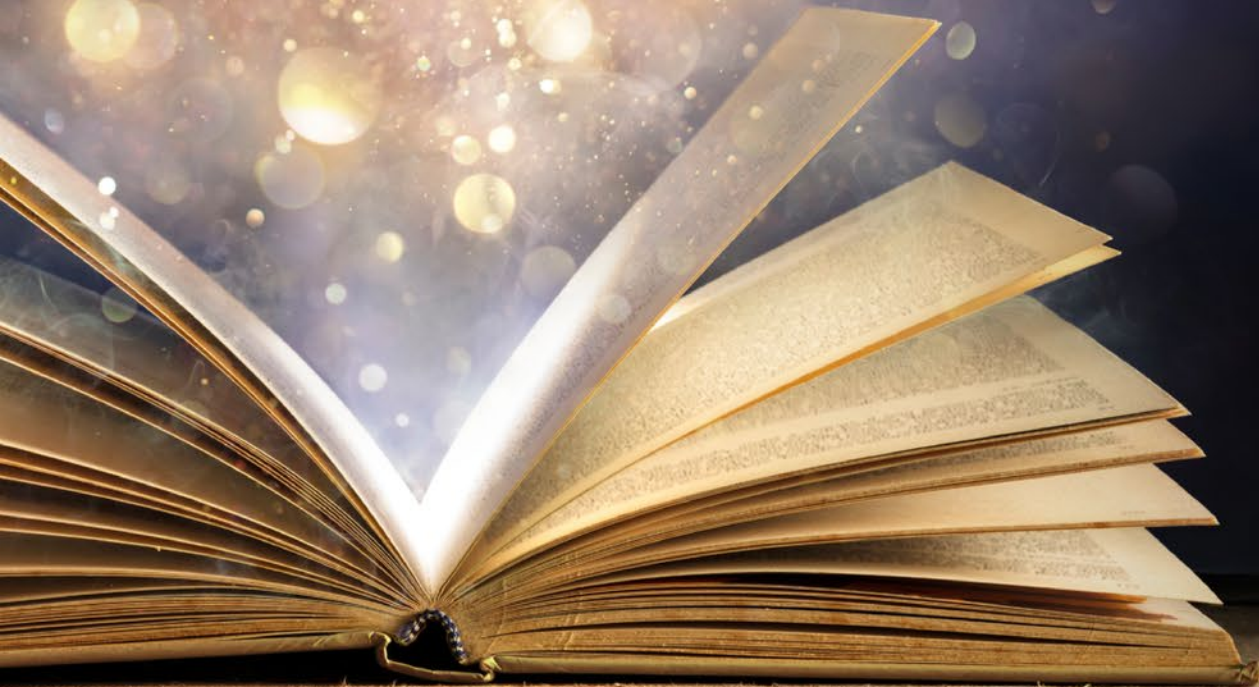


VIZIENT CONNECTIONS SUMMIT

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THE POSSIBILITIES



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## **UMove to Improve: Designing a Sustainable, Multidisciplinary Patient Mobility Program**

**Ellen Felkel-Brennan**, DNP, RN, CPHQ, Associate Vice  
President, Quality, Safety, and Regulatory

**Lindsay Bagdis**, PT, DPT, Quality Patient Safety, Regulatory  
Project Manager,  
UMass Memorial Medical Center

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# Learning Objectives



- Describe three key characteristics of a successful multidisciplinary mobility program.
- Identify key performance indicators to monitor and share with frontline staff and providers to generate ideas for ongoing engagement.

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# UMass Memorial Medical Center: Who We Are



## University Campus

- Children's Medical Center
- Adult and Pediatrics Level One Trauma Center
- Transplant Services
- Critical Care (Adult & Pediatric)
- Emergency Department
- Mental Health (In-Patient & EMH)
- Surgery
- Ambulatory Clinics
- Medical School

## North Pavilion

- Inpatient Services
- Radiology Services
- OT/PT Rehab Services

## Memorial Campus

- Obstetrics
- Critical Care (Adult & NICU)
- Emergency Department
- Surgery
- Ambulatory Clinics

## Hahnemann Campus

- Surgery – Outpatient
- Ambulatory Clinics

## Queen Street Campus

- Behavioral Health (Psychiatric Treatment and Recovery Center)

