

ABSTRACT

JOINTS

Joint replacement Outcomes in IRFs and Nursing Treatment Sites

Purpose: JOINTS is a 2-year study to determine how post-acute settings and processes of care are associated with rehabilitation outcomes for different types of patients who have had a hip or knee replacement. The purpose is to aid decision makers in optimizing post-acute placement and rehabilitation care for joint replacement patients. The study focuses on care rendered in two types of post-acute facilities—skilled nursing facilities (SNFs) and inpatient rehabilitation facilities (IRFs).

Research Questions: JOINTS is designed to answer 7 questions:

1. What are the characteristics of joint replacement patients (DRGs 209 & 210) served in IRFs and SNFs? How are they similar or different?
2. How are the interventions and processes of care for joint replacement patients different in IRFs and SNFs?
3. What specific interventions or combinations of interventions in IRFs and SNFs make the biggest difference in outcomes for joint replacement patients taking into account patient differences?
4. Which joint replacement patients do better in an IRF and which do better in a SNF?
5. What is the relative cost-effectiveness of IRF and SNF care for joint replacement patients? *
6. Are comorbidities among joint replacement patients an adequate indicator of additional medical need during the rehabilitation process? Can a severity-of-illness measure serve as a better indicator of medical need? Are patients with greater medical needs served better in an IRF or a SNF?
7. Can we design a more efficient course of rehabilitation interventions for joint replacement patients in IRFs and SNFs to reduce the length of stay and costs?

Methods: The study uses a practice-based evidence methodology that garners detailed data on patient characteristics, processes of care, and outcomes and then uses these data to determine how settings and processes of care determine outcomes controlling for patient covariates. The study group consists of 2,800 consecutively admitted joint replacement patients—1,400 in SNFs and 1,400 in IRFs drawn from 20 facilities—approximately 10 SNFs and 10 IRFs. While not a national probability sample, the study attempts to capture the diversity of practice in both types

* The cost and cost-effectiveness analyses will be conducted as part of a yet-to-be-funded study that will accompany the core study outlined here.

of facilities by including a mix of facilities that take into account geographic location, profit status, freestanding versus hospital-based status, and market conditions such as degree of managed care. The study uses an array of descriptive, bivariate, and multivariate statistical analyses controlling for patient differences.

Project Team: The study is a collaboration of two organizations, the National Rehabilitation Hospital's (NRH's) Research Division in Washington, DC and the Institute for Clinical Outcomes Research (ICOR) in Salt Lake City, UT. The two organizations have collaborated on similar studies, and combined, have with a long history of research across all settings of care. The Project Team draws heavily on the study's ***Clinical Practice Team*** that consists of front-line clinicians who guide the investigators in the selection of data elements and in the collection of patient and intervention data. Front-line clinical participation fosters project buy-in, contributes to the completeness of data collection, and the acceptance of study findings. The study is supported by a ***Policy Advisory Panel*** that consists of industry, payer, professional, consumer, and research stakeholders.

Sponsors: JOINTS is sponsored by an array of organizations: the HealthSouth Corporation, the American Hospital Association, the American Medical Providers Association, the Federation of American Hospitals, and the National Rehabilitation Hospital. The sponsors are committed to a full and open, no-holds-barred inquiry into post-acute rehabilitative care for patients who have had a joint replacement.