



NORTH YORK GENERAL

Making a World of Difference

Finding meaning in experience with a hip and knee patient navigator

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Objectives

1. To define the role of the patient navigator in the context of hip and knee replacement surgery
2. To review recent findings from research project and implications for future practice



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Disclosures

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Background

- Acute care community hospital with over 450 inpatient beds
- Aging population: the 65+ age category is projected to increase by 57% over the next 10 years
- 36 beds on orthopaedic inpatient unit
- 1350 joints in fiscal year 2016/17
- Also a major center for hip fractures, shoulder arthroplasty, ankle and feet surgeries



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Key Issues Identified

Patient Challenges

- Feeling unsupported or lost in the system
- Unsure who to call for questions
- Unique patient's journey
- Requires high coordination effort- often left to patient, family, or family doctor

Organization/System Challenges

- Work in silos resulting in fragmented care
- Patients are becoming more complex & with more co-morbidities
- High costs
- Repeat visits to the emergency room



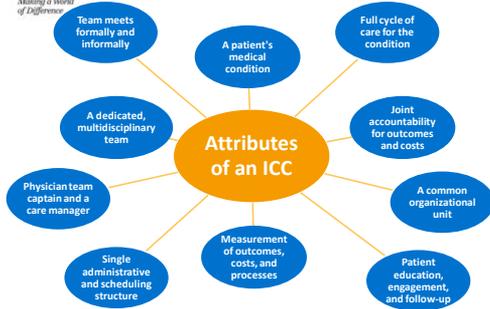
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Looking at health care integration from the unique **vantage of patients**, our hospital strategically prioritized implementation of an **Integrated Care Collaborative (ICC) model**



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Vision: Excellent patient experience and outcomes through seamless, integrated hip and knee joint replacement

- 3 Key Objectives:
1. Integration
 2. Informing and engaging
 3. Standardized processes/paths



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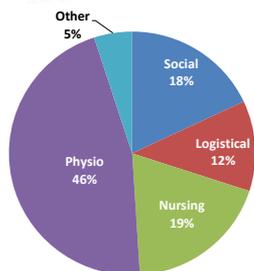
Patient Navigator Support

- Began April 2013
- New role for non-cancer
- Clinical Nurse Specialist (CNS)
- Available as a resource to patients *throughout care continuum*
- Referral criteria or self-referrals
- Mostly consult with patients pre-operatively
- Meet all patients in preop clinic

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Types of Concerns (Q3 FY16/17)



n= 156

- Examples:**
- **Social:** lives alone, arranging respite and other services
 - **Logistical:** education, general info
 - **Nursing:** incision, swelling, pain post-operatively
 - **Physio:** making post-operative arrangements
 - **Other:** equipment related, arranging transportation

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Key Outcomes

- Approx. 1100 hip and knee joint replacements in FY11/12
- Approx. 1350 hip and knee joint replacements in FY12/13
- **30% more patients discharged home**, resulting in savings of \$989,000
- Average length of stay: **3.3 days** (22% lower than provincial target)
- **83% of patients** discharged directly home
- Patient navigator sees **100% of at risk patient referrals**
- Patient navigator has provided support to nearly **50% of cases** this year

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Research

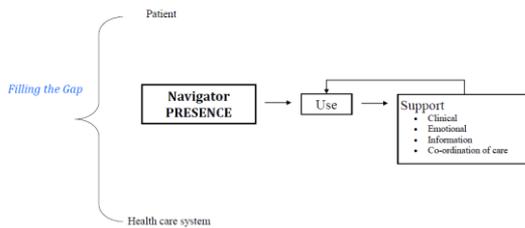
Qualitative research project

- “Finding meaning in experience with a hip and knee patient navigator”
- Began recruiting in November 2015 and continued until data saturation achieved
- Total of 16 patients in sample
- Semi-structured interviews with patients
- Currently writing up project for publication

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Code mapping



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Support

- Clinical: navigator utilized nursing skills
 - “I didn’t know if I should be concerned of the symptoms I had ... so I spoke to [the navigator]”
- Emotional: relational skills
 - “[The navigator] was very good at calming me down”
- Information: general inquiries
 - “I had some general questions, especially about physio”
- Co-ordination of Care: eliminating barriers to care
 - “I needed help to set up [accessible] transportation and I called her and she was so helpful”

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Quotes from research study

“It gave you that security that you can always call someone when you weren’t sure what to do”

“I don’t know who I would have called at that time”

“easy access for information”

“it really helps cut down on uncertainty”



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Implications

- New visual representation of patient navigation
- First study in orthopaedics
- Multiple benefits to patients
- Patient navigation can be beneficial to other non-cancer diagnoses
- Future research: If patient navigator support impacts outcomes

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Thank You!

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