

# Move to Improve

## Increasing Early Mobility in Critically Ill Patients at Humber River Hospital (HRH)



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### Lessons Learned

Promoting nurse understanding of early mobilization fostered interprofessional collaboration in prioritizing patient mobility in the ICU.

### Description

In the Intensive Care Unit (ICU), early mobilization of critically ill patients is essential for optimal recovery. At HRH, nurses referred to physiotherapists to initiate patient mobilization, while physiotherapists believed that early mobilization should be prioritized by the interprofessional team.

The Move to Improve early mobility protocol was implemented to:

- Increase awareness of the impact of early mobilization.
- Promoting nurse involvement in early mobilization of ICU patients.

The Move to Improve early mobility protocol includes:

- An interactive poster which was placed in patient rooms to highlight current mobility status and targeted goals.
- Prompts within nursing documentation to increase conversations on early mobility.

### Actions Taken

- Conducted a baseline survey to understand nurse perception of early mobility in the ICU.
- Provided education to staff on the impacts of early mobility.
- Placed Move to Improve posters in patient rooms to identify current mobility status and mobility goal.
- Conducted a post-implementation survey to evaluate changes in nurse perceptions.
- Included "Level of Mobility" in documentation to increase nursing communication.

### Summary of Results

After providing education on early mobilization of patients in the ICU, spot audits revealed that 60% of nurses had identified their patient's mobility status and goals, as well as documented communication on mobility level to team members. There was a marked improvement in nurse perception of leadership support, communication of mobility status, and understanding of benefits for early mobilization (Figure 3).

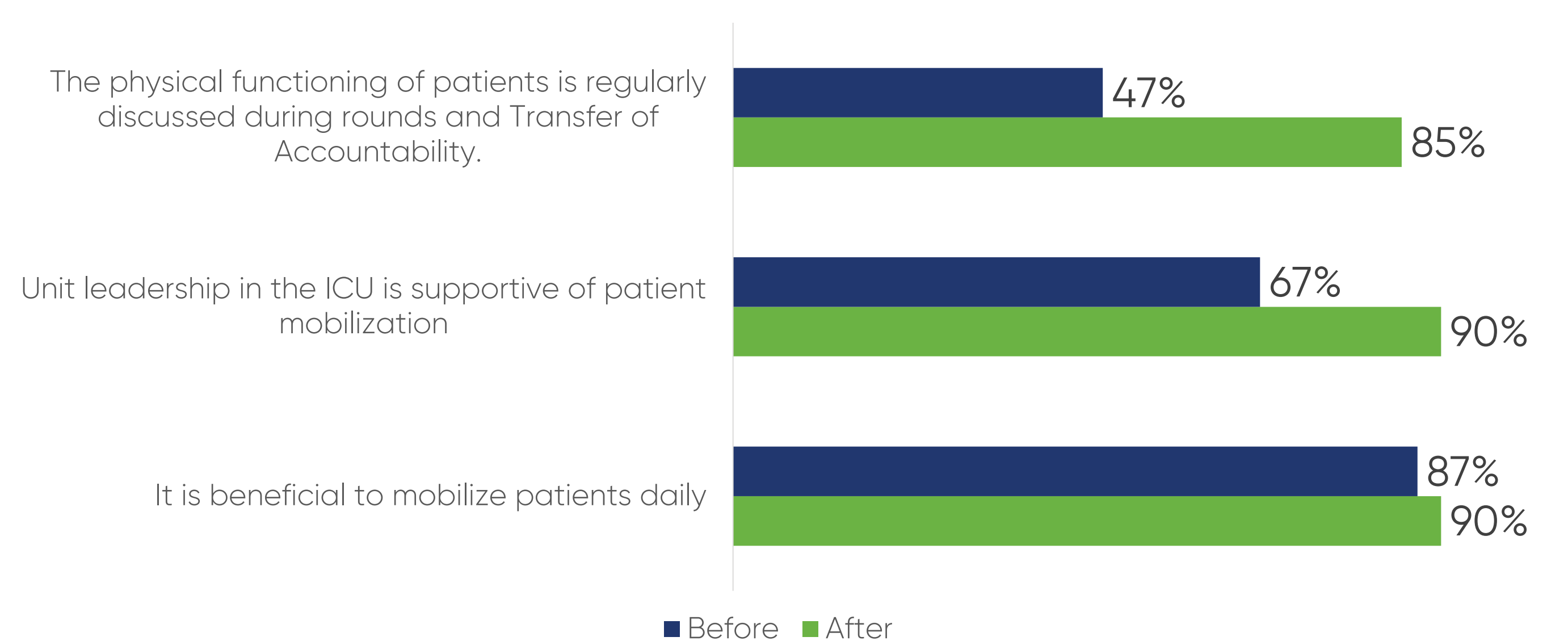
Yesterday		My Daily Activity		Date:
Max Mobility Score:		Level 1 A	Positioning	
# of times Per day:		Level 1 B	Passive Bed Exercises	
		Level 1 C	Active Bed Exercises	
		Level 1 D	Lift To chair	
Today's Target		Level 2	Dangle/ Sitting at Edge of Bed	
Max Mobility Score:		Level 3 A	Standing	
# of times Per day:		Level 3 B	Stepping to Chair	
		Level 3 C	Marching On The Spot	
		Level 3 D	Walk with 2 Person	
Actual Achievement		Level 4 A	Walk With 1 Person	
Max Mobility Score:		Level 4 B	Walk Independently With Aid	
# of times Per day:		Level 4 C	Walk Independently	

**Figure 1.** Move to Improve interactive poster. This poster was designed by incorporating elements from Critical Care Services Ontario's (CCSO) mobility protocol and HRH's Moment of Mobility protocol. This poster was posted in every patient room as a visual prompt and guide.

- 5. Gastrointestinal:
  - Feeds/BM:
  - Blood Sugars:
- 6. Genitourinary:
  - Urine Output:
  - HD/SLED:
- 7. MSK/Mobility:
  - Level of Mobility:
  - Activity:
- 8. Fluid Balance:
  - Shift Balance (0700-1900):
  - 24 Hour Balance (0700-0700):
- 9. Tests/Procedures:
  - Labs/Orders:
- 10. Wound & Skin:
  - Edema:

**Figure 2.** Integration of Level of Mobility into Transfer of Accountability ICU note. With the inclusion of Level of Mobility into this note, it ensures that nurses are communicating this information at shift change.

### Nursing Perceptions on Early Mobilization in the ICU



**Figure 3.** Post-implementation survey indicated an improvement in nurse understanding of early patient mobilization and its impacts.