

Advanced Physiotherapy Practitioner Managing Acute Orthopaedic Injuries

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Background

Transformational change agenda in health and social care in Scotland calls for different models of care which means that historical boundaries between services and roles will become blurred. It states that Nurses, Midwives and Allied Health Professionals (NMAHPS) have had a key role in this providing programmes of work that drive improvements in population health, enhance quality and safety, and secure the best value from health and social care services which are needed to deliver this transformational change in service design.

One such way that this is being achieved is through pushing the traditional role boundaries in certain areas. Physiotherapy has been successful in working in advanced roles in Orthopaedics.

The Orthopaedic Service in Raigmore Hospital has 13 Consultants, 10 of which carry a trauma caseload which includes oncall. The patients received into A&E with orthopaedic injuries when these consultants are oncall traditionally were reviewed within the named Consultants return clinics.

These Consultant return clinics were audited from January to August 2016 and a number of patients were identified who, due to their conditions, could have been managed by someone other than an Orthopaedic Consultant.

Purpose

- Allow patients with certain conditions to be assessed and treated by a clinician who would provide appropriate and early advice.
- Allow patients to receive immediate and appropriate rehabilitation exercises following a period of immobilisation.
- Decrease the number of patients seen in Consultant return clinics and therefore improve efficiency and patient flow in out patient clinics.
- Provide flexibility within the Orthopaedic service for Consultants to manage their out patient caseload.
- Challenge the current medical led model on acute fracture management

Methodology

A business case was put forward to the Scottish Government by the Orthopaedic Service at Raigmore in October 2016, suggesting implementing a Physiotherapy run service managing the identified trauma related patients. This was agreed and money provided for 1 year. In February 2017 1 WTE Advanced Physiotherapy Practitioner was employed.

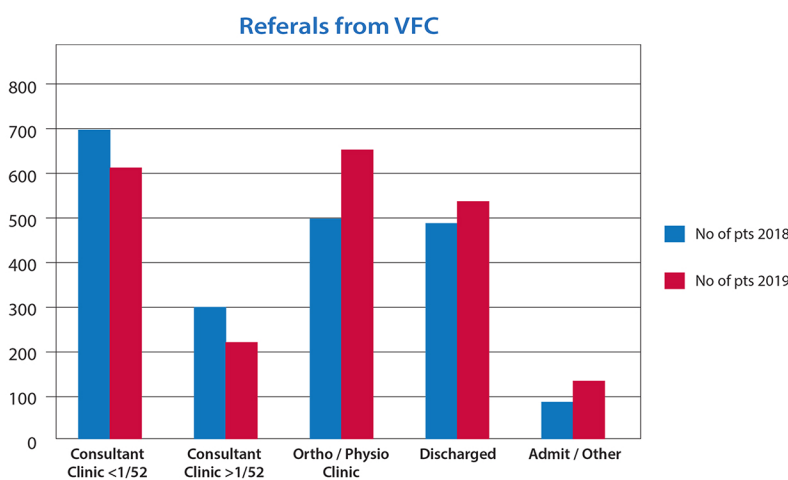
A masters module was completed by APP through the University of Hertfordshire in Interpretation of Trauma X-rays.

The APP continues to have monthly 1:1 sessions with an Orthopaedic Surgeon reviewing X-rays. The APP continues to attend the daily morning trauma meeting and VFC.

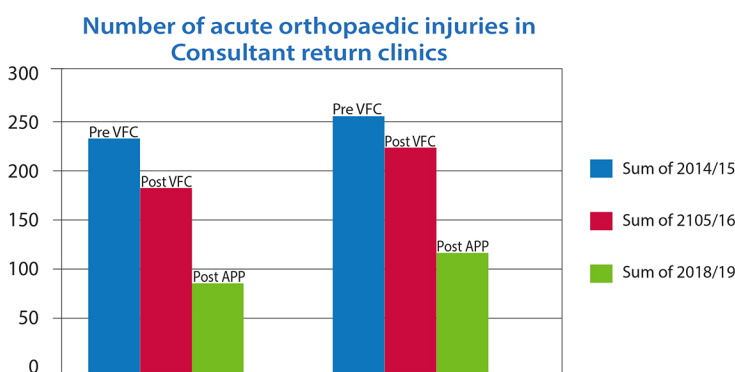
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Outcomes

This post was made permanent in June 2018



Clinics continue to be well populated and referrals to clinics continue to rise as confidence in the APP and evidence of the benefits of this service increases.



There has been a marked decrease in the number of patients which now populate consultant return clinics which have an AE or NEWAE code. Consultants have commented on the time they now have to spend with the more complex patients.

Patient in Consultant Led Trauma Clinic

There is also evidence that the number of patients seen in total across all Consultant TRAUMA clinics has decreased with both the introduction of VFC and the APP role.

This has allowed changes to job plan.

12 month period

26.10.14 - 25.10.15

860

26.10.14 - 25.10.16

580

26.10.18 - 25.10.19

375

Clinical Implication

The APP now successfully sees an independent caseload which has traditionally been managed by Orthopaedic Consultants. It is now an integral part of the Orthopaedic service within Raigmore. There are discussions and business cases being developed to add to the number of APPs within this post to ensure succession planning is in place as this is a service that will continue to run and develop.

It has also allowed the Orthopaedic Service to use the skills of an APP in different ways.

As well as running the regular fracture clinics the APP now runs stand alone Image Guided Hip Injection Clinics for patients which are listed by Orthopaedic Consultants. Again this is to allow Consultants to do other clinical duties.

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