FY24

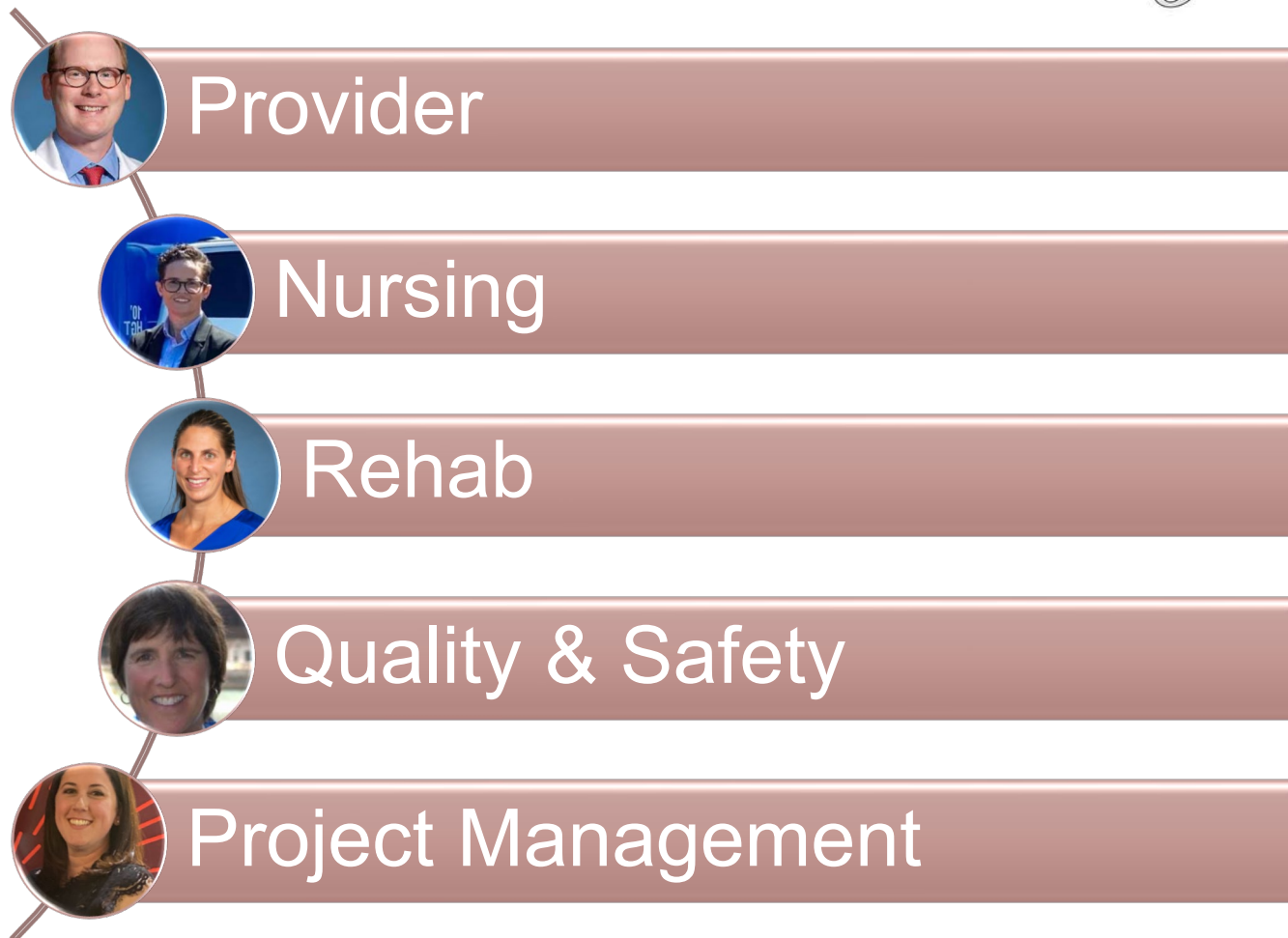
Licensed Beds: 821 + 69 bassinets

Births: 5,200

ED visits: 145,000

Discharges: 45,067

Ambulatory clinic visits: 954,901



# Background



Leads to:

This ↓

Lack of standardized process to assess and track patient's mobility

Patient Safety Indicator (PSI) data below national average

Capacity issues and patient's "stuck" in hospital

That ↓

Difficulty quantifying patient mobility

Senior leadership investment to move to Zero Harm (Pressure injury, Venous Thromboembolism (VTE), Falls)

Increased length of stay, impacting financial bottom line

# Problem Statement and Scope



---

There is a lack of standardized mobility assessment and goal setting to ensure patients are mobilized to their highest capability within UMass Memorial Medical Center (UMMMC) acute care units.

---

Studies have shown that patients can start to experience a decline in mobility within two days of being hospitalized, and older adults (>65) are 61 times more likely to develop deficiencies\*

---

Scope In: All acute care units at UMMMC

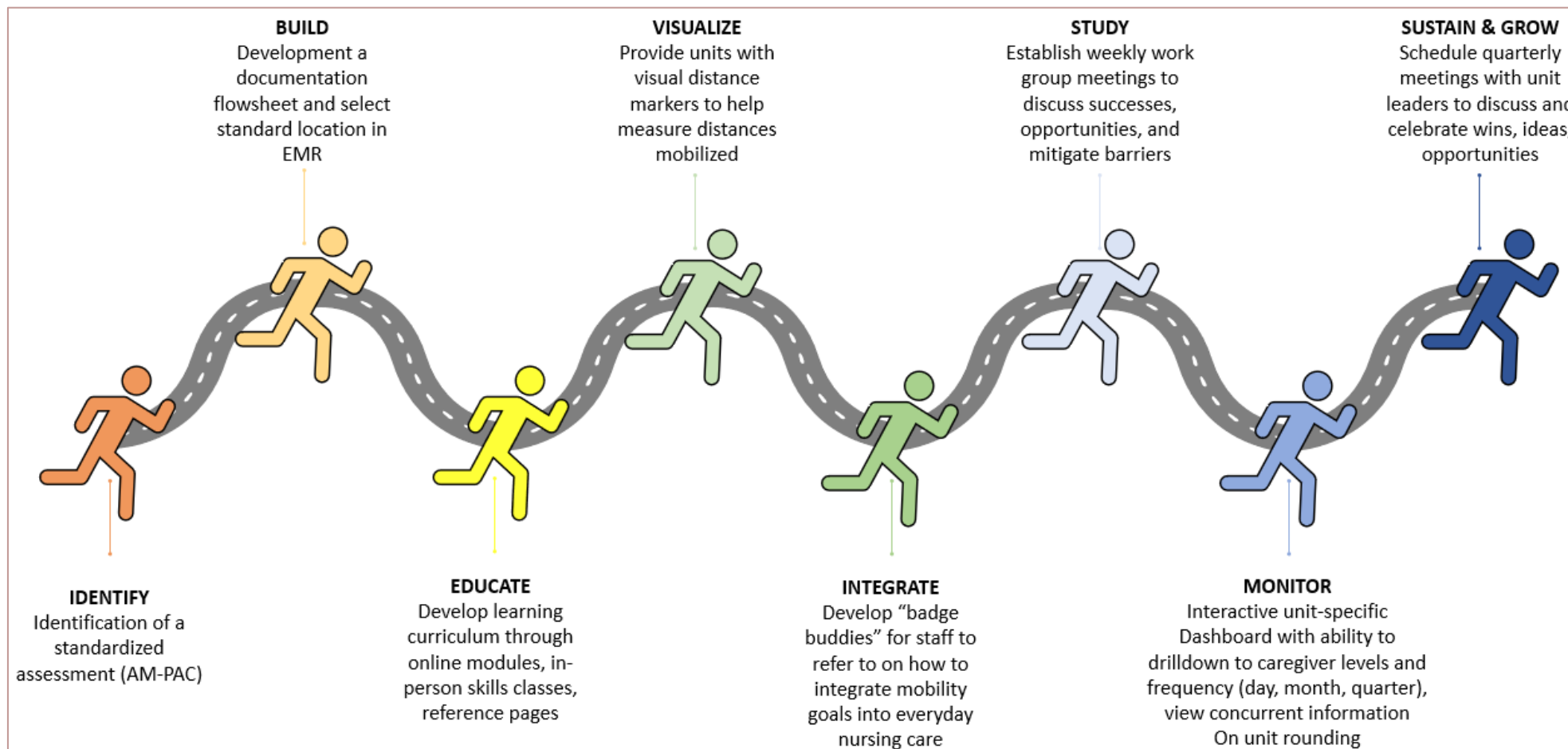
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Scope Out: All other units/areas at UMMMC

