



DETERMINANTS OF PATIENTS' REFERRAL CHOICE

**Presented by
Barbara Conner-Spady
University of Calgary**

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RESEARCH TEAM

- Deborah Marshall, Eric Bohm, Lynda Loucks, Michael Dunbar, Allan Hennigar, Tom Noseworthy
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CBC: MEDICAL PROCEDURE WAIT TIMES CHANGE LITTLE IN 2011

- **Study says 8 in 10 Canadians receive treatments within recommended time frame**
- **However, certain procedures, such as knee replacements, have seen their wait times grow since the last report, with 75 per cent of patients receiving timely care in 2011 versus the 79 per cent figure in 2010.**



STUDY BACKGROUND AND RATIONALE

- Strategies to reduce waiting times: wait time guarantees, priority setting, patient choice of hospital
- 2006 Report of the Federal Advisor on Wait Times recommended the use of ‘Single common waiting lists’
- Gaps in research: patient acceptability of single common waiting lists for TJR



SINGLE COMMON WAITING LISTS

- Surgeon waiting lists pooled; patients treated by next available surgeon
- Centralized intake/single point of entry
- Triage/Screening
- Examples - Calgary, Edmonton, Toronto
- Referral form - options



RESEARCH QUESTIONS

- What are the factors associated with patients' requests for a particular surgeon for joint replacement surgery?
- What are the patient determinants of the actual referral option: i.e., next available vs. a specific surgeon?



METHODS

- 7 Focus groups: Winnipeg, Halifax, Toronto, Calgary
- Develop and pretest a patient questionnaire
- Pilot



FOCUS GROUP FACTORS IMPORTANT TO PATIENT CHOICE OF SURGEON

- Severity of pain and its impact on mobility and quality of life
- Reputation of surgeon & hospital or clinic
- Confidence/trust in the surgeon
- Recommendation of their family doctor (GP)
- Location close to home



PATIENT QUESTIONNAIRE -1

○ Patient experience

- Did you ask your family doctor to refer you to a particular surgeon?
- When your family doctor referred you to a surgeon, did you discuss with your family doctor which surgeon to see?
- Did you have a preference for a particular hospital?
- Did your family doctor tell you how long you would likely have to wait for your visit with the surgeon/ and for surgery after meeting with the surgeon?



PATIENT QUESTIONNAIRE - 2

- Importance (5-pt scale Not/Extremely Important)
 - That you have your choice of surgeon
 - Surgeon reputation
 - Hospital reputation
 - Waiting time to see the surgeon
 - Waiting time from surgeon visit to surgery
 - Travel time to hospital
 - The ability of your family to travel or be with you if you need to travel for surgery
 - Family doctor's advice about which surgeon to see



PATIENT QUESTIONNAIRE - 3

- Health-related quality of life (HRQL)
 - Oxford12 (0 – 48) 48 = best outcome, least symptoms
 - SF-12 (0 – 100) 100 = best HRQL
 - Physical Health
 - Mental Health
 - EQ-5D (-0.59 – 1) 1 = best health imaginable
 - Pain - Visual Analogue Scale (0 – 100) 100 = no pain



PATIENT QUESTIONNAIRE - 4

○ Demographics

- Age
- Sex
- Marital status
- Living arrangement
- Education
- Work status
- Household income
 - <\$30,000
 - \$30,000 - \$59,999
 - \$60,000 - \$89,999
 - \$90,000 or more



METHODS

- Questionnaire mailed to 304 consecutive patients referred for hip or knee replacement surgery to:
 - The Concordia Joint Replacement Group – Winnipeg (4 surgeons)
 - The QE11 Health Sciences Centre – Halifax (8 surgeons)
- 2 week reminder & 4 week repeat survey to non-responders





Winnipeg Regional Health Authority Office régional de la santé de Winnipeg

Lower Extremity Arthroplasty Consultation Request Form

Instructions:

To facilitate prompt and appropriate assessment/consultation of your patient by an orthopaedic surgeon, please:

- 1. Complete this form and provide all requested information.
- 2. **Sign and Date** the bottom of the second page
- 3. Fax form and radiology report to appropriate fax number (see attached directory)

231-1432

NB: CONTACT SURGEON DIRECTLY IF THIS IS AN EMERGENCY

Consult directed to:

Next available surgeon

Specific Surgeon: _____



RESULTS

- n of 172 - Winnipeg (90/150) Halifax (82/154)
- Response Rate 57%
- 51% city, 10% rural, 38% other towns/cities
- No sig. difference age, sex, joint, location in responders vs. non-responders



