Driving Forces

- 2008 – 49% in-patient population > age 65
- Geriatric Institutional Assessment Profile (GIAP) indicated low knowledge/high interest of staff to increase knowledge base for care of older adults
- Baseline mobility assessment not reflective of patient’s actual mobility status in physician ordered protocol
- Small changes (progression/regression of mobility status) not measured
- Staff recognized need for improved mobilization of older adults

Goal

Develop a standardized staff-driven mobility protocol to improve or sustain baseline admission mobility status of the community dwelling older adult.

Plan

Staff from two older adult population telemetry medical units collaborated to develop a staff-driven mobility protocol.

Spring Into Step: A Staff-driven Mobility Protocol
Tracy Gemberling, RN, CMSRN; Amy Keesler, RN; Christine Yatsko, MSN, RN, CMSRN
Lehigh Valley Health Network, Allentown, Pennsylvania

Older adults (age 65+) experience a decline in function within 48 hours of admission to an acute care setting. Early ambulation and out-of-bed activities during hospitalization improve functional status, support patient satisfaction, and can reduce length of stay (LOS).

“Spring into Step” performance improvement (PI) work implemented
Core Team created/Leaders identified
Pre-implementation staff survey
Patient Activity Data Collection Tool
Staff Education

Registered Nurse (RN) assessment on admission and discharge using selected Mobility Classification Tool
Staff communication worksheet – individualize daily mobility plan of care
- track adherence to staff-driven protocol

Standard Work

Initial Action Items

- Improvement in nurse sensitive indicators:
  - Patient satisfaction
  - Pressure ulcers
  - Falls
  - LOS

- Increased staff knowledge
- Increased compliance to mobility protocol

Future Work

- Post-implementation staff survey
- Launch protocol on similar units
- RN initiated mobility protocol
- Mobility focused patient education
- Visible prompts in rooms for mobility goals
- Visible markers in hallways to measure ambulation distance

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