THE EFFECTIVENESS OF A PHYSIOTHERAPY TRIAGE CLINIC IN PAEDIATRIC ORTHOPAEDICS

O Mir M.1,2, Cooney C.1, Kelly P.3, Noel J.3, Kiely P.3, Moore D.3

1 Physiotherapy Dept, Our Lady’s Children’s Hospital, Crumlin, Dublin, Ireland. 2 School of Public Health, Physiotherapy and Population Science, University College Dublin, Ireland. 3 Orthopaedic Dept, Our Lady’s Children’s Hospital, Crumlin, Dublin, Ireland

Introduction
The demand for paediatric orthopaedic care continues to grow and providing the service required is increasingly challenging. Physiotherapist-led Triage of adult orthopaedic patients has been shown to improve patient function and symptoms, reduce costs and waiting times and lead to an acceptable level of referral and diagnostic agreement.

The Physiotherapy Orthopaedic Triage Clinic (POTC) was established in Our Lady’s Children’s Hospital Crumlin (OLCHC) in January 2011, in response to growing demands on the paediatric orthopaedic service and rapidly expanding waiting lists. The clinic is run by Clinical Specialist Physiotherapists working in an extended scope (ESP) role. It is the first paediatric orthopaedic clinic of its type and scale in the Republic of Ireland.

Purpose
The purpose of the study is to evaluate the effectiveness of the service over a three year period, from January 2011 to December 2013, in terms of:
- Reduction in patient wait times
- Patient management outcomes

Participants
All elective orthopaedic patients who were offered an appointment with POTC between Jan 2011 and Dec 2013 were included. 2650 patients recorded between Jan 2011 and Dec 2013.

Methods
This is a single site longitudinal prospective cohort study. A prospective database was created in order to record the following variables:
- DOB
- Date of referral
- Date of initial appointment offered
- Referring Diagnosis
- Triage Diagnosis
- Outcome

Data cleaning was performed and missing data was retrieved from the hospital PAS.

Results
2650 patients were managed between January 2011 and December 2013. Patients were aged between 0-18 years of age (mean 6.4 years ± SD 4.5 years). 55.2% of patients were aged 5 years and under. 1406 (53.1%) were male and 1244 (46.9%) were female. DNA rate was 23.5% (622).

Diagnosis after triage assessment

Analysis of normal variant population in terms of diagnosis and outcome

Normal Variant Outcomes
- Pes Planus
- Internal Tibial Torsion
- Femoral Antversion
- Genu valgum
- Genu varum

Normal Variant Frequencies
- 25%
- 10%
- 5%
- 33%
- 4%

Reduction in mean wait time (weeks)

Discussion
Currently normal variants constitute 22.5-50% of elective referrals to paediatric orthopaedists. This is a patient group that can be managed very successfully with advice only and do not require follow up.

- 77% of the POTC clinic patients were managed without direct consultant intervention.
- 96% of normal variant referrals were managed independently.

Mean wait times were reduced from 102 weeks to 15 weeks over a 3 year period.

This has resulted in the more urgent, complex patients being able to access specialist opinion in a more timely manner.

The success of the clinic has widespread implications for the management of routine non-elective referrals to paediatric orthopaedic specialist centres, whilst highlighting the importance of the current development of the Extended Scope Physiotherapist (ESP) role in Ireland. Previous research in ESP efficacy has focused on the adult population with only 1 previous study evaluating the role in paediatrics.

This study supports the position that the ESP role is a valuable adjunct to the orthopaedic team in managing elective paediatric orthopaedic referrals.

References

Acknowledgements
Ethical approval for this study has been granted by Our Lady’s Children’s Hospital Ethics (Medical Research) Committee. Many thanks to the CPP group of the ISCP for bursary funding towards attendance at the WCPT

Presented at the WCPT Congress 2015, Singapore

Contact details
marie.mir@olchc.ie