

Early Mobilization of Post Operative Patients

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PROJECT METHODOLOGY

Early patient mobilization and rehabilitation following surgery contribute to improved patient outcomes. Including caregivers within the facility and those continuing care at home in the mobilization process will ensure the activity level continues after discharge (4,5,6). In addition, educating nurses, healthcare team members, and family members about the importance of mobilization assures the implementation and continuation of a mobilization program (4,7).

Teaching Methods and Content

- Verbal Discussion
- PowerPoint
- Handouts
- Posters
- HealthStream
- Feedback Analysis

Plan and Development

- The success of this project depends on the education provided and the participation of those involved.
- Participating nurses complete HealthStream
 - Nurses taught to use educational materials
 - Collaborate with the facility nurse educator to tie all the education and feedback together
 - Collaborate with the multidisciplinary team
 - Caregivers/family/patient sign an informed consent to participate in the program
 - Caregivers/family/patient receive education and education materials from participating nurses
 - Nurses evaluate family members through the teach-back method and create an open loop of communication

Evaluation

- Patient Question and Feedback Document
- Feedback: analyzed and implemented at one month, three months, six months, and one year
- Patients, family members, and caregivers: asked to provide feedback on their perception of the program's effectiveness at the time of discharge
- Patient timelines and discharge dates will be compared to those who did not participate in the program
- The multidisciplinary healthcare team: utilized to determine the effectiveness and provide feedback on the information provided on the poster
- The level of the patients participating in the program can then be compared to patients in the same position who are not participating in the program



Figure 1



Figure 2

THEORETICAL FRAMEWORK

- The conceptual model applied to this project is the Iowa model.
- This model is beneficial to guide this project because it includes multiple feedback loops (8).
- The model allows reflection and analysis to adapt from evidence to practice (8).
- The model supports evidence-based practice and provides for problem-solving throughout the change process (8).

CONCLUSIONS

This project aims to improve patient outcomes through nurse-led education directed toward the patient, family, and caregivers to increase early post-surgery mobility in patients. Implementing a nurse-led early mobility education program for caregivers and families will fill knowledge gaps related to nursing inconsistencies within patient and family-centered care. This approach will promote patient safety sequentially and may be considered fundamental in providing the best patient care in clinical situations (9,10). Thus far, evidence suggests that a nurse-led early mobilization program can benefit patients' level of mobility and help quicken recovery.

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Figures

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ABSTRACT

Post-surgery, early patient mobility can mean the difference between a patient returning to their previous level of mobility or permanently reducing their ability to move. This poster presents a nurse-led early mobility education program for caregivers and families. Evidence related to the participation of family members and caregivers suggests that a nurse-led early mobilization program for family and caregivers can improve patient mobility levels, reduce the length of the hospital stay, and increase the patient's independence. Current research, project methodology, and evidence related to the topic are presented with the benefits of an early-mobility program for all stakeholders.

PICO QUESTION

In post-surgery orthopedic patients does a nurse-led early mobility education program for caregivers promote early mobilization of patient's post-recovery (within 12-hours) compared to only patient-centric education during a hospital stay (1-4 days)?

LITERATURE REVIEW

A literature review provided important support for a nurse-led early mobility education program for caregivers and family to promote mobility during post-recovery.

The literature on nurse-led early mobilization programs frequently displays one of three themes

- Early postoperative mobility and improved patient outcomes
- Promoting caregivers' education and training
- The importance of mobility

Interactive and family-oriented education in routine nursing care promotes better patient outcomes (1) For example, educating family and caregivers is beneficial and can reduce the patient's length of stay (2).

Recognizing the importance of mobility is critical in developing successful interventions that promote mobility and express the detrimental effects of prolonged bed rest during a hospital stay (3).

Caregiver preparedness is essential to minimizing adverse outcomes and empowers the caregiver or family through understanding about the care being provided (4).