PATIENT CHARACTERISTICS

- 60% female, 64% knee, mean age 65 years (SD 11), 14% previous TJR
- 63% post-secondary education; 35% employed
- Marital status: 70% married/partner
- Living: 77% lived with spouse/other
- Household income: 27% <\$30,000, 18% \$90,000+

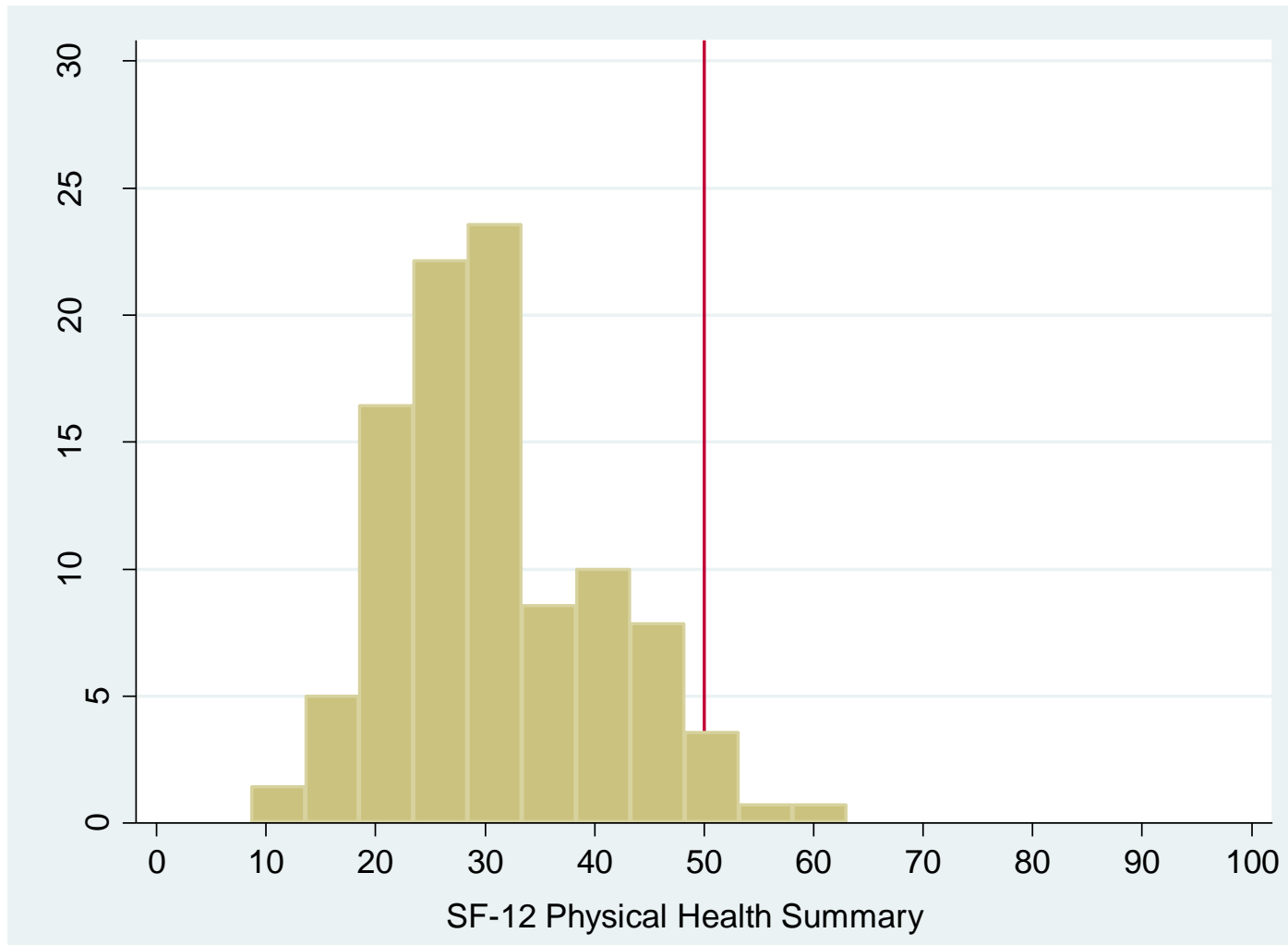


RESULTS

