



Smart triaging: the impact of multiple small interventions and inter-disciplinary collaboration on the Orthopaedic waiting list

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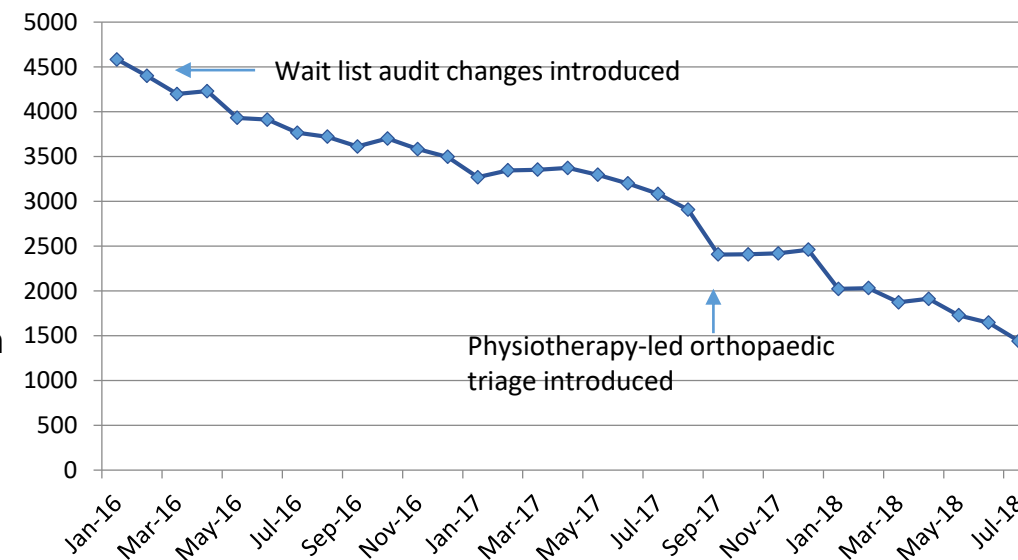
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Aims: Our primary aim was to reduce the Orthopaedic waiting list by 1,000 patients. Secondary aims were to implement standardised evidence-based triaging, increase patient access to appropriate care and reduce the failure to attend rate.

Methods: Wait list audit and appointment making processes were altered in stages from January 2016 to ensure patients to ensure timely appointments where required. The AMP and Orthopaedic teams jointly developed standardised evidence-based triage guidelines and these were implemented in July 2017. Patients with clear potential for evidence-based surgical intervention were prioritised and inappropriate referrals rejected. Double triaging (orthopaedics and physiotherapy) was eliminated for approximately 90% of referrals.

Results:

- Reduction of the extended Orthopaedic waiting list by two-thirds or around 3,000 people,
- Longest waiting time for Orthopaedic assessment reduced by 86%, from approximately 9 years to 15 months.
- Wait time to a new assessment in the physiotherapy-led Orthopaedic screening clinic reduced by 75% to around 12 weeks.
- Approximately 50 hours of Orthopaedic surgeon time was saved through reduced triage time.
- Orthopaedic screening clinic cancellation and failure to attend rates reduced by 50% and 25% respectively.



Significance of the findings to allied health:

Collaboration between the AMP and Orthopaedic teams dramatically reduced the Orthopaedic waiting list and increased patient access to appropriate care within current staffing levels. These results demonstrate the impact of combining small process changes with targeted physiotherapy-led orthopaedic triage and hold potential for other oversubscribed surgical specialties.

