

Project Title

Early Mobility in the Intensive Care Unit

Project Lead(s) and Members

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Project members:

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Nursing: Tan Pei Fern; Jiang Yan; Yu Liang; Lorraine Tan Yee Ching; Zawir; Hsiao Sim;
Foong Mei Fern

Organisation(s) Involved

Tan Tock Seng Hospital

Healthcare Family Group(s) Involved in this Project

Allied Health, Medical, Nursing

Applicable Specialty or Discipline

Physiotherapy

Aims

To support patients in resuming mobility as early as possible after acute illness or surgery.

Background

In recent years, there has been a paradigm shift from a traditional practice of bed rest to early mobility in the Intensive Care Unit (ICU). Evidence supports that physiotherapy interventions focusing on early progressive mobilisation are safe and feasible, and can

result in significant functional benefits that may translate into a reduced ICU and hospital Length of Stay.

Methods

To expedite recovery of patients, early mobilisation was implemented as part of routine clinical care in all our ICUs – Medical, Neurological, Surgical, Cardiac, and NCID. Suitable patients are mobilised and sat out of bed on a daily basis by nurses. Physiotherapists then follow up to progress patients to functional activities such as standing tasks and ambulation. Together with the physicians and nurses, the physiotherapist-led mobility programme has challenged conventional boundaries and enabled effective care delivery through appropriate training and formal governance.

Results

The achievements associated with the implementation of early mobilisation in ICUs saw a decrease in the hospital Average Length of Stay of 4.5 days.

Lessons Learnt

It is imperative to create a space for people to share what is working and what they want to improve. It is also important to create multiple entry points for people to share their thoughts whole group, one on one and some way to give anonymous feedback to ensure that all voices are honoured.

Conclusion

Early mobilisation in the ICU and HDU is feasible, safe and effective.

Additional Information

- Poster Presentation at APAC Forum 2016 “Early Mobilisation in Medical Intensive Care Unit”
- Best Oral Presentation Award at 5th Annual Asia Pacific Conference on Early Mobilisation and Rehabilitation in ICU- “Early Mobilisation in Surgical Intensive Care Unit”

- Tan Tock Seng Milestone Award 2018
- Association of Chartered Physiotherapists Conference 2021, Top 3 abstracts - A Physiotherapy-led Early Mobilisation Protocol for Neurosurgical patients with external ventricular drains in intensive care: A service evaluation”
- Excellent Oral Presentation Award at 6th Annual Asia Pacific Conference on Early Mobilisation and Rehabilitation in ICU - “A Physiotherapy-led Early Mobilisation Protocol for Neurosurgical patients with external ventricular drains in intensive care: A service evaluation”
- Best Allied Health Abstract at Asia Pacific Intensive Care Symposium 2022- “A Multidisciplinary Traffic Light System Based Early Mobilisation Programme in the Cardiac Intensive Care Unit: A retrospective evaluation

Project Category

Care Continuum

Rehabilitative Care

Care & Process Redesign

Value Based Care, Length of Stay

Keywords

Intensive Care Unit, Mobilisation, Physiotherapist-Led

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EARLY MOBILITY IN ICU

In recent years, there has been a paradigm shift from a traditional practice of bed rest to early mobility in the Intensive Care Unit (ICU). Evidence supports that physiotherapy interventions focusing on early progressive mobilisation are safe and feasible, and can result in significant functional benefits which may translate into a reduced ICU and hospital LOS.

To expedite recovery of our patients after acute illness or surgery, early mobilisation was implemented as part of routine clinical care in all our ICUs – Medical, Neurological, Surgical, Cardiac, and NCID. During the pandemic, physiotherapists demonstrated the same care and dedication towards early physical rehabilitation and aiding recovery in patients with COVID-19 in the NCID ICU.



Ms Adeline Chi, Senior Physiotherapist (left), and Ms Agnes Ho, Senior Staff Nurse (right) ambulating a patient after surgery in the Surgical High Dependency Unit.



Ms Audrey Lee, Senior Physiotherapist engaging an intubated patient in upper limb exercises in the National Centre for Infectious Diseases (NCID) ICU.

Speeding Up Recovery

With the aim to resume mobility as early as possible, suitable patients are mobilised and sat out of bed on a daily basis by nurses. Physiotherapists then follow up to progress patients to functional activities such as standing tasks and ambulation. Together with the physicians and nurses, the physiotherapist-led mobility programme has challenged conventional boundaries and enabled effective



care delivery through appropriate training and formal governance.

The achievements associated with the implementation of early mobilisation in ICUs saw a decrease in the hospital ALOS of 4.5 days and won the Tan Tock Seng Milestone Award in 2018.