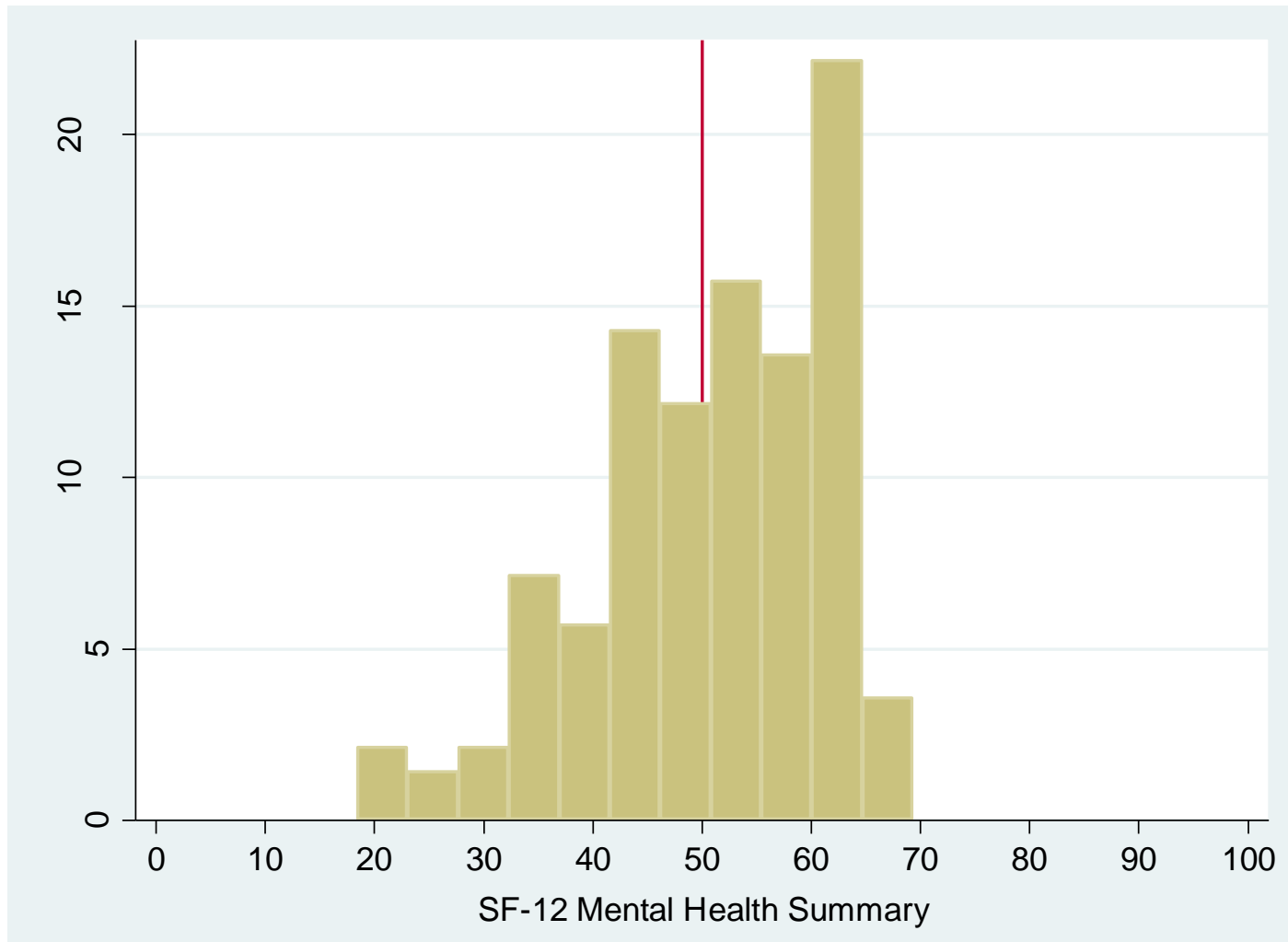
- Referral form:
 - 71% Named surgeon
 - 29% Next available surgeon
- 43% asked GP to refer to a particular surgeon
- 46% discussed with GP which surgeon to see
- 36% were told by GP – likely WT to surgeon visit
- 41% preference for a particular hospital
- 83% lived 1 hour or less by car from hospital



