

# Developing Hospital Partnerships and Navigating Hospital Committees to Initiate a Patient Mobility Program Following the Integration of the Johns Hopkins Fall Risk Assessment Tool (JHFRAT) at WVUMedicine/ Ruby Memorial Hospital

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## ABSTRACT:

**PROBLEM:** In 2017, the WVUMedicine Patient Falls Committee had directed the hospital's adoption of the Johns Hopkins Fall Risk Assessment Tool (JHFRAT) in an attempt to reduce patient falls. Physicians and administration felt, anecdotally, that there had been a reduction in patient ambulation associated with those efforts and became a barrier to discharge

**OBJECTIVE:** In an attempt to manage Hospital Acquired/Associated Disability (functional decline suffered as a result of immobility during hospitalization), the falls committee established a subcommittee to investigate barriers to mobility and implement a mobility strategy to implement on two acute care nursing units with the goal of developing a house-wide program to improve throughput.

## METHODS:

- Recruit team members based on expertise and interest in patient mobility
  - 10E and 7W Nursing units
  - CEOD (education dept)
  - Department of Safety
  - Department of Medicine
  - Rehabilitation Services
- 4 Team members attended Johns Hopkins AMP Conference to align JHFRAT and mobility initiative
- Adapted John Hopkins AMP surveys and program processes to WVUMedicine needs that were suitable to team members and addressed must-haves for the various departments involved in committee.
- Identified and navigated hospital committees to receive feedback and approval for project processes
  - Hospital administrators
  - Nursing research council
  - Nursing practice council
  - Nurse education council
  - EPIC users committee- Inter-professional Users Council
  - Falls committee
  - Hospital IT for EPIC builds, report builds
  - Center for Education and Organization Development
  - Personnel resources for help in navigating committees and IRB
- Developed documentation and reports through collaborative efforts with IT
- Committee members completed IRB training to do research
- Apply for and gain IRB approvals for project

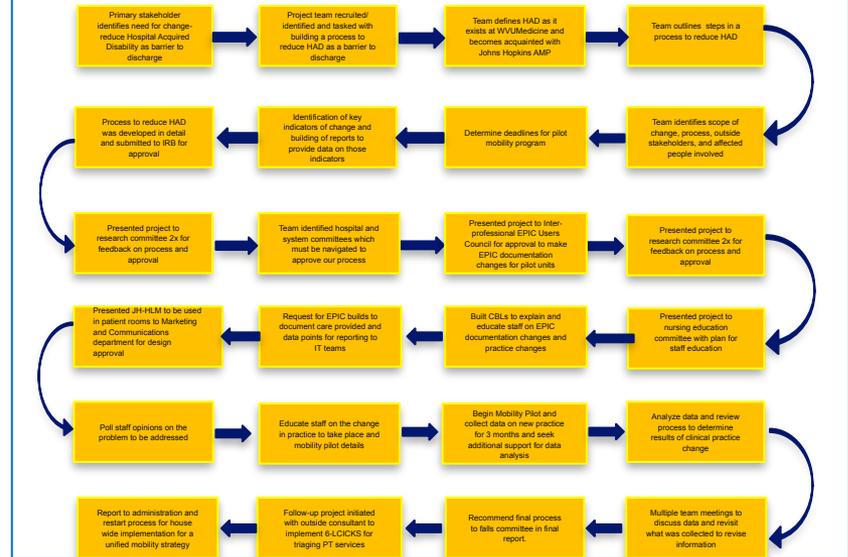
## METHODS (continued):

- Administer validated survey (developed by Johns Hopkins) to identify barriers and staff opinions about patient mobilization.
- Develop education needed for staff to carry out new processes involved in documentation of patient mobilization
- Incorporated 6-clicks into therapy practice and documentation
- Incorporated JHHLM into nursing and therapy practice and documentation
- Initiated mobility tech position to assist with non-therapy ambulation
- Sought out help with statistical analysis through WVU Translational Research Department and WVU School of Nursing
- Developed dashboard with IT to collect data on unit performance: ambulation, JHHLM, 6 clicks, LOS, Discharge location, and readmissions
- Received access to organization's LOS, Discharge, and Case Mix Index data
- Committee members developed documentation processes

## Results:

- Identified and recruited stakeholders (committee members and pilot units) that developed into a supportive team to identify priorities and must-haves, clinical process changes, and measures to assess the changes.
- Identified and navigated multiple committees to gain approval for positive change
- Developed reports to provide data to measure practice changes and determine affects on throughput
- Implemented a major cultural change and clinical care process change on pilot units
- Assessed cultural change by surveying staff opinion
- Determined success and opportunities to improve the new clinical care process
- Recommended the process change to the falls committee and identified needed modifications for an organization-wide roll-out
- "6-Clicks to Mobility" pilot initiated to triage PT consults
- Recommendations provided to administration involving 2 mobility pilots

## Flow sheet of Process for Team Building and Committee Navigation



## Other resulting projects:

- Defining the role of mobility techs within the organization
- Developing a critical care weekend exercise plan led by nursing based on JH-HLM scores
- Piloted nursing use of 6 clicks to assist in the triage of patients needing Physical Therapy services and in process of gaining administrative approval to incorporate 6-Clicks into Nursing practice