



# **Nova Scotia's Approach to Managing Joint Replacement**

Presentation to Taming of the Queue II

March 31, 2005

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# Top 3 Challenges

- Increasing demand for joint replacement
  - Obesity
  - Percentage of elderly
  - Osteoporosis rates
  - Incidence of falls
- Process of Care
  - Pre and post joint replacement care
  - Inter-relationships between DHAs in the province
    - policy
    - administrative
    - clinical
  - Availability of convalescence and rehab

# Top 3 Challenges

- Health Human Resources
  - Anesthesiologists
  - Appropriately trained OTs, PT and nurses throughout the province
  - Appropriate sub-specialties in orthopedics

# State of Evidence

- Consensus on target wait times for orthopedic services
  - Not benchmarks
  - Maximum wait time identified as 6 months
  - Based on the agreed upon method for priority rating of each patient
- Includes quality of life and functional status

# Impact

- Potential to set unrealistic expectations for the providers and the public
- Benchmarks may be too simplistic
  - Exclude other influencing factors in the process of care
- All joints are not created equal
  - Functional status and co-morbidity
  - Intervention may be too soon and expose patients to unnecessary risk

# Nova Scotia Strategies Managing Demand

- Prevention
  - Obesity
    - Healthy eating – primary and secondary prevention
    - Active lifestyles
  - Prevention of fractures
    - Osteoporosis
      - Calcium and Vitamin D supplementation – continuing care
      - Prevention of fractures
    - Falls
      - Provider education on the assessment and management
      - Inter-sectoral environmental focus

# Nova Scotia Strategies Service Delivery

- Planned Provincial Approach
- Review of 5 orthopedic programs and their interconnections
- Results
  - Policy development – process of care
  - Seamless continuum of care for patients requiring joint replacement
- One element of the NSDOH approach to shortening wait times