

Improving Experience of Virtual Rehab for Patients after Knee Replacement

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OBJECTIVES:

1. To explore current challenges with virtual rehab and to identify potential contributors for successful adoption of virtual rehab for patients after knee replacement.
2. To track the frequency of most common challenges patients were experiencing during Virtual rehab classes, in order to develop mitigation strategies to decrease the number of sessions impacted by time spent on virtual care use challenges.

ABSTRACT

Traditionally, in-person supervised rehabilitation has been the standard of care following total knee arthroplasty (TKA). **During pandemic restrictions**, our ability to offer in person postoperative treatment to our patients after knee replacement at the Holland Centre was significantly impacted. Thus, **quick adaptation was needed in order to expand our rehabilitation services and provide reliable access to care.**

Technology such as **Zoom provided us with an opportunity to deliver quality care to patients within the comfort of their home**, while keeping them safe. Although virtual care was becoming a standard of care at the Holland Centre, it also had its own unique challenges that patients and rehabilitation team were confronting. **To better understand the patient' perspective and address their needs**; we modified an existing patient virtual care experience survey (developed by AFHTO), in collaboration with our patients and patient partners with an aim to develop mitigation strategies and provide patient focused care. Patient-related outcomes were: Patient Specific Functional Scale (PSFS) and P4-pain scale. Flexion and extension ranges were measured before and after treatment. **A modified Primary Care Patient Experience Virtual Care Survey was used to examine barriers for virtual care and evaluate patient's satisfaction.**

A well-designed post-operative virtual physiotherapy program continues to be an important part of our model of care as we normalize our activities. **Clear understanding of barriers to virtual care and mitigation strategies will help us create virtual care standards, meet our patient needs and facilitate continuous postoperative care to patients despite pandemic restrictions** and limitations in resources.



RESULTS

- ↓ After implementation of virtual care videos, proportion of participants needing assistance to participate in the Virtual Rehab decreased to 45% from 68% before the implementation.
- 88% 88% of participants indicated that videos helped them be better prepared for the virtual class.
- 96% 96% of participants indicated that they felt safe doing their exercises virtually.
- 82% 82% of participants felt physiotherapist spent enough time during the virtual knee class.
- 96% 96% of participants indicated that Virtual Rehab saved them time and money for transportation and parking.
- 95% 95% of participants indicated that they were satisfied or very satisfied with the current Virtual Rehab.

