

Project Title

Promoting Patient Mobility on the Ward Through the Implementation of the Patient Mobility Board

Project Lead and Members

Project lead: Dr Aruna Vijaya Ratnam

Project members: Low Weng Hoe, Nur Azlina Ishak, Mildred Yong

Organisation(s) Involved

Ng Teng Fong General Hospital

Aims

Increase the frequency of mobilising patients either to the toilet or sitting out of bed by 20% within 2 months.

Background

See poster attached/ below

Methods

See poster attached/ below

Results

See poster attached/ below

Lessons Learnt

It is important to address the knowledge gaps to ensure that patients ambulate and transfer safely and appropriately. There was an increase in initiative and autonomy on the nurses' side to ensure that patient mobility boards were filled up accurately and cleared when patients discharge. Safety aspects need to be addressed to further increase the frequency of mobilising patients.

Conclusion

See poster attached/ below

Project Category

Care & Process Redesign

Keywords

Care & Process Redesign, Safe Care, Quality Improvement, Root Cause Analysis, Plan Do Study Act, Inpatient Care, Rehabilitation Care, Orthopaedic, Allied Health, Physiotherapy, Ng Teng Fong General Hospital, Patient Mobility, Ambulation

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PROMOTING PATIENT MOBILITY ON THE WARD THROUGH THE IMPLEMENTATION OF THE PATIENT MOBILITY BOARD

