



3rd Annual Quality & Patient Safety Conference Improving the Healthcare Journey for Patients & Staff



TITLE

Multidisciplinary Trauma Assessment Clinic: An Alternative Pathway of Care for Orthopaedic Outpatients

SUBMITTED BY

Louise Bernard - Clinical Specialist Physiotherapist, Gillian Gavaghan - Clinical Specialist Occupational Therapist and Mr. James Walsh - Consultant Orthopaedic Surgeon, Beaumont Hospital

ABSTRACT

INTRODUCTION

It is well established that orthopaedic fracture clinics are overcrowded, leading to lengthy waiting times, thus placing patients at greater risk during the COVID-19 pandemic.

Existing pathways of care in fracture clinics involve 3.6 appointments on average per patient (HSE, 2015) which can result in unnecessary clinic reviews, increased cost and repeated exposure to radiation through routine use of imaging. There may be a delay in physiotherapy and occupational therapy (OT) referrals, which can lead to poorer outcomes.

The multidisciplinary TAC is a virtual fracture clinic that is safe, cost-effective and associated with high levels of patient satisfaction (O'Reilly & Sheehan, 2020).

METHODOLOGY

The Plan, Do, Study, Act (PDSA) cycle was utilised for this quality improvement project.

AIM

The aims of TAC are to:

- enhance patient outcomes
- reduce the number of patients attending outpatient orthopaedic clinics
- improve patient flow
- reduce waiting times
- decrease the use of unnecessary imaging.

CHANGE IMPLEMENTED

TAC commenced in July 2020. It runs weekdays with an Orthopaedic Consultant, Registrar, Clinical Specialist Physiotherapist and OT in attendance. Patients' clinical notes and x-ray are discussed, and patients are either referred to physiotherapy/OT or booked for orthopaedic review.

MEASUREMENT

The impact of this project has been measured by capturing the number of TAC referrals, the number of patients discharged to physiotherapy/OT from TAC and with a patient experience questionnaire.

RESULTS

From July 2020 to Dec 2021, 1463 patients were referred to TAC with 28% discharged directly to physiotherapy, 14% discharged directly to OT and 58% booked into an orthopaedic outpatient clinic. Patient experience was evaluated with 104 patients who were referred to physiotherapy/OT completing the questionnaire; 100% agreed or strongly agreed that they were happy with the alternative pathway, they were confident in the therapist's assessment and knowledge and would engage with TAC again.

VALUE

By reducing unnecessary steps in the patient journey and providing earlier access to therapy, TAC results in a more effective and time-efficient care pathway. Trauma orthopaedic outpatient referrals and routine imaging are significantly reduced, with an estimated 2,030 clinic and x-ray appointments saved, resulting in significant financial savings to the hospital.

SUSTAINMENT

TAC has gradually developed from running once/week initially to five days/week over an eight-month period. This allowed for piloting of the pathway, continuous improvement in processes and the development of standard operating procedures with a view to sustained improvement.