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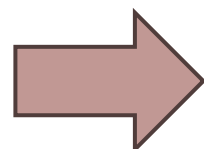
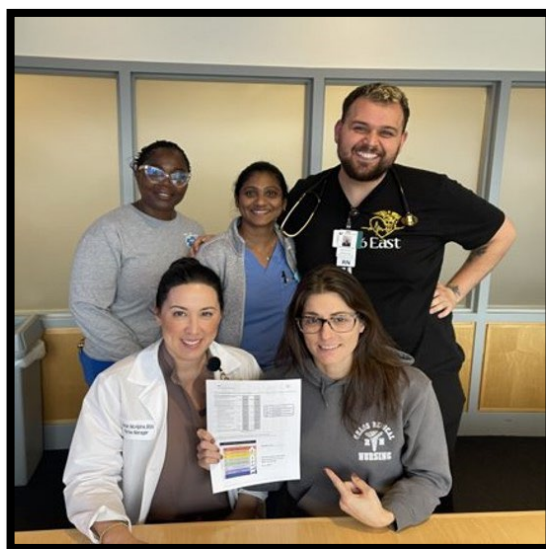
\*See references.

# Project Milestones



# Starting from Scratch: Critical Foundations

- Tool development (from on paper to EMR)
- Collection of paper data and daily census to compare completions to
- Engagement: Frontliners naming the program



Within EMR Flowsheet

0625	
AM-PAC Mobility Assessment	
Turning in Bed Without Bedrails	4
Lying on Back to Sitting on Edge of Fla...	4
Moving Bed to Chair	4
Standing Up from Chair	3
Walk in Room	3
Climbs 3-5 Stairs	3
AM-PAC Score	21
* Mobility Goal	Walk 10 Steps ...
Highest Level of Mobility Achieved	6 - Walk 10 Ste...

Within Row Information

Row Information	
How much help from another person does the patient currently need moving to and from a bed to a chair (including a wheelchair)?	
Total	Requires total assistance, or cannot do at all.
A lot	Requires a lot of help (maximum to moderate assistance). Can use assistive devices.
A little	Requires a little help (supervision, minimal assistance). Can use assistive devices.
None	Does not require any help and does the activity independently. Can use assistive devices.

# Development of a Toolkit for Units and Leaders



Weekly meetings with multidisciplinary team: What's going well? What isn't working?

Unit Huddles



**SUGGESTED WAYS TO MEET PATIENT GOALS**

APACHE II SCORE	LEVEL	SUGGESTED WAYS TO MEET PATIENT GOALS
24	3	<b>WALK 250 FEET OR MORE:</b> Walk in hallway, multiple short walks add up!
19-23	2	<b>WALK 25 FEET OR MORE:</b> Walk length of room or utilize distance markers
15-18	1	<b>WALK 10 STEPS OR MORE:</b> Walk around the bed to the other side
11-14	0	<b>STAND (1 OR MORE MINUTES):</b> Wash face, comb hair, shave, brush teeth standing at sink, change hospital gown
8-10	-1	<b>MOVE TO CHAIR/COMMODE:</b> Sit in chair for meals, use commode for toileting, transfer to wc
5-7	-2	<b>SIT AT EDGE OF BED:</b> Giving meds, listen to lung sounds, skin checks, wash up, change hospital gown
1	-3	<b>BED ACTIVITIES/DEPENDENT TRANSFERS:</b> Exercise in bed, repositioning, performing personal care/hygiene, linen change, turning left side, slide to cardiac chair
	-4	<b>LAY IN BED</b>

Caregiver development of quick references

Discussion of barriers to patients not mobilizing or meeting their goals



Development of comprehensive education: understanding "the why"

**Tips for Mobilizing Patients at Bed Level**

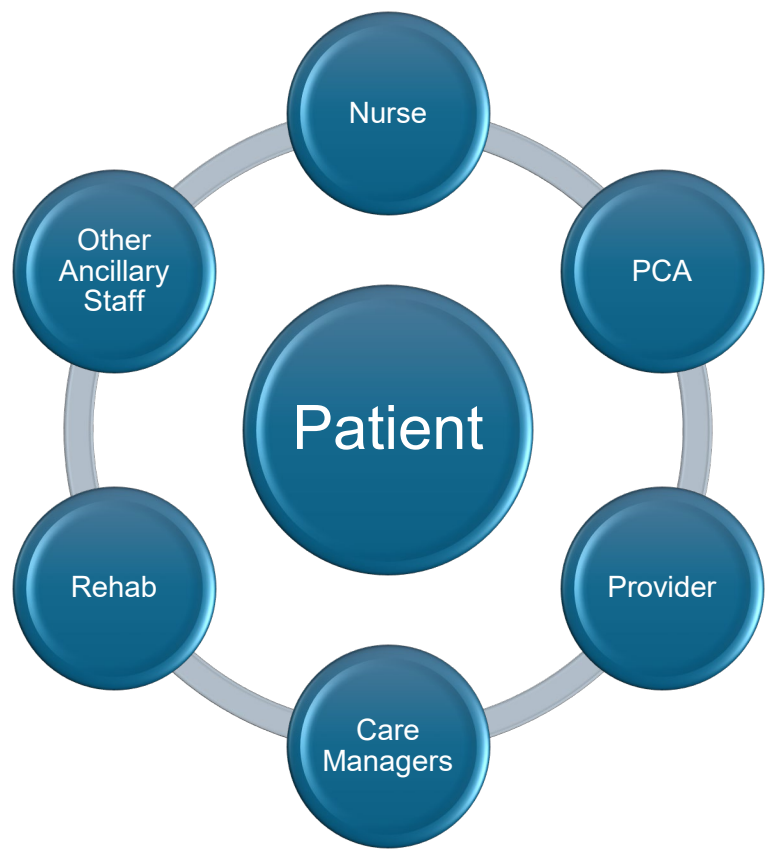
Passive Range of Motion	Active Range of Motion and Activities in Bed	Progressing to Sitting Up
<b>Mobility Goals Bed Activities and Edge of Bed</b> <b>For Patients Who:</b> <ul style="list-style-type: none"> <li>Have impaired alertness</li> <li>Are intubated or sedated</li> <li>Cannot perform active or assisted range of motion</li> </ul>	<b>Mobility Goals Bed Activities and Edge of Bed</b> <b>For Patients Who:</b> <ul style="list-style-type: none"> <li>Cannot sit at the edge of the bed</li> <li>Can perform bed level exercises (see handout)</li> <li>Can assist with bed mobility (rolling, repositioning)</li> <li>Help with Activities of Daily Living in bed (washing, gown changes)</li> </ul> <b>Interventions:</b> <ul style="list-style-type: none"> <li>Gradually raise the head of the bed</li> <li>Use "chair" position if tolerated</li> <li>If tolerated, consider progressing to edge of bed sitting or out of bed transfer (using lift or slide to cardiac chair)</li> </ul>	<b>Mobility Goal Standing</b> <ul style="list-style-type: none"> <li>Use bed rails, controls, and transfer sheets to assist patient to edge of bed</li> <li>If patient can:                             <ul style="list-style-type: none"> <li>Sit edge of bed with minimal help</li> <li>Perform active leg exercises</li> </ul> </li> <li>Progress to standing with assistive device and gait belt</li> </ul>