MEMBERS: DR ARUNA VIJAYA RATNAM, LOW WENG HOE, NUR AZLINA ISHAK, MILDRED YONG

PHYSIOTHERAPY, REHABILITATION DEPARTMENT

- SAFETY
- PRODUCTIVITY
- PATIENT EXPERIENCE
- QUALITY
- VALUE

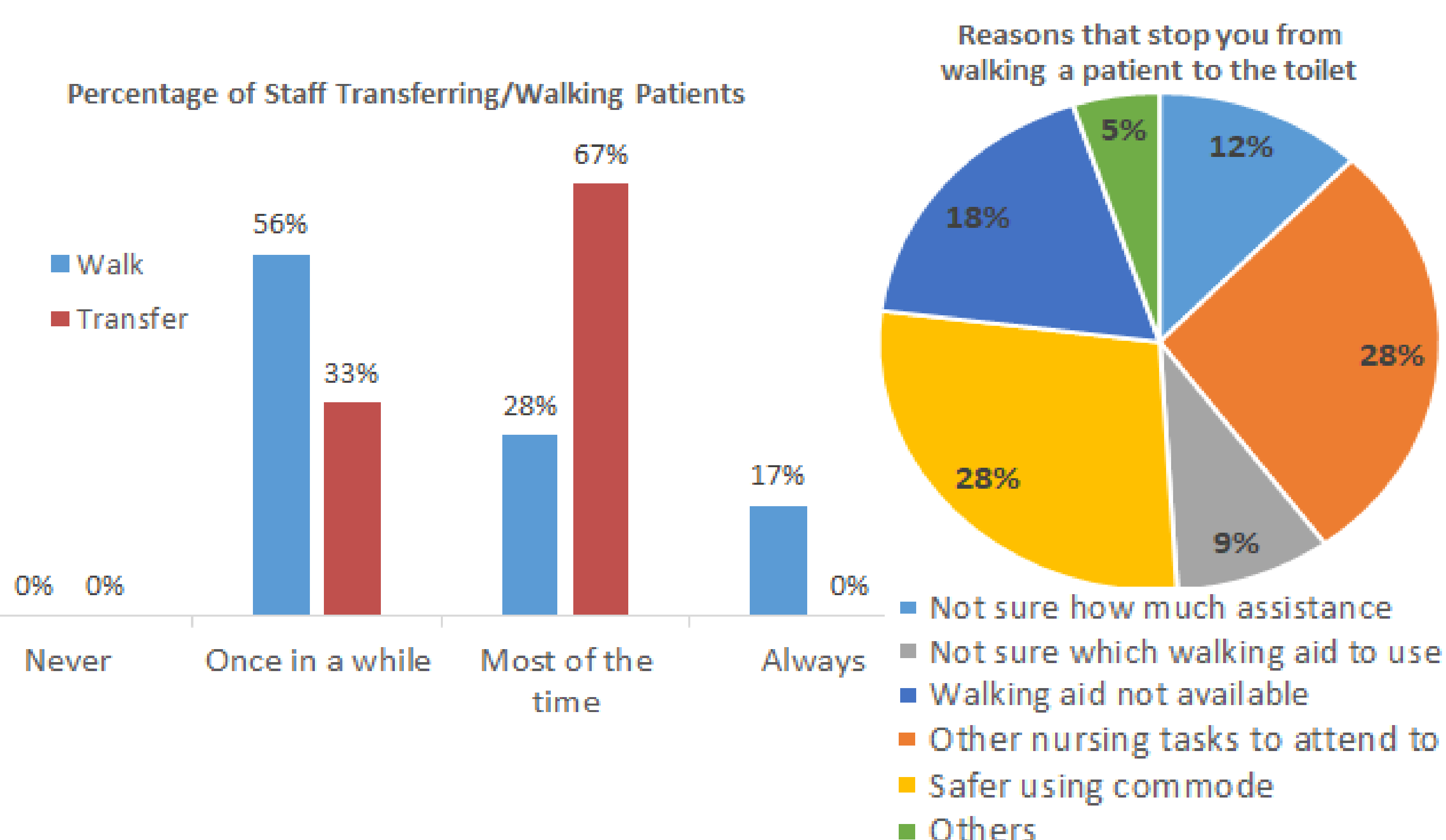
Define Problem/Set Aim

Opportunity for Improvement

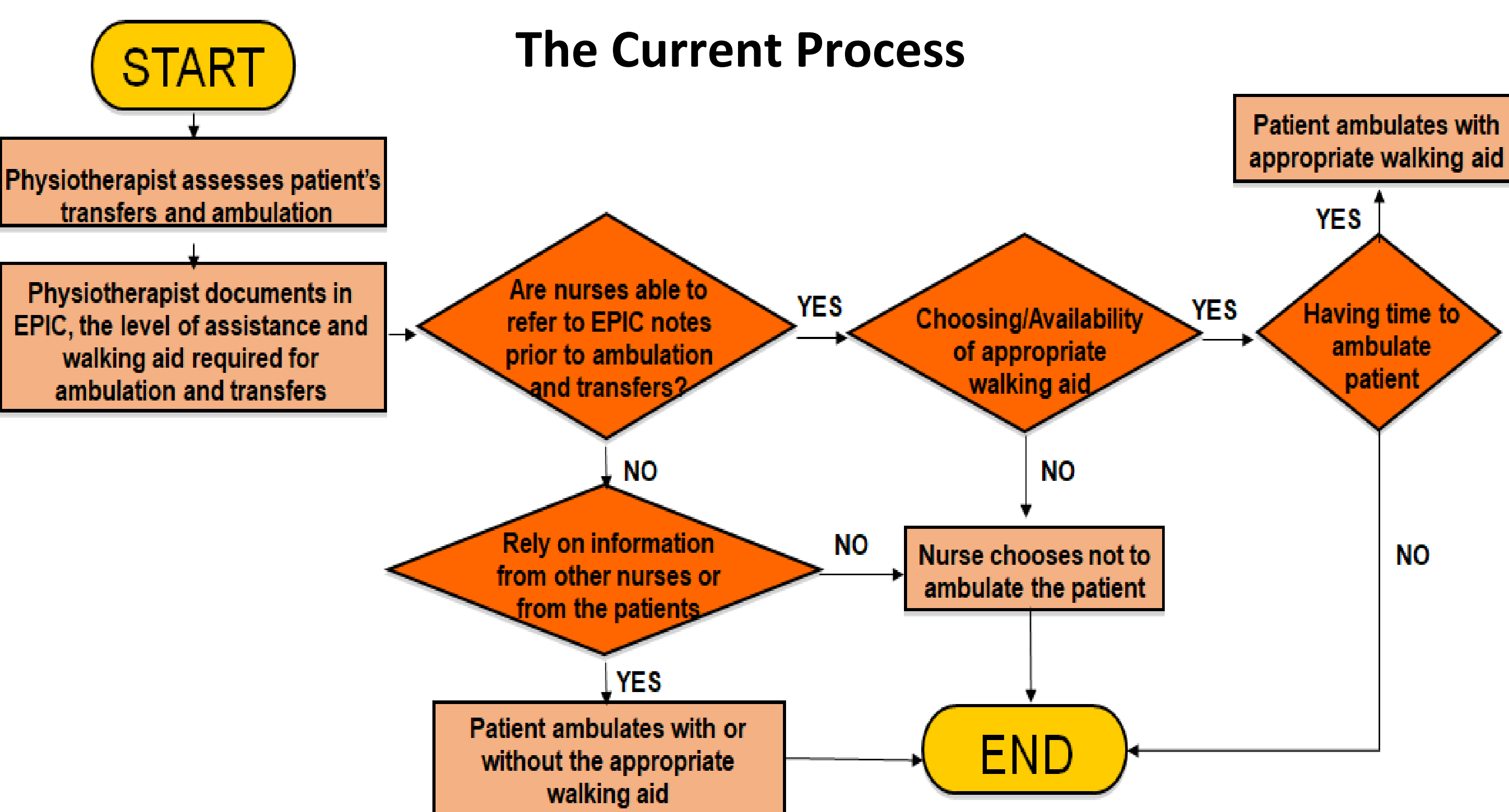
Patient mobility in the orthopaedic ward setting is not maximized during their stay in the hospital. A survey done showed that 55% of the staff do not ambulate patients to the toilet at least twice a day, and that 33% of the staff sit patients out of bed for meals only once a day.