QUALITY OF LIFE PHYSICAL HEALTH

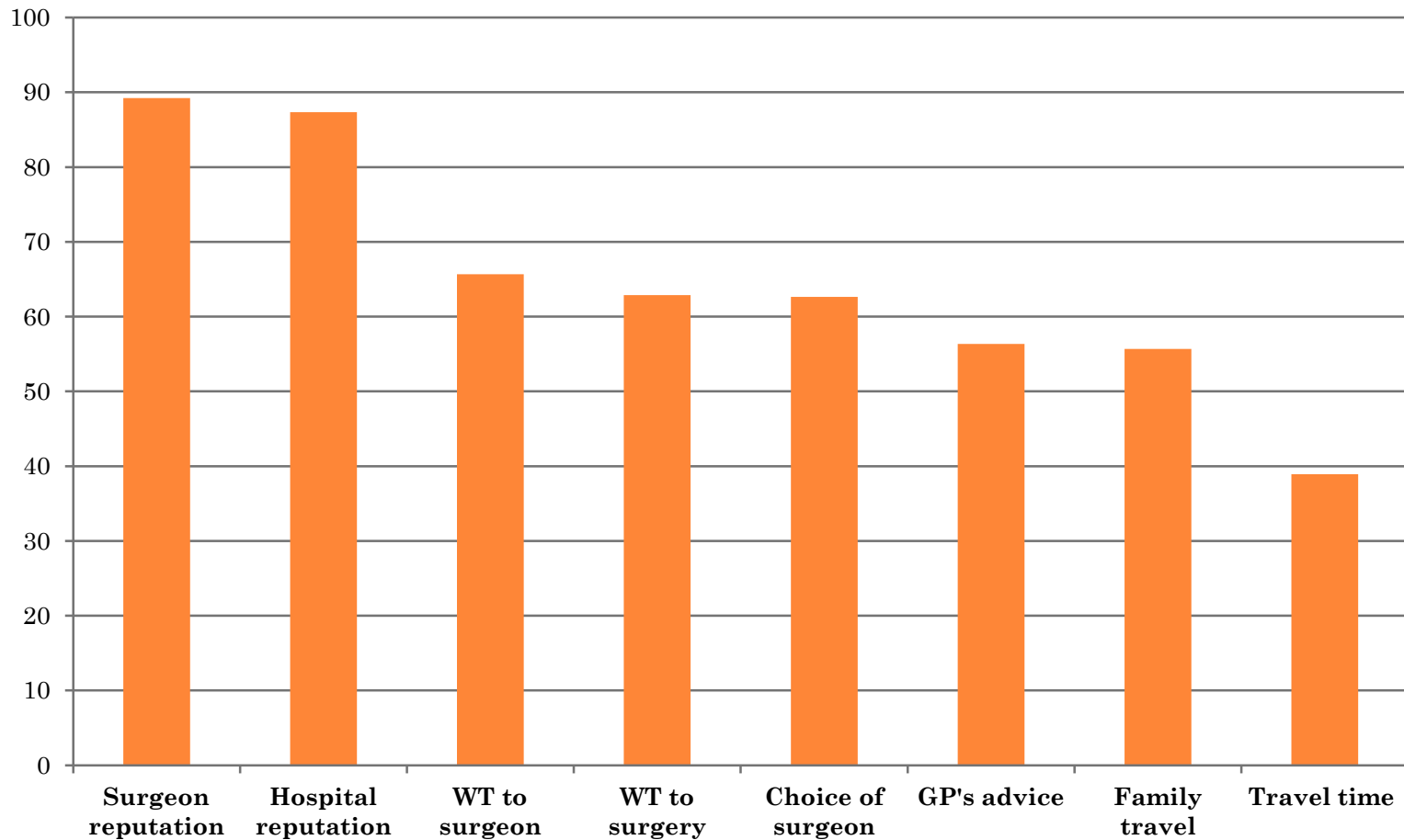


QUALITY OF LIFE MENTAL HEALTH

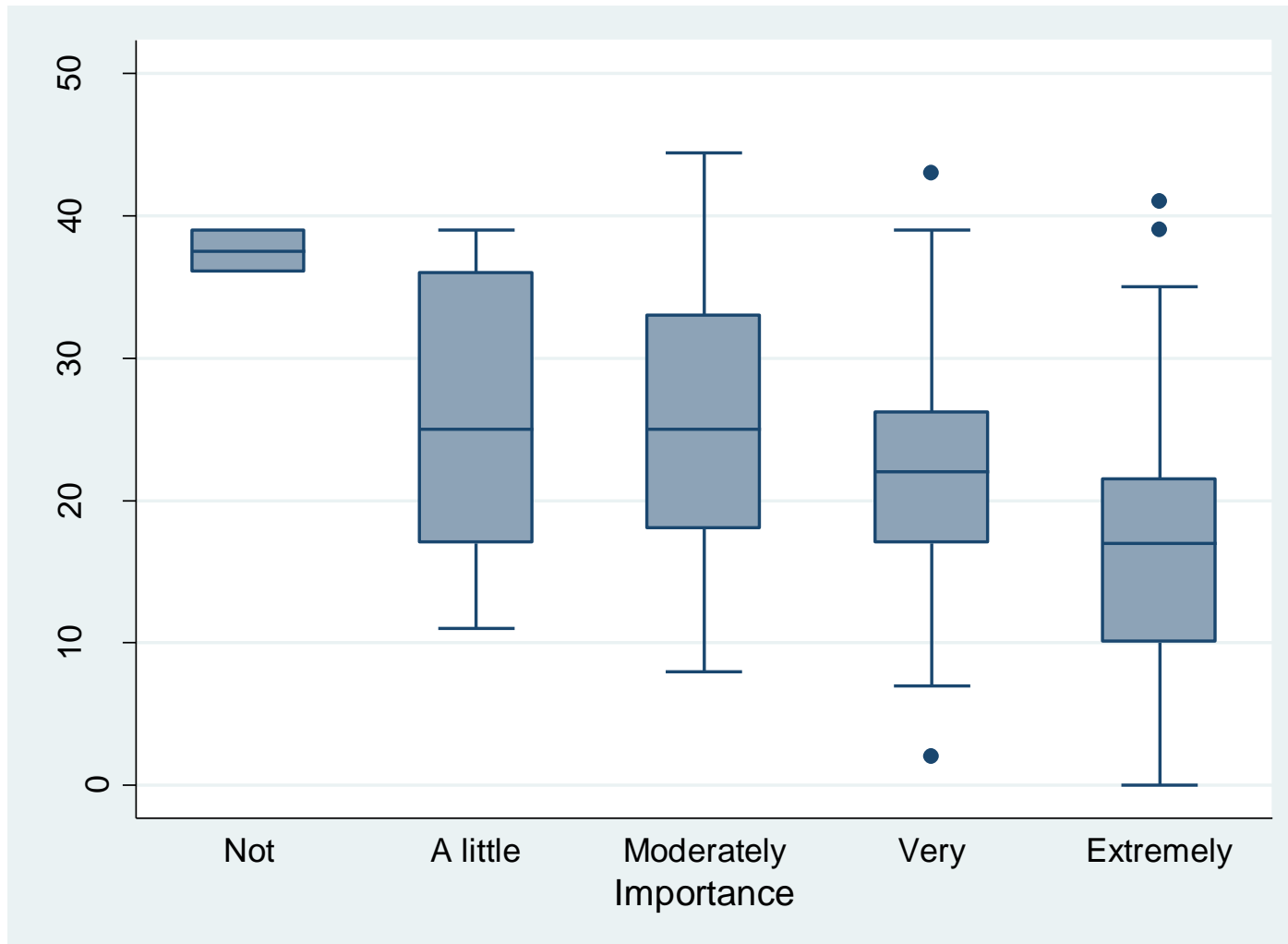


IMPORTANCE 5 POINT SCALE

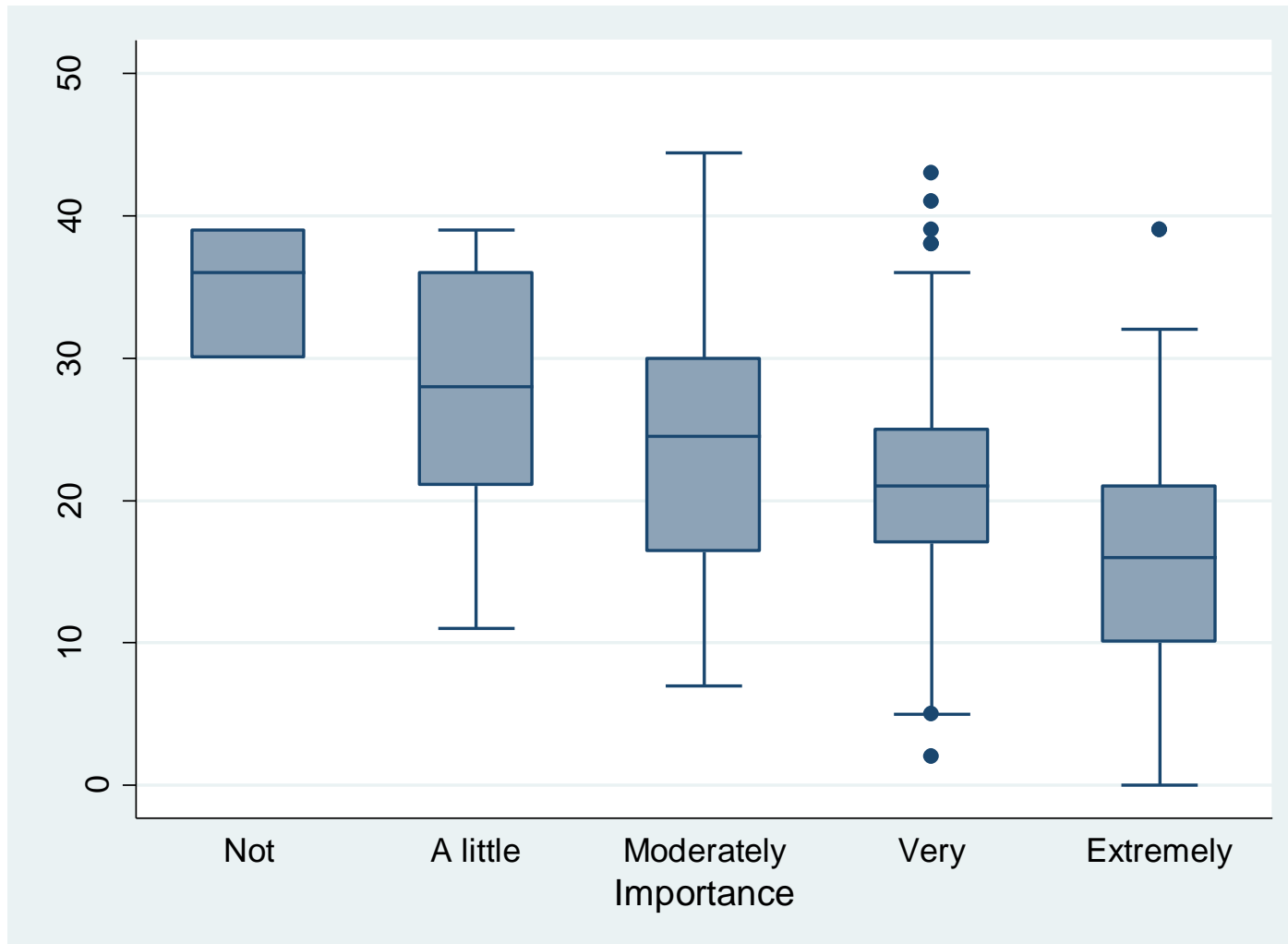
Percent very/extremely important



OXFORD12 AND THE IMPORTANCE OF WAITING TIME TO SEE THE SURGEON



OXFORD12 AND THE IMPORTANCE OF WAITING TIME TO SURGERY



DETERMINANTS OF PATIENT REQUEST FOR A PARTICULAR SURGEON

Variables	OR	95% CI	
Sex	1.7	0.8	3.5
Age	1.0	1.0	1.1
Income*			
\$30-59,999	2.6	1.1	6.5
\$60-89,999	4.0	1.3	11.9
\$90,000+	10.4	3.2	33.3

*Income reference group <\$30,000

Adjusted odds ratios (OR) for logistic regression model of the determinants of patients' likelihood to ask for a particular surgeon