Sharing the data

AM-PAC Short Form Manual (v.2). 2016. Trustees of Boston University. Used with permission from Boston University School of Public Health, 715 Albany Street Talbot T5W, Boston, MA 02118

\*The Johns Hopkins Daily Mobility Goal Calculator, created by Johns Hopkins Activity and Mobility Promotion (bit.ly/HopkinsAMP), is licensed under a Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License. To view a summary of license, please access <http://creativecommons.org/licenses/by-nc-nd/4.0/>

# Multidisciplinary Approach to Patient Mobility



Admission Date	Bed	Location	Patient	MRN	Age/Gender	Service	Attending	AM-PAC Score
	418 A	418 A			79 y.o. / M	Hospital Medicine-Int... Medicine	MD	12
	422 A	422 A			82 y.o. / M	Hospital Medicine-Int... Medicine	MD	21

Comprehensive Flowsheet

Go to now

7/14/2025

UMass Memorial Medical Center- University Car

Time: 1900 2000 2004 2006 2100

✓ Vitals

Temp 36.5 ...

Temp Source Oral

Heart Rate 78

Resp rate 18

BP (cuff) 115/65

Patient Position Lying

GCS 14

✓ Pain

Pain Assessment

Pain Score

✓ Positioning

Body Position supin... supin... supin...

✓ Mobility

AM-PAC Score 21

JH-HLM Mobility Goal Walk ...

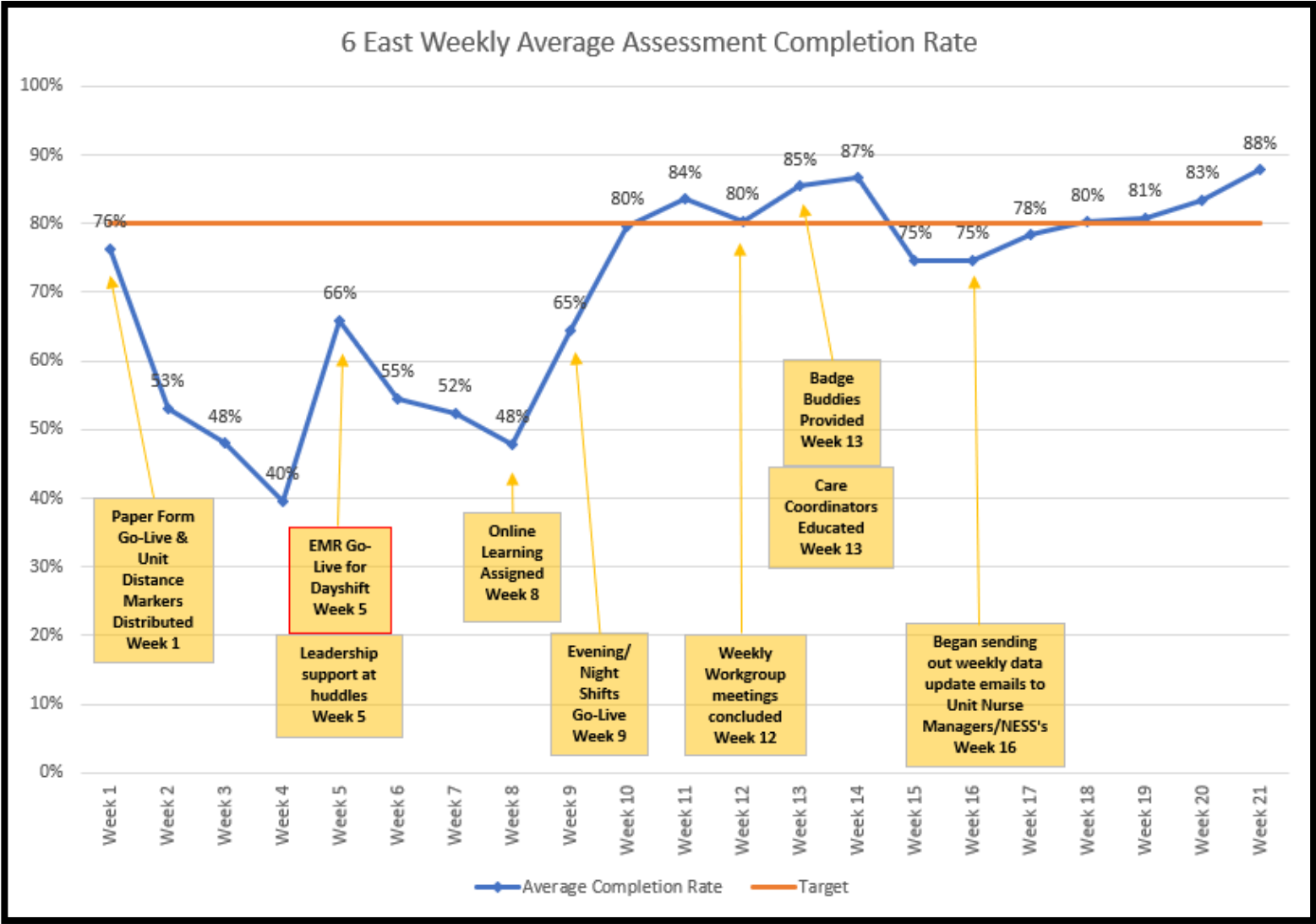
Highest Level of Mobility Achieved 8 - W...

