

CHI Learning & Development System (CHILD)

Project Title

Superior Outcomes in Total Knee Replacement Value Driven Outcomes (VDO) Project

Project Lead and Members

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Project members: Asst Prof Wang Lushun, Dr Ashish R.Satapathy, Fione Gun, Cheong

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Organisation(s) Involved

Ng Teng Fong General Hospital, Jurong Community Hospital

Healthcare Family Group(s) Involved in this Project

Medical, Healthcare Administration

Applicable Specialty or Discipline

Orthopaedic Surgery, Clinical Research

Project Period

Start date: 2020

Aims

This study aims to assess and determine the impacts of various improvement plans on clinical outcomes and costs following TKR VDO Project implementation.

Background

See poster appended / below

Methods

See poster appended / below



CHI Learning & Development System (CHILD)

Results

See poster appended / below

Lessons Learnt

• The superior outcomes in TKR VDO Project have shown improved, sustained

effective based-care in TKR surgery.

• Strong leaderships, support from multidisciplinary care team, standardised care

processes and a robust NGEMR TKR Clinical Pathway are key success factors of TKR

VDO Project.

Conclusion

See poster appended / below

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Value Based

Care

Keywords

Total Knee Replacement Surgery, Clinical Quality Indicators

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SUPERIOR OUTCOMES IN TOTAL KNEE REPLACEMENT VALUE DRIVEN OUTCOMES (VDO) PROJECT

MEMBERS: ASST PROF PHILIP MCGRAW, ASST PROF WANG LUSHUN, DR ASHISH R.SATAPATHY, FIONE GUN, CHEONG SIEW JING, TANG MIN YEE, JOYCE ONG, ZARINA AHMAD, A/PROF FAREED KAGDA (SPONSOR)

SAFETY
QUALITY

PATIENT

EXPERIENCE PRODUCTIVITY

Y COST

Define Problem, Set Aim

Opportunity for Improvement

Total Knee Replacement ("TKR") surgery has become one of the most successful surgical interventions; providing substantial pain relief and functional improvement in patients suffering with knee arthritis [10].

With the transformation to value-based health care being a key strategic priority in NUHS, the Department of Orthopaedic Surgery has embarked on TKR VDO project since 2017 by delivering value-based care with enduring results, at reasonable costs.

Reference:
Yong, E. L., Ganesan, G., Kramer, M. S., Logan, S., Lau, T. C., Cauley, J. A., & Tan, K. B. (2019). Hip fractures in Singapore: ethnic differences and temporal trends in the new millennium. Osteoporosis International, 30(4), 879-886.

Aim

This study aims to assess and determine the impacts of various improvement plans on clinical outcomes and costs following TKR VDO Project implementation.

Establish Measures

Baseline Performance

Baseline all-or-none composite "Clinical Quality Index (CQI)", in addition to "Mean Costs" were extracted retrospectively between January 2016 to December 2020 on monthly basis, and thereafter tracked and monitored on monthly basis.

The 7 clinical quality indicators are:

1.	Length of Stay (LOS) ≤ 5 days	4.	DVT Prophylaxis Within Episode
2.	(No) Blood Transfusion	5.	(No) Post-op Complication ≤ 30 days
3.	(No) Inpatient Mortality	6.	(No) 30-Day Readmission (All Cause)
7		7	(No) Unplanned Return to OT Within the Same Enisode

