

# “Movement is Medicine”

Jacqueline Hopkins, Meredith Westbrook, & Nurse Managers  
Atrium Health Pineville  
An Impactful & Intentional Mobility Program

## Introduction

The Mobility Program was implemented at Atrium Health Pineville because as stakeholders of the mobility workgroup, we recognized that our mobility efforts were not meeting the facility goals. Knowing that mobility affects many areas of patient outcomes, we began tracking our performance using the mobility tracker to improve and increase the mobility of our patients. The specific problem, being that our patients were not being mobilized 3 or more times per day was addressed with the help of several initiatives we put into place. These initiatives included: mobility flags placed outside of the patient rooms, education of the flags and how to document mobility that occurs in the electronic medical record, and building a report within EPIC that collects the mobility data used to track compliance.

### Goal

The Pineville inpatient units will improve patient outcomes by tracking mobility compliance with the Power BI Mobility Tracker to reach the 70% goal using mobility flags, mobility education, and electronic medical record documentation as tools by April 30, 2023.

### Improvement Process

The mobility program utilized the PDSA cycle to make successful impact on the patient outcomes courtesy of mobilization. In the planning phase, the mobility workgroup began meeting once every other Wednesday for one hour. Noticing a lack participation from all inpatient units, the workgroup changed the meetings to every Wednesday for 30 minutes where 2 units report out their performance. It helped with learnings, barriers, and opportunities being discussed and shared and engaged front line teammates who came to the workgroup meetings to share what they experienced as far as mobility is concerned and ways we could improve. In the do phase, mobility flags were introduced and piloted on 3Palm in June of 2022 and revealed an improvement in the mobility compliance. In December of 2022, mobility flags were installed on the other inpatient units. As part of the study phase, data was collected with a daily report that was provided using EPIC and was tracked to ensure validation. The data was shared with nurse managers and directors twice a week, on Mondays and Fridays, so that the units know what they needed to focus on to meet the goal for the week, whether it be discussing in huddles, leader rounding, or sending reminders through the Rover phones throughout the day to their staff to mobilize and document. The act phase involved the Mobility Tracker that reveals how close as a facility we were to meeting the 70% goal but also provided insight to unit specific compliance and allowed us to decide what was working and what we needed to take back to the workgroup in the planning phase to start fresh with new ideas.

The shareholders in the program include the nurse managers, who share the data collected and education with their teammates, the healthcare techs who mobilize the patients and document accordingly, and the patients directly impacted and who are encouraged to advocate for themselves and hold staff accountable by speaking up about wanting to get out of bed.

## Results

To measure the success of this program, data was pulled from the Mobility Compliance report in Epic and uploaded into the Power BI Mobility Tracker. As the graph below reveals, in January 2022, Pineville had a mobility compliance of 14.96% for mobilization of patients 3 or more times per day. As a result of the extensive efforts of education surrounding mobility, ongoing teammate engagement, motivation, and encouragement were exercised and hardwired within the mobility workgroup and the mobility improved to 67.69% as of April 2023. In terms of clinical outcomes, we recognize that mobility has helped mitigate unassisted falls, quickens the healing, and has the potential to eliminate the occurrence of pressure injuries, pulmonary embolisms and deep vein thromboses. We also know that as a direct result of these, length of stay reveals shorter stays in brick and mortar and therefore assists with increased patient satisfaction scores as well as lessening the financial impact the patient takes on after a hospital stay.



### Mobility: Areas of Focus

Utilization of PDSA Model to Improve Mobility Compliance

Workgroup	Mobility Flags	Epic Report	Mobility Tracker
<ul style="list-style-type: none"> <li>Meet Wednesdays from 1200-1230</li> <li>Rotation of 2 NP Units sharing data &amp; reporting out learnings/opportunities</li> <li>Attendees include: HC3, SNA, NMA, Respiratory Care, Therapist, PIC, PEC, CCM</li> </ul>	<ul style="list-style-type: none"> <li>Installed outside rooms as needed</li> <li>Communicate level of activity per order &amp; initiative (1-3) of mobility performed each shift</li> <li>Helpful to run direct huddles to assist when necessary</li> <li>Educate staff on flags &amp; mobility documentation</li> </ul>	<ul style="list-style-type: none"> <li>Run each morning for day prior</li> <li>(Consent) if of patients mobilized &gt; 2 times per day</li> <li>Populates Mobility Tracker to record unit compliance</li> </ul>	<ul style="list-style-type: none"> <li>Updated daily with data from Epic Report</li> <li>Shows data trend related to mobility</li> </ul>

### What is MOBILITY???



Did you know that all of the following count as an instance of mobility when properly documented in the medical record?

- Dangle Legs at Edge of Bed
- Up to Bathroom
- Up to Bedside Commode
- Up to Chair
- Ambulating in Room
- Ambulating in Hall
- Ambulating off Unit
- Standing at Edge of Bed

### MOBILITY FLAGS

Why do we need to mobilize patients?  
Mobilizing patients helps decrease risk of:  
• Lengthened hospitalization  
• Infection  
• Injury  
• Falling  
Mobilizing patients helps increase:  
• Activity tolerance (endurance)  
• Lung function  
• Muscle strength

Why use flags?  
Quick visual for patient ambulation status  
• Advise all team members entering room to know how the patient mobilizes  
• Quick visual to ensure patient is mobilized at least 3 times per shift

How do we use the flags?  
There are 4 color flags  
• Top 3 designate how the patient requires  
• Bottom 3 reflect the number of times mobilized during the calendar day  
• The positive flags point to the right

Explain the Flags

Ambulation Status

- Black - Bedrest, cannot mobilize
- White - Mobilizes with assistance
- Red - Independent, no fall risk

Why?

- Mobility 1 - the first time this calendar day the patient mobilizes
- Mobility 2 - the second time this calendar day the patient mobilizes
- Mobility 3 - the third time this calendar day the patient mobilizes

Who is responsible for the flag?  
• RNs and HCTs will ensure that the mobility status of their patients (top 3 flags) is correct. RNs and HCTs will also address the mobility status of their patients.  
• At morning, the HCTs will reset the bottom 3 flags to point to the left, thus resetting the mobilizations for the day.  
• Each time a patient is mobilized, nursing and HCT/teammates will document the mobility and will flip a flag for the mobility occurrence. Any other teammate who mobilizes a patient should report it to the nursing team so that it can be documented and a flag can be flipped.

Atrium Health Pineville 3/15/2023

## Discussion

In April 2023, a year after coming together to focus on the priority that mobility should be, Pineville achieved the 70% goal. The impact of the work that the stakeholders involved in the workgroup have rallied around has shown drastic improvement which is reflected with the 11 data points trending to the right, going from 30.02% in August of 2022 to 83.79%, 11 months later. The sustainability of reaching the goal is supported by the engagement of the teammates making mobility a priority in everyday patient care and ongoing education for new teammates that are onboarded. The change in culture surrounding mobility and the positive impacts it has had on patient outcomes occurred because of the open, transparent dialogue in the workgroup and has been vital to the success so far. Movement is Medicine and we are striving to be 'Golden' at AH Pineville!

## Contact Info

Jacqueline.Hopkins@atriumhealth.org  
Meredith.Westbrook@atriumhealth.org

## Acknowledgements

Thank you to the engaged nurse managers, frontline staff, and leaders involved in our mobility workgroup for remaining persistent and being patient as we journeyed through all the learnings, barriers, and opportunities we faced to meet a goal we all believed was vital to the success of the care we provide at Atrium Health Pineville day-to-day.