AM-PAC Short Form Manual (v.2). 2016. Trustees of Boston University. Used with permission from Boston University School of Public Health, 715 Albany Street Talbot T5W, Boston, MA 02118

\*The Johns Hopkins Daily Mobility Goal Calculator, created by Johns Hopkins Activity and Mobility Promotion (bit.ly/HopkinsAMP), is licensed under a Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License. To view a summary of license, please access <http://creativecommons.org/licenses/by-nc-nd/4.0/>



# Outcomes and Impact: The First Unit

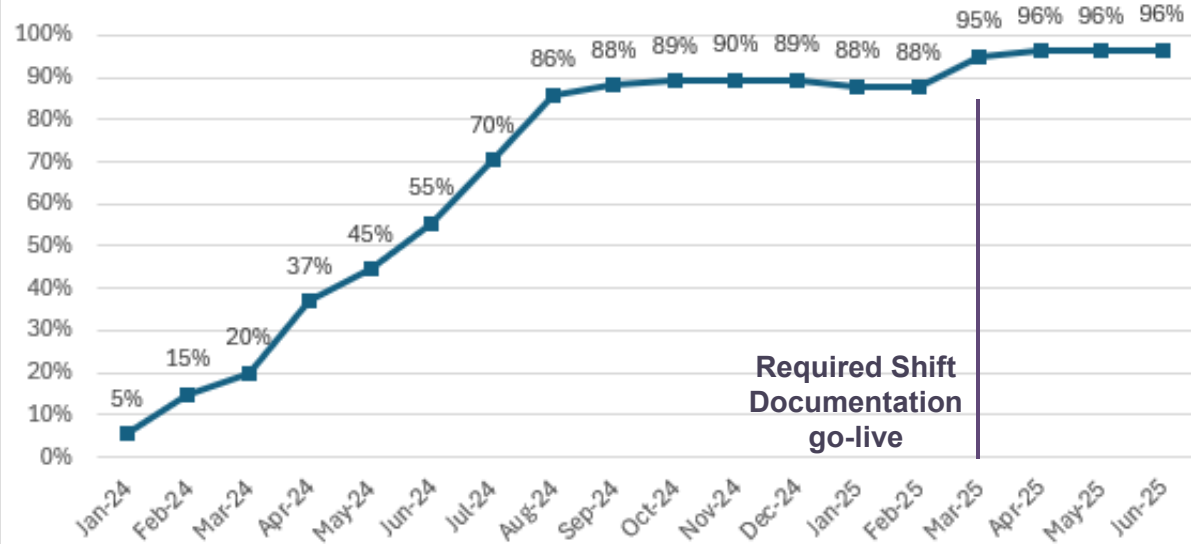


Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed June 2025.

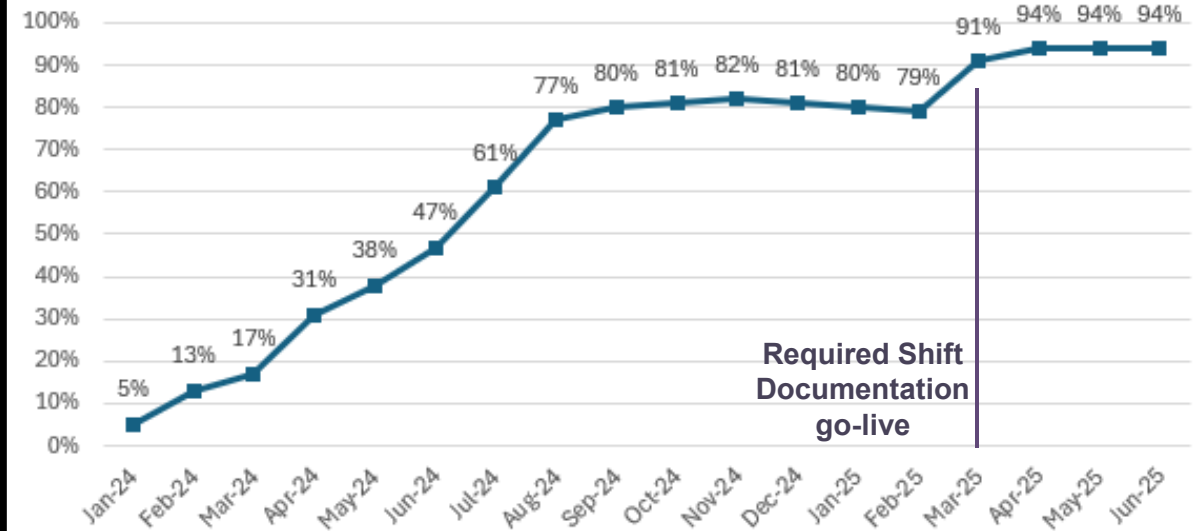
# Outcomes and Impact: 25 Acute Care Units Later



Assessment Completion Rates on Acute Care Units



Percentage of Patients Mobilized on Acute Care Units

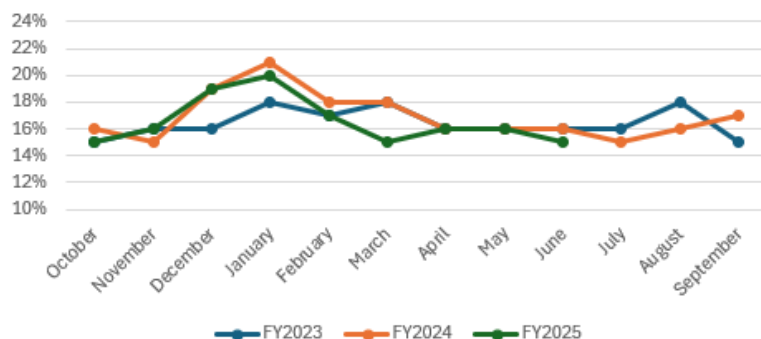


Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed June 2025.

