

Get up, Get dressed, Get moving

Using the Appreciative Inquiry framework to develop and implement this quality improvement initiative

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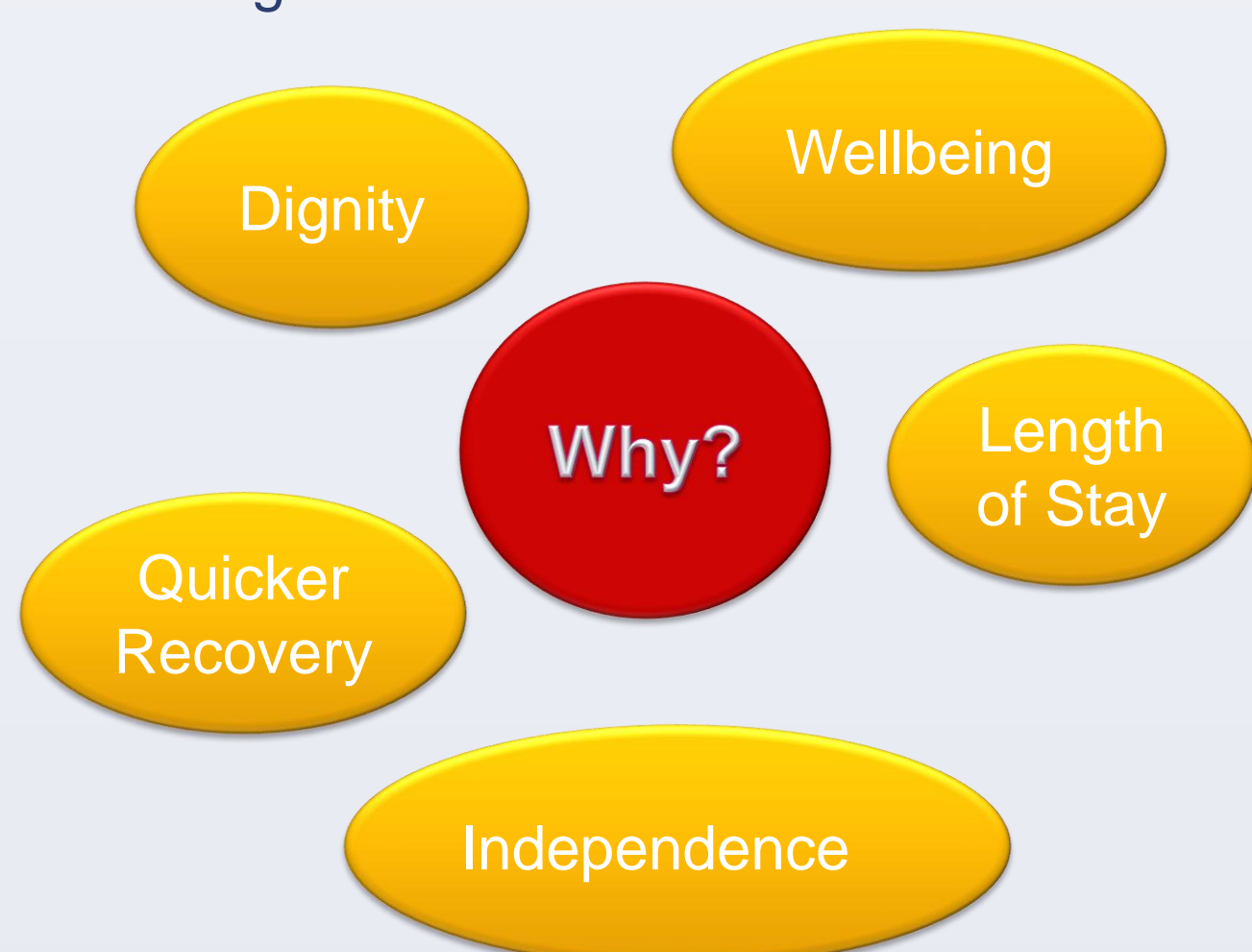


Discover

Why?



End PJ Paralysis / Get up, Get dressed, Get moving is an international patient-centred quality improvement initiative within the inpatient community, to get patients out of bed, dressed and moving.



