

## Patient satisfaction with Physiotherapists is not inferior to Surgeons in an Arthroplasty Review Clinic

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### Introduction:

- Since 2003 593,803 hips and 717,334 knees have been replaced in Australia<sup>1</sup> and this number is expected to increase by 208% and 276% respectively by 2030<sup>2</sup>. The Australian Orthopaedic Association recommends that these patients be followed up regularly,<sup>3</sup> placing public outpatient services under increasing pressure.
- The Joint Replacement Clinic (JRC) is a substitution model of care at Mater Hospital Brisbane where advanced practice physiotherapists (APP's) substitute for surgeons in routine post-operative review following uncomplicated hip or knee arthroplasty. Similar models have been successfully implemented in the UK, Canada and parts of Australia.
- The JRC has proven to be safe and effective with over 1,200 occasions of service provided by APP's, less than 5% of those requiring additional review by surgeons and no adverse events (missed complications).
- Evaluation of patient satisfaction is an important contributor to Standard 2 of the National Safety and Quality Health Service standards relating to consumer engagement in Australian hospitals<sup>4</sup>, and once the JRC was consolidated an important next step was to evaluate this aspect of this model of care.

### Method:

**Participants** – the satisfaction of 50 JRC patients and 50 similar patients attending surgeon clinics were surveyed.

**Survey** – The modified 9 item Visit-Specific Satisfaction Instrument (VSQ-9)<sup>5</sup> has been standardised across different care settings to compare satisfaction between clinicians. Brief descriptions of the 9 items can be seen within the figure opposite.

Clinicians in the JRC and surgeon clinics were aware of the audit, but blinded to results.

**Analysis** - Sample means (SD) were calculated for each domain of the VSQ-9. Non-inferiority testing was performed using 95% confidence interval (CI) of the adjusted mean difference to examine whether normalised patient satisfaction scores in the JRC group were no worse than those in the surgeon group using a pre-specified non-inferiority margin of 5 units.

### Results:

- Both groups were highly satisfied (item 9 overall domain; 100% of both groups rated satisfaction as good-excellent).
- Based on average item score, there was strong evidence that the satisfaction of the JRC group was non-inferior to that of the surgeon group (the lower bound of the 95% CI of adjusted mean differences was above -5). See figure below.
- Individual item scores demonstrated satisfaction with the physiotherapist was non-inferior to the surgeon for all items bar item 1.

### Discussion:

- This study demonstrated that satisfaction of patients who attended a physiotherapist led arthroplasty review clinic was not inferior to those who attended traditional surgeon clinics. Moreover, in this sample, the mean differences in all items but 8 were in favour of the JRC, and item 8 was close to 0 (-0.17, 95% CI - 4.96,4.61).
- We were unable to demonstrate non-inferiority for phone contact; however this item was less relevant to our clinic as 19/50 and 24/50 patients responded as not applicable for physiotherapy and surgeon clinics respectively, and the CI's were large.

### Conclusion:

Patients are highly satisfied with, and accepting of, physiotherapists substituting for surgeons in their hip or knee replacement follow-up.

### References:

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3. Arthroplasty Society of Australia Position Statement on Follow-up of Joint Replacement Patients. From [https://test.aoa.org.au/docs/default-source/advocacy/asa-position-statement-follow-up-of-hip-and-knee-arthroplasty-october-2016b.pdf?sfvrsn=9668c404\\_6](https://test.aoa.org.au/docs/default-source/advocacy/asa-position-statement-follow-up-of-hip-and-knee-arthroplasty-october-2016b.pdf?sfvrsn=9668c404_6).
4. ACSQHC. (2012). "National Safety and Quality Health Service Standard 2: Partnering with Consumers. From <https://www.safetyandquality.gov.au/our-work/patient-and-consumer-centred-care/national-safety-and-quality-health-service-standard-2-partnering-with-consumers/>.
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