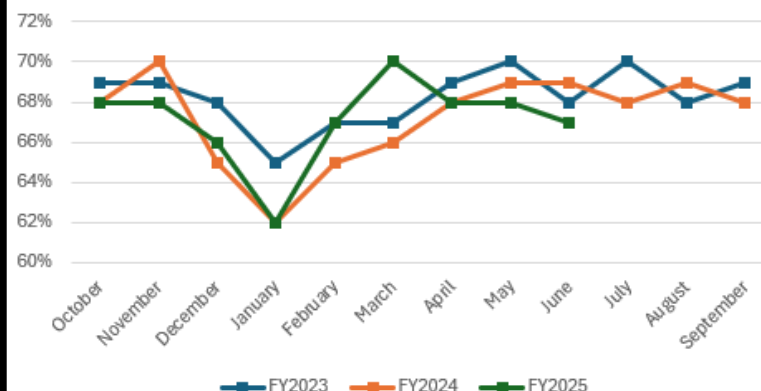
# Outcomes and Impact: Year Over Year Comparisons



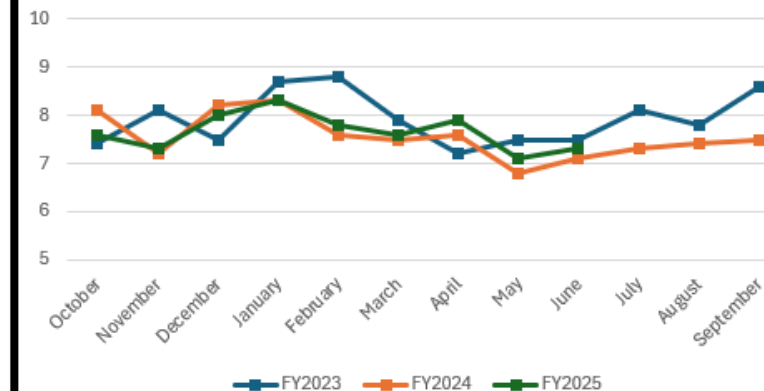
Discharges to Skilled Nursing Facilities:  
Year Over Year



Discharges to Home: Year Over Year



Average Length of Stay: Year Over Year

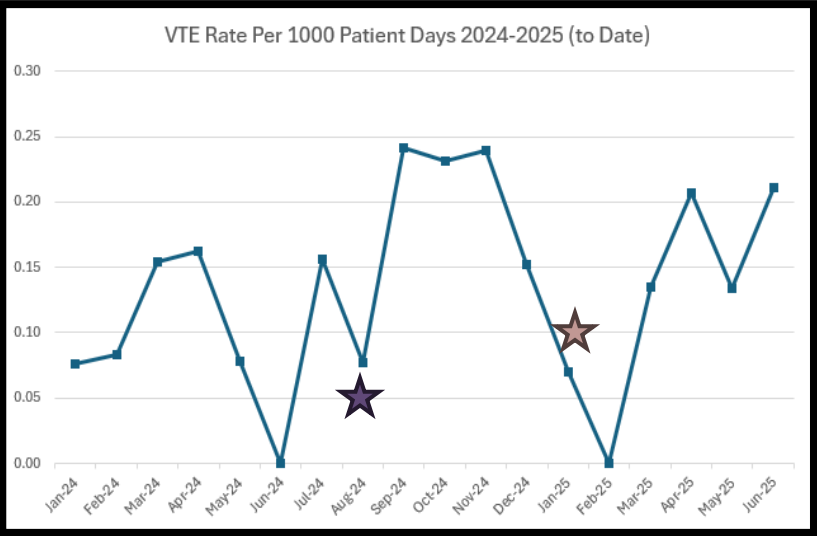


Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed June 2025.

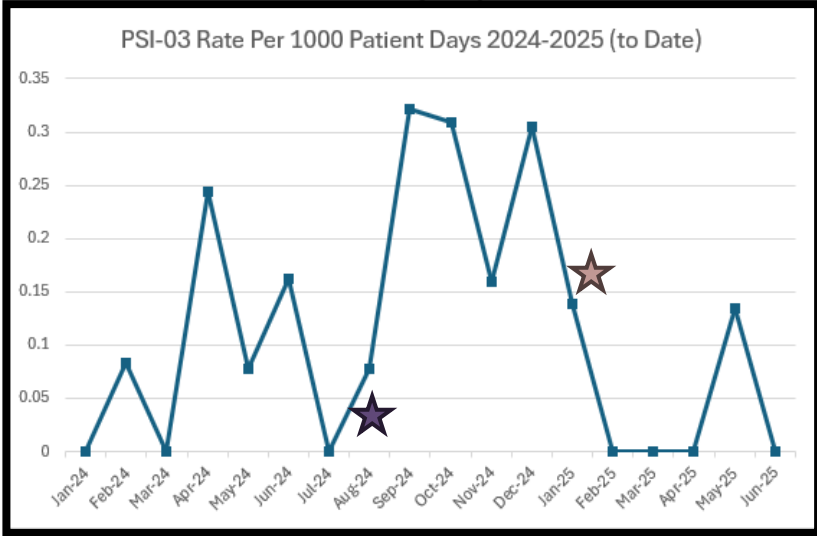
# Outcomes and Impact: Monitoring Patient Harm