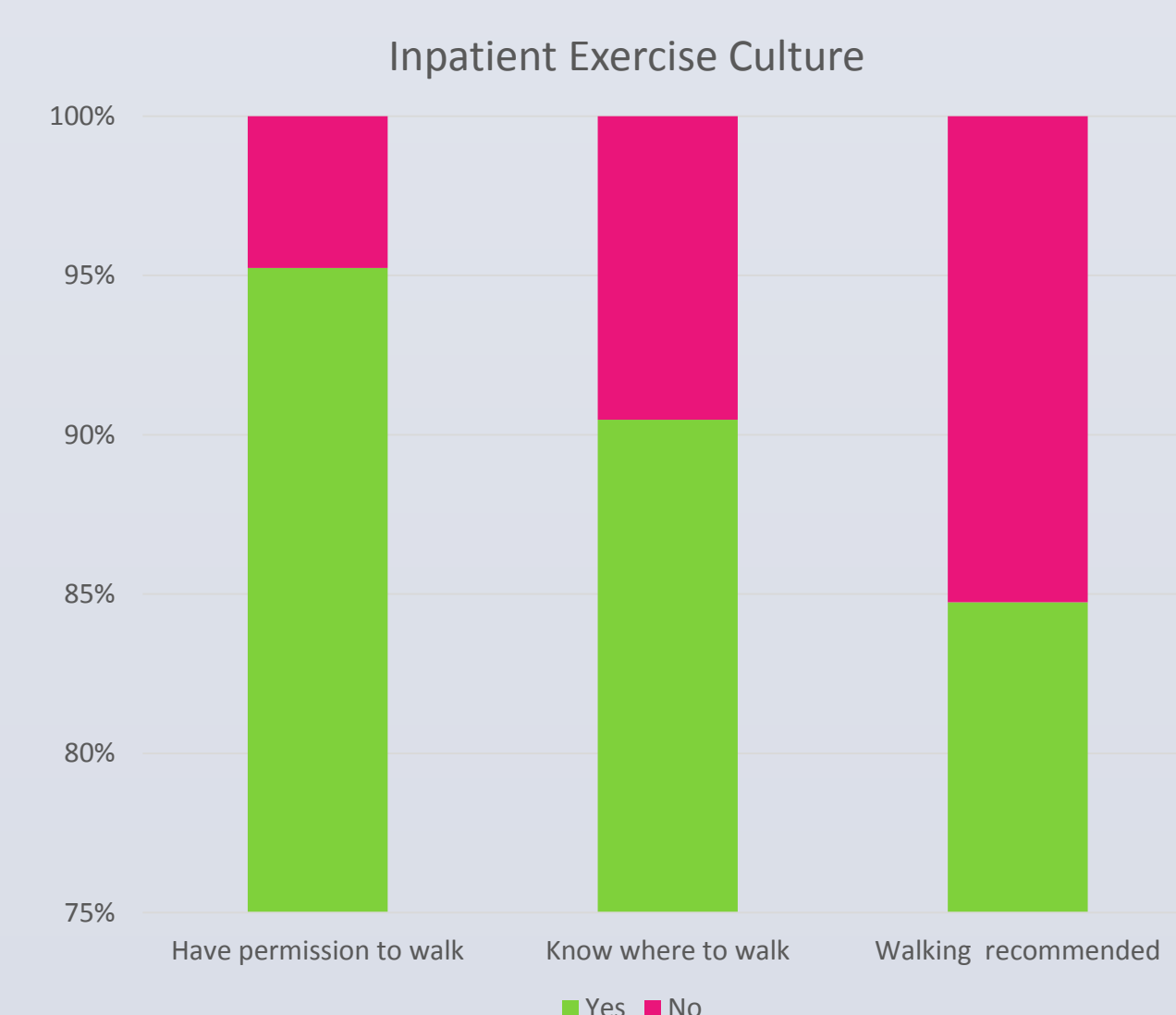
Inpatients over the age of 80 who stay in hospital more than 10 days, lose 10% of muscle tone

Hospital inactivity leads to a 5 times increase in risk of needing institutional care on discharge

The project to introduce *Get up, Get dressed, Get moving* to St. John's Hospital was used as the quality improvement initiative to implement the concept of Learning from Excellence.