Aim
Increase the frequency of mobilizing patients either to the toilet or sitting out of bed by 20% within 2 months.

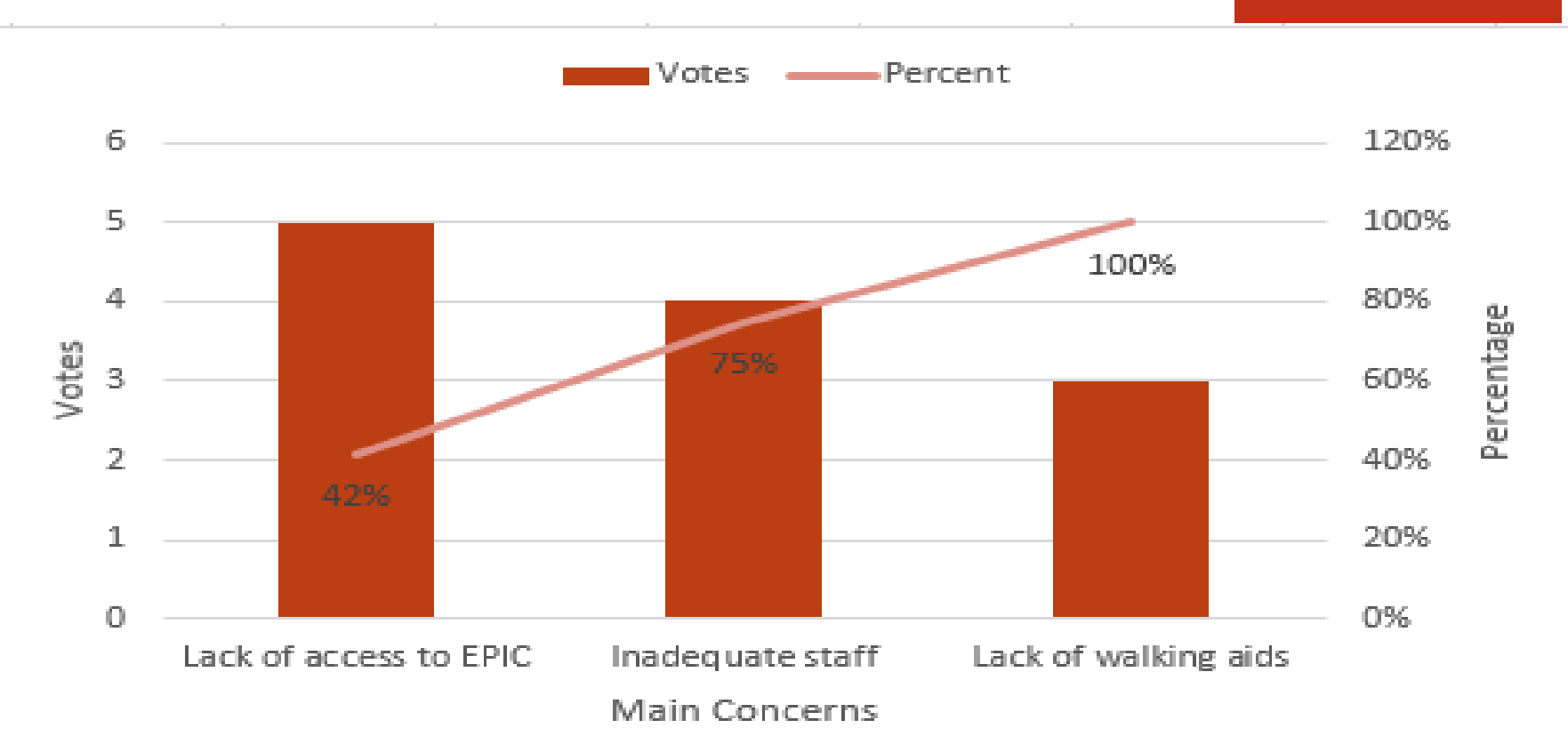
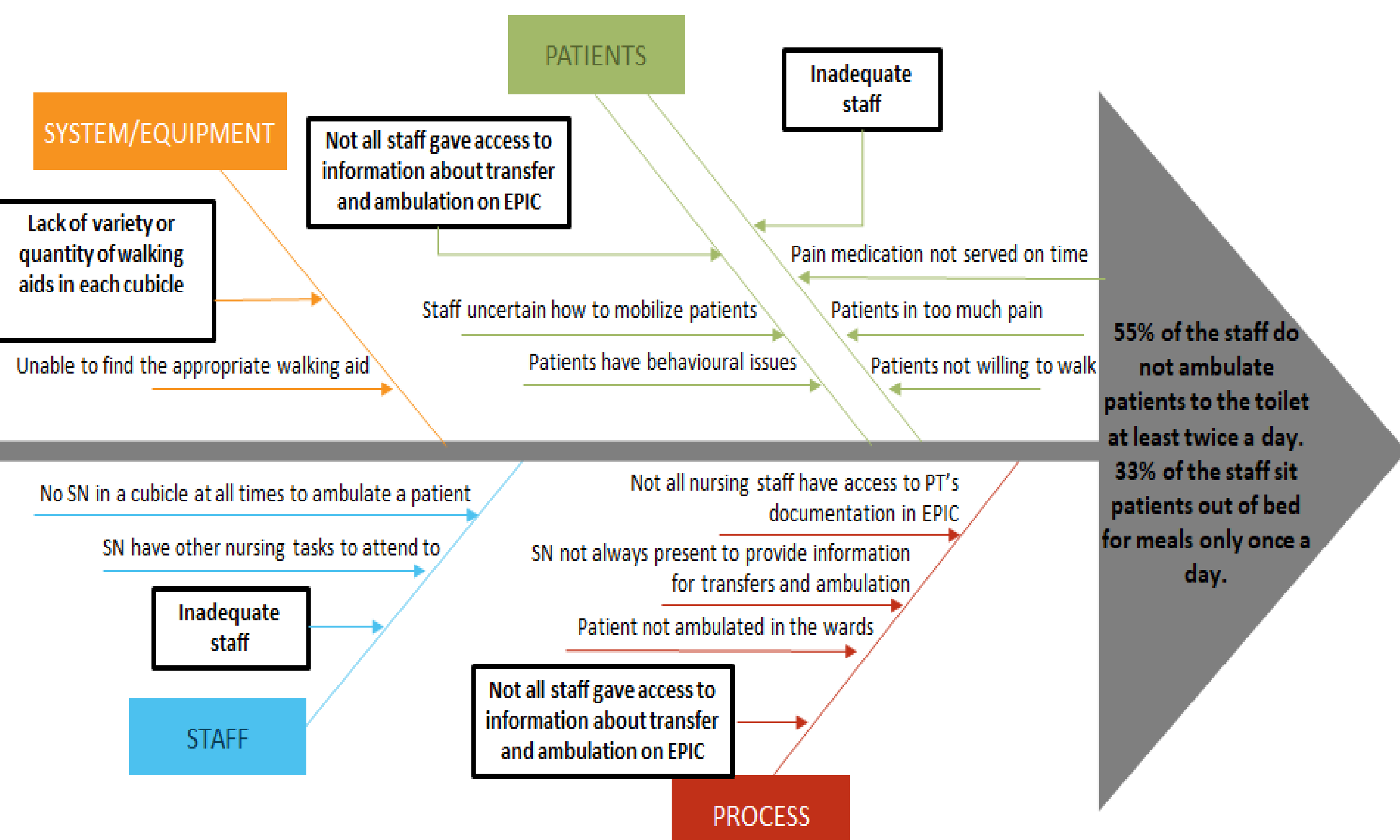
Establish Measures