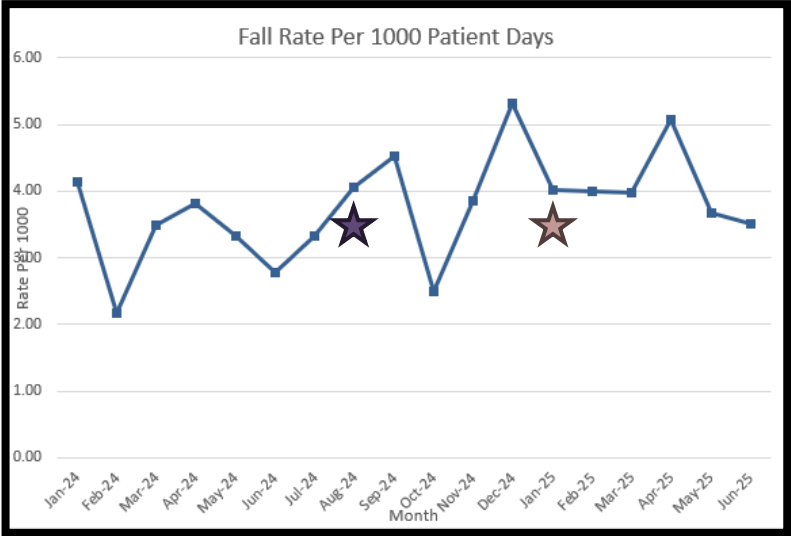
VTE/PSI-12



Pressure Injury/PSI-03



Falls

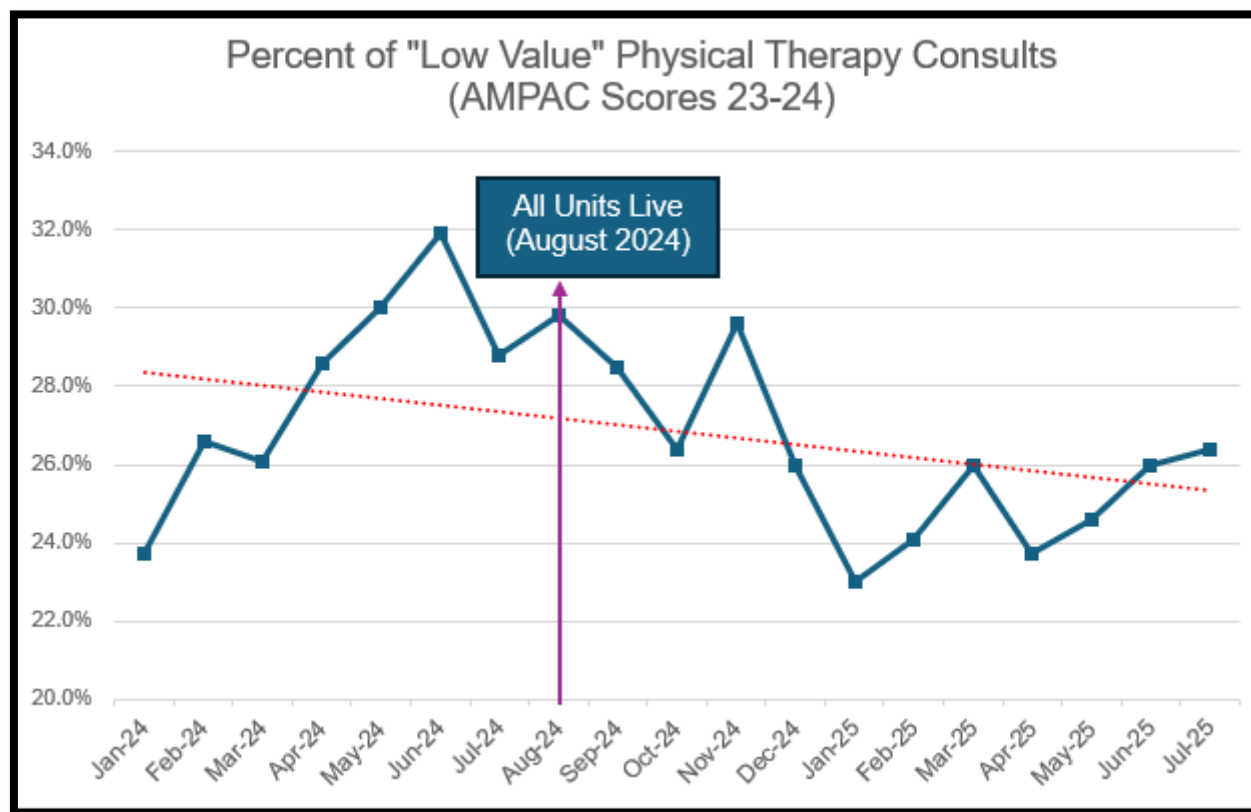


★ = All Acute Care Units Live

★ = North Pavilion Opens (+72 beds)

Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed July 2025.  
Data Source: Data from Vizient® Clinical Data Base used with permission from Vizient, Inc. All rights reserved. Accessed August 2025.

