patient to a surgeon, but their role does not stop there. They continue to offer education, advice and support to patients, before and after surgery.

This might include:

- access to services to help them better manage their pain
- access to wellness programs (e.g. healthy eating and group exercise classes)
- physiotherapy services to increase their mobility and strength
- advice to make their home safer and more accessible to support their mobility (e.g. raised toilet seats, handrails in showers)
- information, education and motivation to help them prepare for their surgery and recovery

Standardized Care Pathway to Guide Care at Each Hip and Knee Replacement Site

Our patients should expect the same standard and quality of care wherever they receive care. They should also expect our services to be based on research and what has been shown to work well.

This is why part of our plan is to adopt a standardized clinical pathway for hip and knee replacements. This work is underway now with physicians and other members of our care teams.

What are clinical pathways?

Clinical pathways serve as guides for care providers. They map out the important steps teams should follow as they care for patients.

Our clinical pathways will begin in our OACs and guide the care patients receive leading up to and during their surgery, while they recover and when they return home.

Our goal is for patients to have the best outcome they can. What does this mean?

- Patients are supported at every step from referral to recovery
- They are well informed and well prepared for surgery
- If they require surgery, it is safe, successful and followed by a smooth, complication-free recovery
- Patients have improved mobility, reduced pain and a better quality of life. They are satisfied with their overall experience

Focus on Wellness

We are not just trying to correct hip and knee problems. As we plan to reduce waits and improve care, helping patients be well is a big focus.

Patients in need of a hip or knee replacement are not necessarily sick, so why treat them like they are?

Our plan will introduce new approaches to care that focus on helping patients be well. Each of our sites will deliver services based on wellness models that are helping other patients in Canada and the United States.



What could this wellness model look like?

- Patients will be encouraged to have a coach to support them from the start. This friend or family member will join them for appointments, classes and more.
- Mobility is key to recovery and can help avoid problems like infections. We will help patients improve their strength before their surgery and help them get them up and moving as soon as possible after their surgery. Patients will:
 - Stand and take their first steps just hours after surgery.
 - Receive a daily newsletter with their activities and goals.
 - Chart their progress on a poster on their unit.
 - Join group exercise classes starting the day after surgery.
 - Recover in special chairs, not on their backs in a normal hospital bed. These chairs make it easy for patients to get up and move about.
 - Wear their own clothes after surgery, not hospital gowns and eat meals in a common dining area. Both can encourage and motivate patients to keep moving as they recover.
- Reducing the time patients stay in hospital can be beneficial to them as it promotes mobility and aides their recovery. Shorter stays could also free-up hospital beds to allow more patients to have the surgery they need sooner.
 - Patients with health issues, such as heart disease or diabetes, and others who may need extra support at home, may continue to stay in hospital for around 3 days.
 - Some, otherwise healthy patients, may go home the day of their surgery, with the right supports and follow-up. Other patients may also recover more quickly and be able to return home sooner.

Watch for more information in the next issue of our *Hip and Knee Action Plan Update* or learn more at www.nshealth.ca/hip-and-knee