INTRODUCTION

A critical component of evidence-based medicine is the incorporation of outcome measurement (OM) into both clinical practice and program evaluation. Standardized, valid, reliable, sensitive and specific outcome measures are important tools to assess patient status, guide progression of treatment and assess effectiveness of interventions/programs. Despite reported support for the use of outcome measurement, particularly in high incidence patient population (such as in Total Joint Arthroplasty [TJA]), there is no reliable data source on the current utilization of outcome measurement. The TJAOM initiative is a compilation of unique and complementary projects designed to address the following objectives:

(1) establish a baseline of current utilization of OM in TJA care
(2) document clinician identified barriers and solutions to use of OM in TJA care
(3) develop learning resources and tools necessary to facilitate use of OM in TJA care
(4) disseminate and implement the learning resources and tools using the information from objectives #1 and #2 in conjunction with evidence from implementation science
1. Baseline
A. Chart audit (TKAOM)
   VCH Research Institute Program Evaluation Course
   The TKAOM team (Phil Lawrence, Susan Carr, Tracey Wong, Fatima Inglis and Greg Noonan) undertook a chart audit to determine what PTs in prehabilitation, inpatient, outpatient, rehabilitation and private practice settings document regarding their use of outcome measures in total knee arthroplasty. The completed report on their findings is available on the UBC Dept of PT and PABC websites.

B. Survey
   The Provincial Rehabilitation Advisory Group (PRAG) Sub-committee on Outcome Measures (Dave Troughton, Catherine McAuley, Marie Westby, Ronda Field, Irene Goodis, Marisa Twaites, Maureen Duggan, Melissa Idle, Rubyanne Meda, Stan Metcalfe and Wendy Watson) completed an inventory of OM suitable for the TJA population from pre-operative to post-operative stages. The identified OMs were evaluated according to the following characteristics: reliable, valid, applicable across the continuum of care, minimal ceiling and floor effects, include an element of assessment of function; assists care decision making, responsive to change, requires little time to administer and no or minimal cost for completion. The selected OMs were summarized into an inventory for clinician. It was formatted into a questionnaire for the purpose of distributing as a survey to determine what BC PTs report about their use of OM in TJA. The survey was undertaken by a unique combination of the PRAG Subcommittee on Outcome Measures, Dr. Darlene Reid and a group of UBC MPT students (Lauren Welch, Belinda Wagner, Drey Voros, Danielle Balik and Veronica Naing). The statistical analysis is complete and the group is now preparing 3-4 articles for publication.

2. Focus Group - Barriers and solutions
   MSc project: Clinician identified barriers and solutions for OM in TJA. The selection of the implementation strategies will be informed by an MSc project identifying the barriers and solutions to OM utilization in TJA. This project was undertaken as partial fulfillment of an online UBC Masters program by VCH CSI Physical Therapist (Maureen Duggan). The completed report will be available shortly on the UBC Dept of PT and PABC websites.

3. Development of learning resources and tools
   The information from the (1) chart audit, (2) survey and (3) focus group will be incorporated with (4) information presented in a presentation (“Outcome measurement – How, What, When and Why” by Al Kozlowski, Marie Westby and Alison Hoens) at The Inter-regional Orthopaedic Working Group Forum (held Oct 15.09) into the development of learning resources and tools which will facilitate use of OMs in TJA. These will be posted on the UBC Dept of PT and PABC websites.

*Presentations on this project were provided at both the CPA National Physiotherapy Congresses in 2010 and for the upcoming Congress in 2011.