DETERMINANTS OF REFERRAL OPTION (NAMED SURGEON VS. NEXT AVAILABLE)

Variables	OR	95% CI	
Sex	0.5	0.2	1.4
Age	1.0	1.0	1.0
Importance of patient choice *	4.0	1.7	9.7
SF-12 Physical Summary**	1.5	1.0	2.2

*Extremely/very important (1) vs. other (0)

**SF-12 Grouped by quartiles: Higher = better QOL

Adjusted odds ratios (OR) for logistic regression model of the determinants of referral to a named surgeon



SUMMARY

- 63% rated their choice of surgeon and waiting time to surgery as very/extremely important.
- 46% discussed with GP which surgeon to see.
- 89% rated surgeon reputation as very/extremely important.
- Patients with higher incomes are more likely to ask for referral to a particular surgeon.
- Better QOL and greater importance of surgeon choice are significant determinants of referral to a named surgeon vs. next available surgeon.



IMPLICATIONS

- Patient choice of surgeon - important option in implementing single entry models for TJR
- Are patients aware of their choices for referral?
- Do patients have sufficient information to make informed choices for referral?



PATIENT CHOICE

- *'To me, it's too impersonal. I only get one life and I don't get a lot of choices. I'm not letting someone else who doesn't care what my name is because I'm just the next in line make my choices for me.'*