Patient Cohort

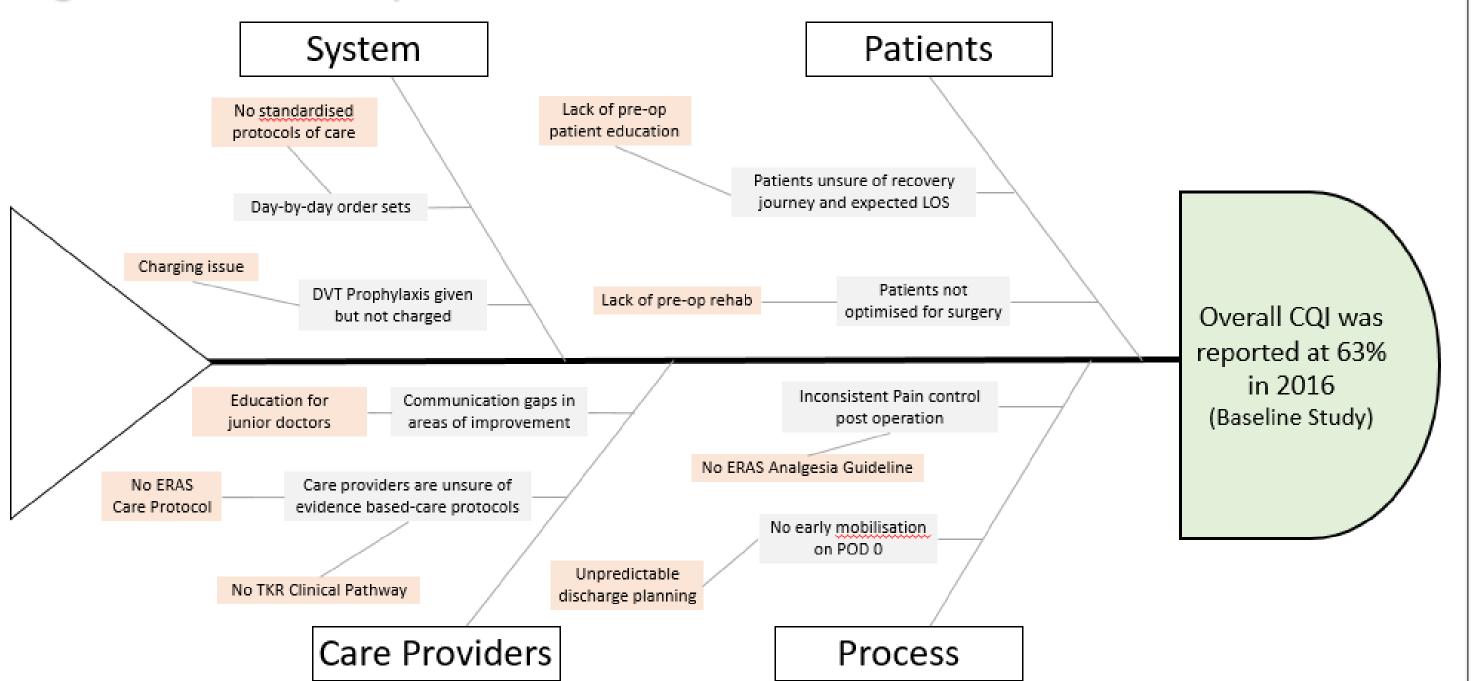
A total of 863 patients were enrolled in the TKR VDO study from 2017 to 2020.

		2016	2017	2018	2019	2020	
No of Patients *Covid-19 pandemic		193	265	256	192	150*	
Age		66.5±8.2	66.4±7.8	66.4±7.8	66.4±7.8 66.9±7.6		
Gender	Female	124	171	167	123	88	
	Male	69	94	89	69	62	

Analyse Problem

Root Cause Analysis

Targeted areas of improvement were:



Acknowledgements

The authors would like to thank the contributions of the multidisciplinary team in the success of TKR surgery, without whom this would not have been possible.