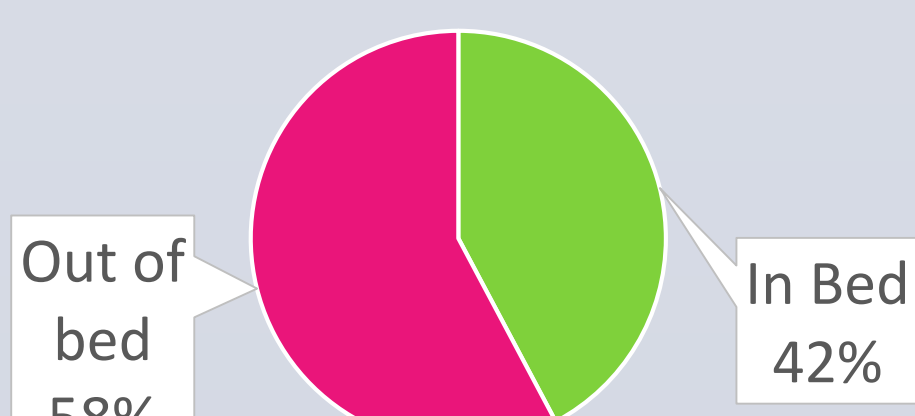
Current Baseline Data

Survey to ascertain the culture of promoting inpatient exercise (January 2020).

