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The impact of an Advanced Scope-Physiotherapy model of care on patients with spine-related pain

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Background

Early identification of nerve lesions and associated neuropathic pain in spine-related pain disorders is important for tailored treatment. Management may consist of surgical intervention for compressive neural lesions.

With a growing waitlist for public surgical outpatient clinics in Western Australia and wait times exceeding the recommended wait time for initial assessment (Category 1 – assessment within 1 months, Category 2 within 3 months, Category 3 within 12 months), a call to support new models of care has been made[1], including the evaluation and expansion of workforce models supporting advanced skills in allied health.[1]

An Advanced Scope Physiotherapy (ASP) led Neurosurgery Spinal Clinic operates at Sir Charles Gairdner Hospital in Western Australia.

The ASPs (2FTE)

- examine patients from the neurosurgery waitlist for their suitability for spinal surgery;
- provide recommendations of either further investigation and possible assessment by a neurosurgeon or appropriate non-surgical management of the patients' pain condition.
- Patient assessment is conducted either 'in person' at the hospital or via telehealth due to the remoteness of some rural patients.
- ASPs work autonomously.
- Weekly meetings with a Consultant Neurosurgeon to discuss patient cases

Aim

The aim of this project was to evaluate the ASP service in the year 2022.

Method

A retrospective descriptive analysis of patient data captured in 2022

Results

In 2022, 1337 new patient referrals were managed plus 267 follow-ups from the previous year (Figure 1).

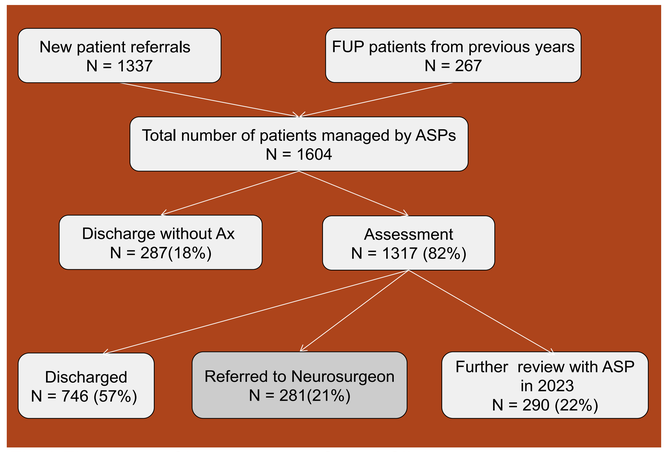

Fig.1 Flowchart of Neurosurgery Spinal Clinic outcomes pathway 2022

Category 1 patients (n=81) waited on average 31 days for their first appointment, Category 2 patients (n=394) waited 76 days and Category 3 patients (n=854) waited 376 days.

For the 229 patients seen by the Consultant Neurosurgeons in 2022, the conversion rate to surgery of this cohort was 45% (Figure 2).

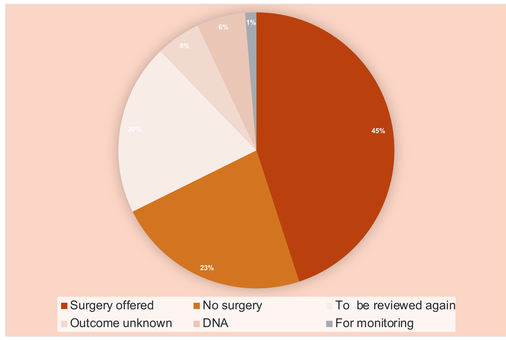

Fig.2 Outcome of ASP patients seen by Neurosurgeons

Conclusion

Of the 1604 patients managed in the Neurosurgery Spinal Clinic, only 17% needed to see a neurosurgeon.
The conversion rate to surgery of 45% is higher compared to an estimated 5%-10% in a non-triaged clinic.

The ASP model of care has proved invaluable to

- provide access of patient care within the recommended wait times,
- optimize neurosurgeons' time,
- educate patients and, in case of non-suitability for surgery, advise and refer them for alternative appropriate management.

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The authors declare no conflict of interest.

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[1]Sustainable Health Review (2019). Sustainable Health Review: Final report to the Western Australian Government of Health, Western Australia

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