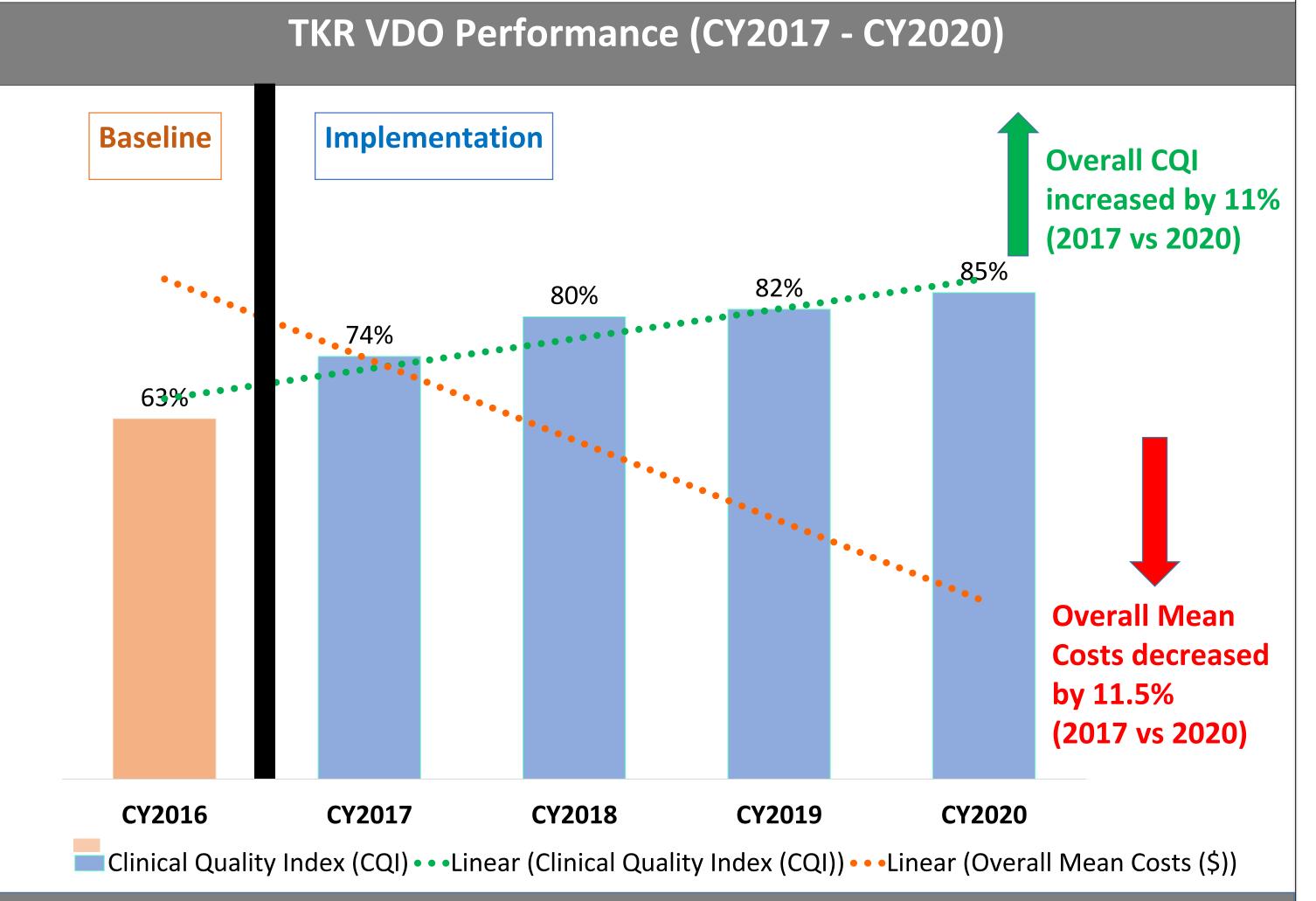




Test & Implement Changes

Cycl	e Plan	D	0	Study		Act	
1.	Compare VDO performance before and after TKR Pathway implementation	Implementation and enhancement of NGEMR TKR Clinical Pathway		Improvement in performance and deceased in variance		Standardised protocol of care and on-going education for junior doctors	
2.	Compare calf pumps administration and charging	Reminders to providers	o care	Improvement in charging		Regular monitoring on charging	
3.	Compare implants and consumable costs	GPO contractimplants and consumables	d revision of	Improvement in costs		Costs monitoring and deep dive into costs analysis	
4.	Standardised Perioperative phases of care	Implementation of TKR ERAS Protocol in TKR surgery		Improvement in patient outcomes and costs		Regular monitoring of performance	
No	Clinical Quality Indicato	2016	2017	2018	2019	2020	
			(n=193)	(n=265)	(n=256)	(n=192)	(n=150)
1.	Length of Stay (LOS) ≤ 5	76%	85%	90%	90%	96%	
2.	DVT Prophylaxis Within I	93%	97%	97%	97%	97%	
3.	(No) Blood Transfusion	92%	92%	93%	98%	95%	
4.	(No) Unplanned Return to Within the Same Episode	99%	100%	100%	100%	100%	
	(No) Post-op Complication days	94%	94%	96%	95%	91%	
6.	(No) 30-Day Readmission	94%	97%	98%	97%	99	
7.	(No) Inpatient Mortality	100%	100%	100%	100%	100%	

Comparing performance before and after TKR VDO implementation, Overall Mean CQI increased and Overall Mean Costs decreased year-on-year. There were no cases of mortality or unplanned return to the operating theatre.



Comparing 2017 to 2020, the **Overall CQI improved by 11%** with **Overall Mean Costs decreased by 11.5%**.

Spread Changes, Learning Points

Spread Change

- Educating and familiarising doctors with the benefits of standardised care protocols that improves team communication and expectation.
- Using NGEMR TKR Clinical Pathway as a powerful tool to facilitate and coordinate care amongst multi-disciplinary team.
- Emphasising on effective value-based care through TKR VDO Project that improves patient outcomes and satisfaction.

Learning Points

- The superior outcomes in TKR VDO Project have shown improved, sustained effective based-care in TKR surgery.
- Strong leaderships, support from multidisciplinary care team, standardised care processes and a robust NGEMR TKR Clinical Pathway are key success factors of TKR VDO Project.