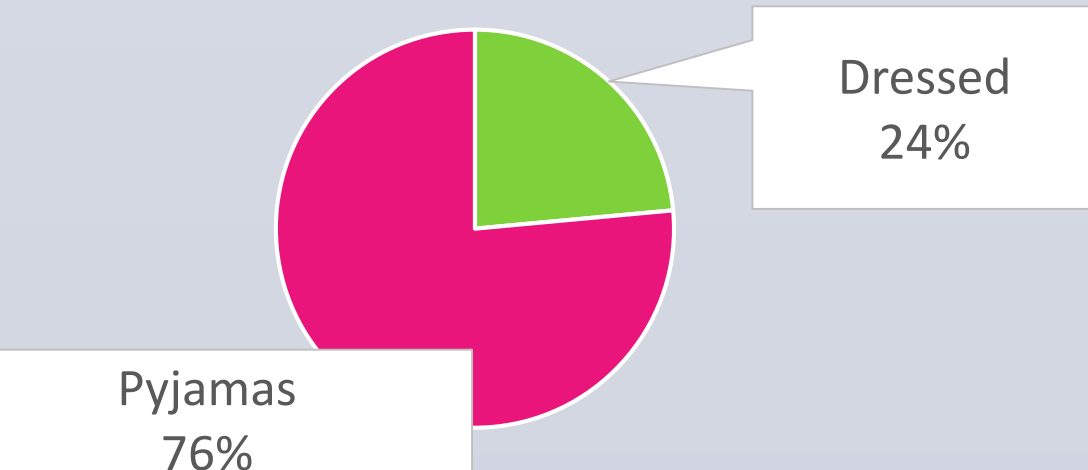


Data Snapshot of inpatients out of bed/dressed

Snapshot Status at 12.30 on 07/01/2020



Snapshot Status at 12.30 on 07/01/2020



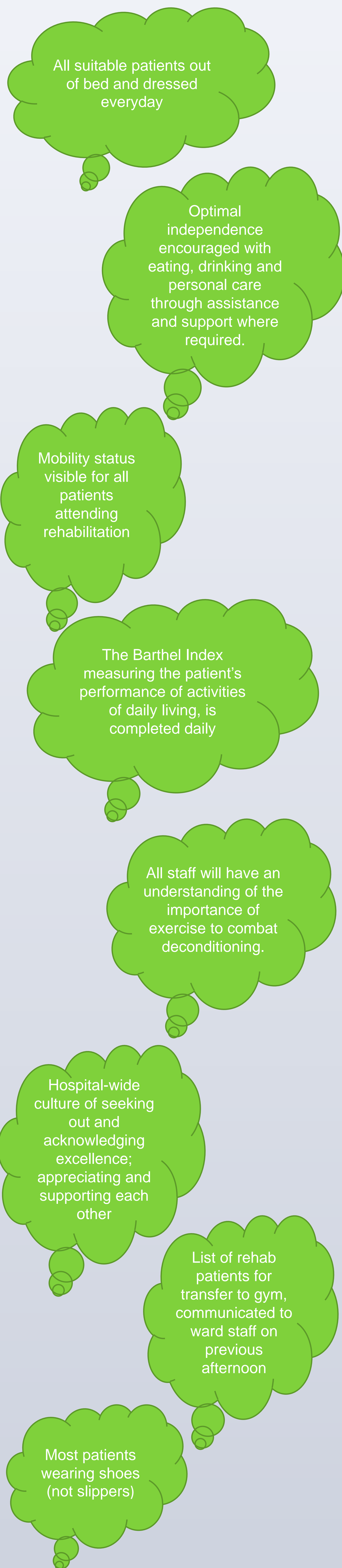
Pilot Project

A pilot of the *Get up, Get dressed, Get moving* initiative will be implemented in March/April 2020, with data collected on the number of patients dressed, and the number of patients out of bed and/or mobilising each day.

Performance measures based on length of stay, fall incidence and pressure ulcer incidence will be compared with data from the same time period in 2019.

Dream

What will this project look like in a year's time?



Design

Project Development Plans

- Multidisciplinary team identified including a patient representative

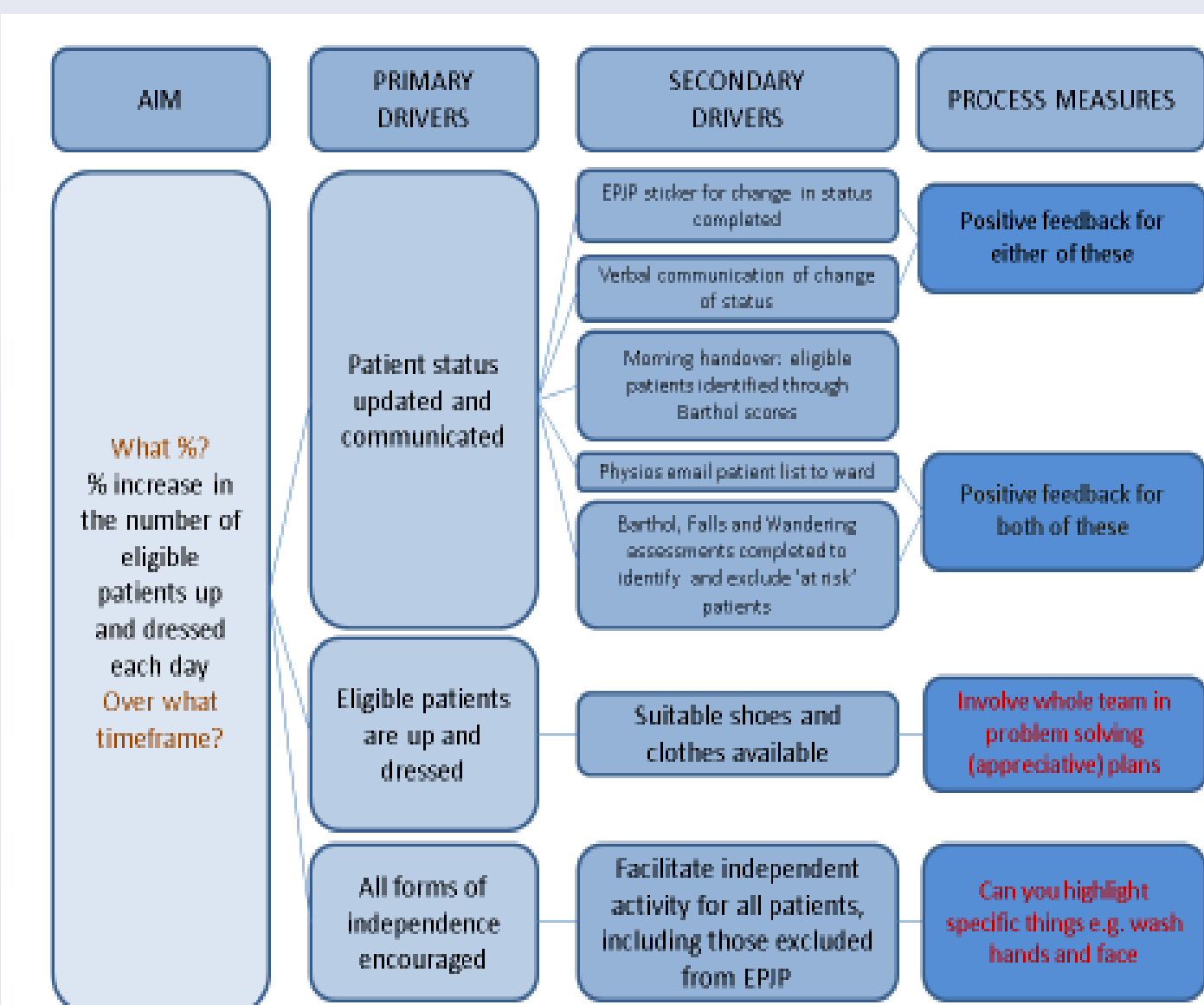


- Decision to use the project as a learning process for developing the Learning from Excellence (LfE) quality improvement process.

