Impact of the Implementation of a Nurse-Driven Mobility Protocol on an Inpatient Med-Surg Unit
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Summary:  Hospitalization poses a risk for altered functional status due to acute illness and decreased mobility. An opportunity for increased mobility in the pneumonia patient population as well as improving nursing documentation of patient mobilization was identified by the team. The project goals were to develop a nurse-driven protocol that would provide the nursing staff with tools and resources to assess functional status, mobility level and implement a mobility plan that would support independence, train for care at home, encourage activity of daily living and prevent functional decline utilizing an interdisciplinary approach.

Nursing Implications:
- Hospitalization poses a risk for altered functional status due to acute illness and decreased mobility. Early mobilization by standardized protocols can potentially minimize those risks.
- Bedside nurses and patient care techs are in the best position to impact patient mobility.
- Mobilization is a shared responsibility between nursing and rehabilitation services. However, not all patients meet criteria for PT/OT.
- Function focus care approach helps nursing to focus on patients’ ability, not the disability, and to prevent functional decline.

Key Takeaways:
- Implementing a nurse-driven protocol can be challenging but the benefits of reducing fall rates, readmission rates, and length of stay far exceeded the challenges.
- The whole department/unit needs to adopt a culture of mobility in order to sustain the program.
- Staff buy in, leadership support, and multidisciplinary collaboration are vital for the success of a nurse-driven mobility program.

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