Analyse Problem



Root Causes



Select Changes

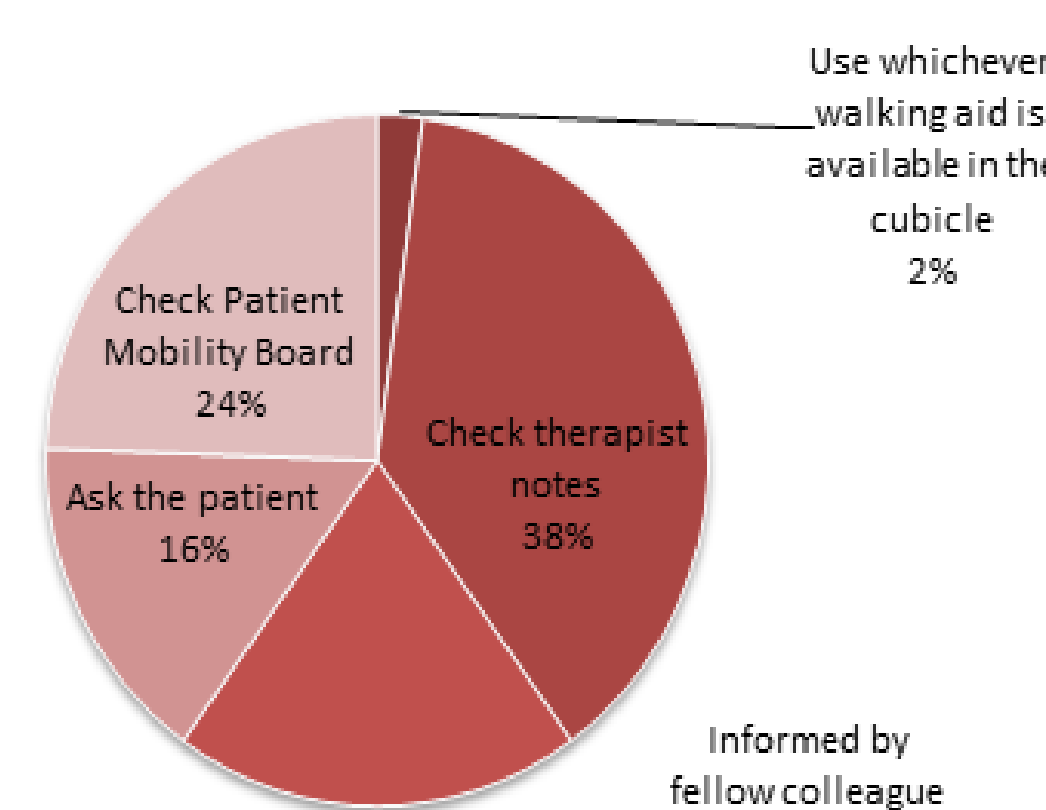
Root Cause	Potential Solutions
Not all staff have access to information about transfer and ambulation on EPIC	1 Grant access to all nursing and PCA staff
	2 Mobility board by patient's bedside
Lack of variety/quantity of walking aids in each cubicle	3 Increase the quantity and variety of walking aids in each cubicle
	4 Ensure return of walking aids to designated areas after use
Inadequate staff	5 Increase staffing



Test & Implement Changes

CYCLE	PLAN	DO	STUDY	ACT
1	A patient mobility board with patient's transfer and ambulation information was created and placed next to patient's bedside in the beginning of May. This enabled us to test if easier access to mobilization information increased the frequency of patient mobilization by nurses and PCA in the orthopaedic ward.	1. Mobility board needs to be updated regularly 2. Information on the board needs to be changed when the patient discharges	1. 24% of the staff surveyed referred to the mobility board prior to mobilizing patients. 2. Staff were unsure of walking aid placement and uncertain of the level of assistance to provide a patient during mobilization	1. There is a need to ensure that the patient mobility boards are updated when there is change in patient's function 2. There is a need to educate ward staff on walking aid use and level of assistance

How would you decide which walking aid to use to walk patient to the toilet?



Patient Mobility Board

Weight-Bearing:
NWB / TTWB / PWB / HWB / FWB

Transfers:
Minimal / Moderate / Maximum X 1 / 2

Walking Aids:
WF / BBQS / NBQS / Stick

Mobility Assistance:
Supervision / Contact-guard / Minimal

Spread Change/Learning Points

What are the strategies to spread change after implementation?

- Reminders and spot checks to ensure that the Patient Mobility Boards are regularly updated
- Arranging a teaching session with the ward nurses to ensure everyone understands the level of assistance to provide and the appropriate use of walking aids

What are the key learnings?

- Though the staff reported confidence in ambulating and transferring patients it is important to address the knowledge gaps to ensure that patients ambulate and transfer safely and appropriately.
- There was an increase in initiative and autonomy from the nursing side to ensure that the patient mobility boards were filled accurately and cleared when a patient was discharged.
- Though the patient mobility board made mobilizing patients more convenient safety aspects need to be addressed to further increase the frequency of mobilising patients