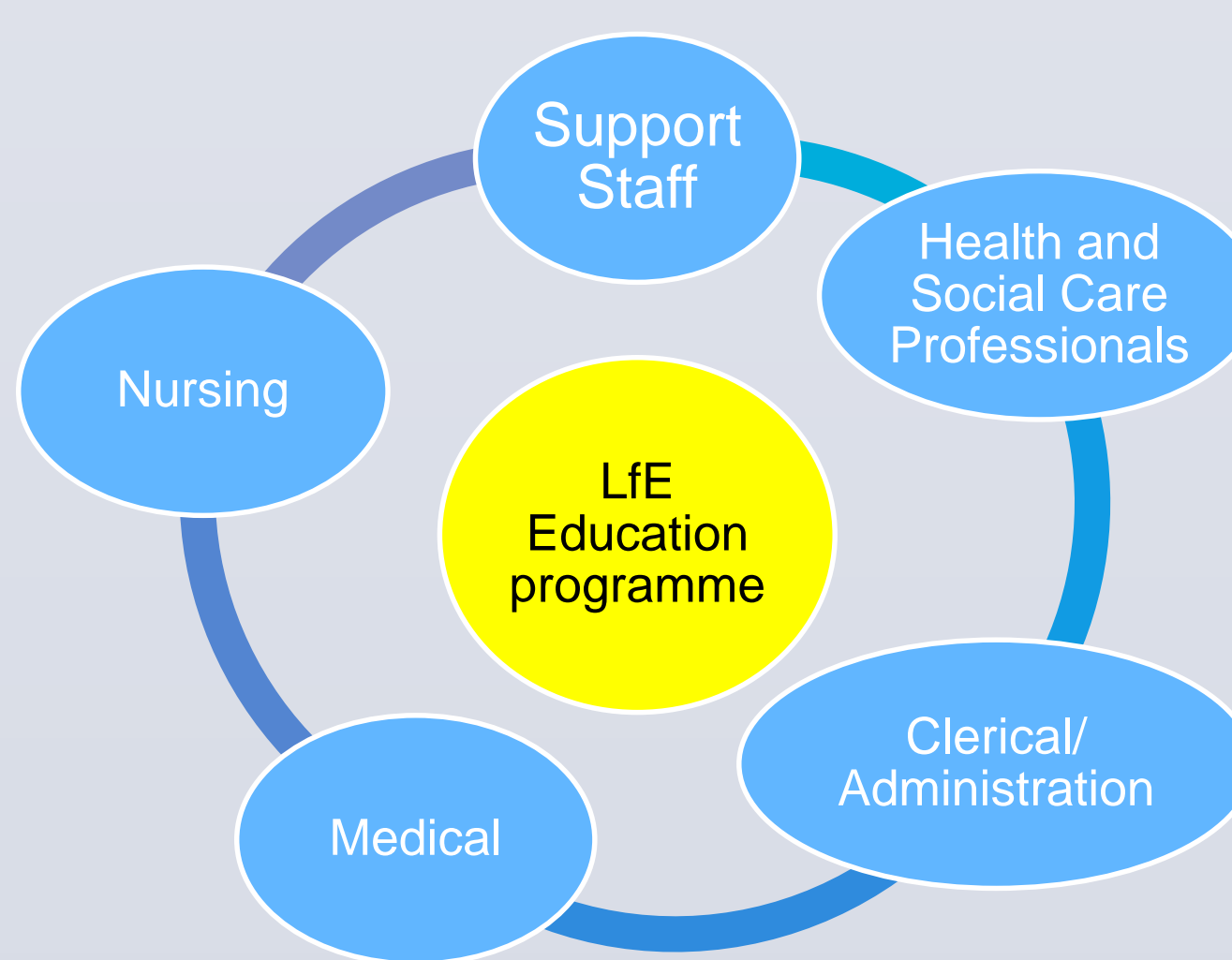


- Project Team for *Get up, Get dressed, Get moving* attended LfE training and became LfE champions and promoters in the hospital.

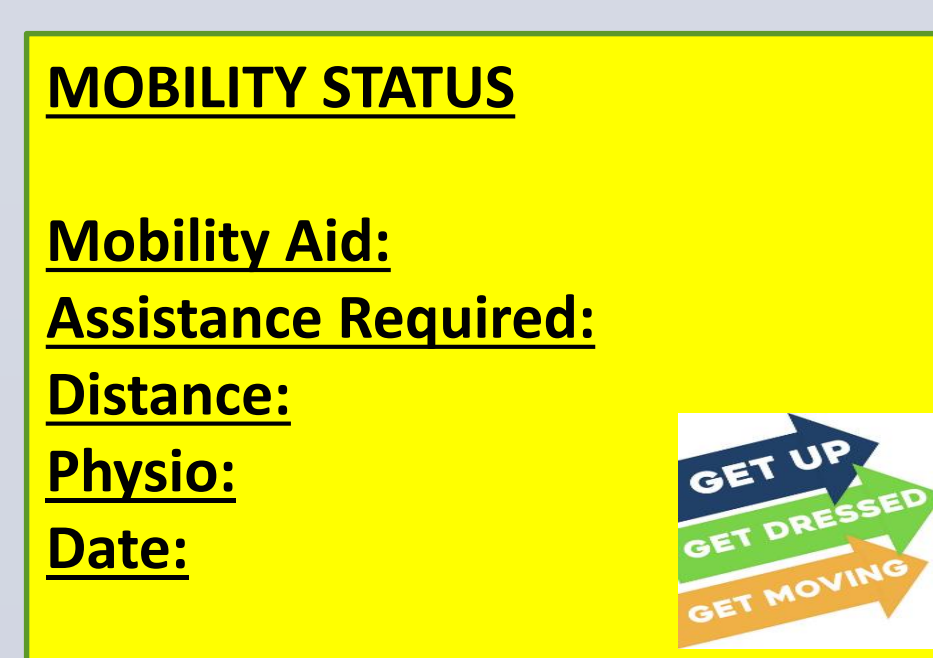
- Driver Diagram developed



- LfE Education programme developed with a schedule of presentations for all disciplines



- Introduce Mobility Status stickers for use at foot of each patient's bed (Patients attending for mobility rehabilitation)



- Develop a communication tool between ward and gym, based on daily patient lists for rehabilitation.

- Develop links with the national project for *Get up, Get dressed, Get moving*

Destiny

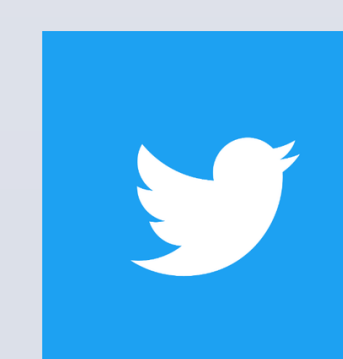
How to make this a reality and share the learning

- Look for excellence and visit the inpatient wards to carry out appreciative inquiry meetings so as to discover what is being done well in relation to getting patients up and moving.
- Share excellence from results of appreciative inquiries with other departments
- Analyse data and metrics as feedback to share with all stakeholders.



- Continue MDT input into Appreciate Inquiry throughout the hospital, in an effort to strive for a more positive and supportive workplace. Actively ask for all stakeholders ideas and suggestions so as to help improve patient care and quality patient outcomes.

- Develop a controlled social media account to facilitate the sharing of good news and excellence within the hospital, within the hospital group and to a wider public audience.



References

- Gill TM, Allore H, Guo Z. (2004) *The deleterious effects of bed rest among community-living older persons.* The Journals of Gerontology, Jul;59(7):755-61.
- Jones AS, Isaac RE, Price KL, Plunkett AC. (2019) *Impact of positive feedback on antimicrobial stewardship in a paediatric intensive care unit: a quality improvement project.* Pediat Qual Saf 2019;5:e206
- Sainsbury A, Gudrun S, Basal A, Young JB (2005) *Reliability of the Barthel Index when used with older people.* Age and Ageing; 34: 228-232

Contact

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