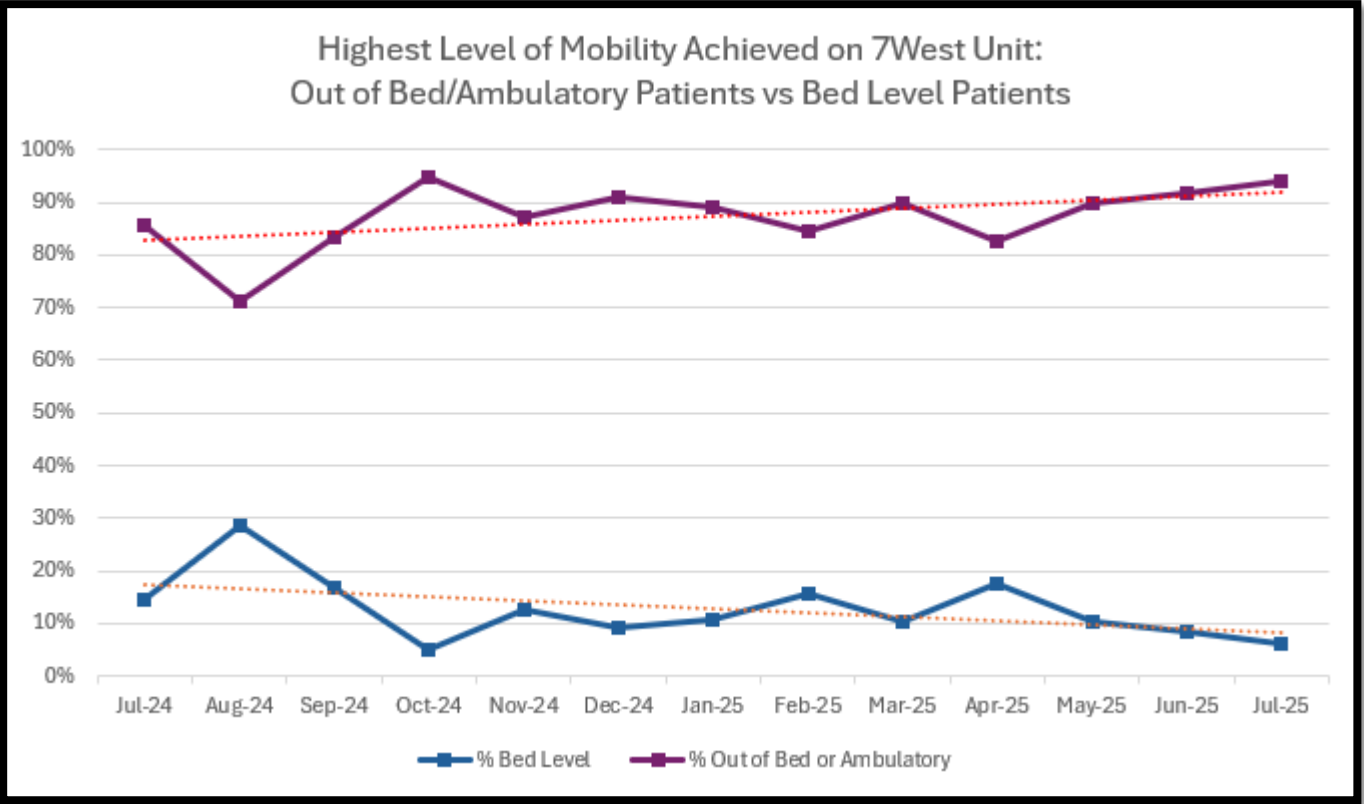
# Outcomes and Impact: Utilization of Physical Therapy Resources



Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed July 2025.

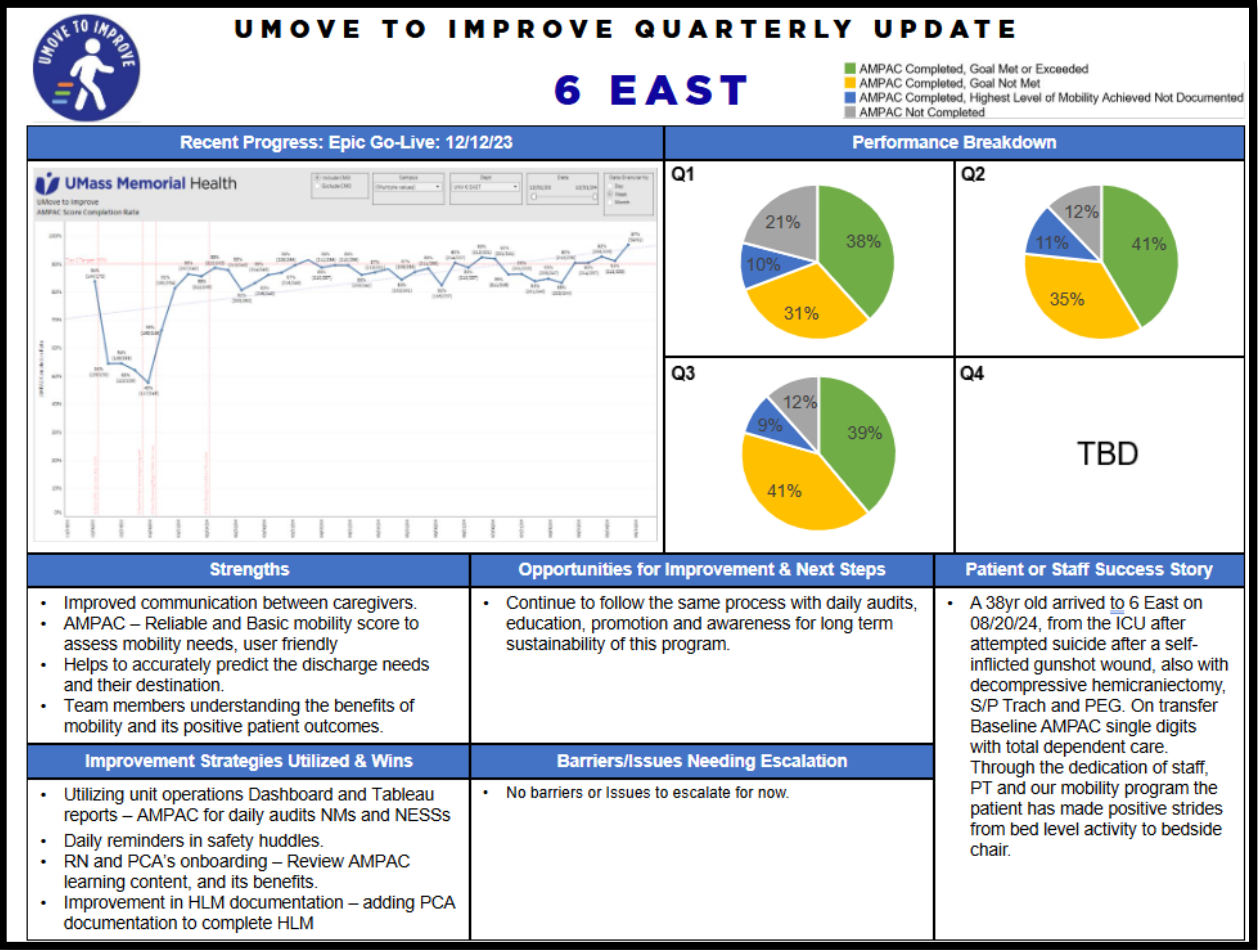
# Patient Mobility: Are Patients Moving More?

*Beginning to See a Positive Shift Over Time*



Data Source: Internal database UMass Memorial Medical Center. Permission to use from organization. Accessed July 2025.

# Sustainability and Next Steps



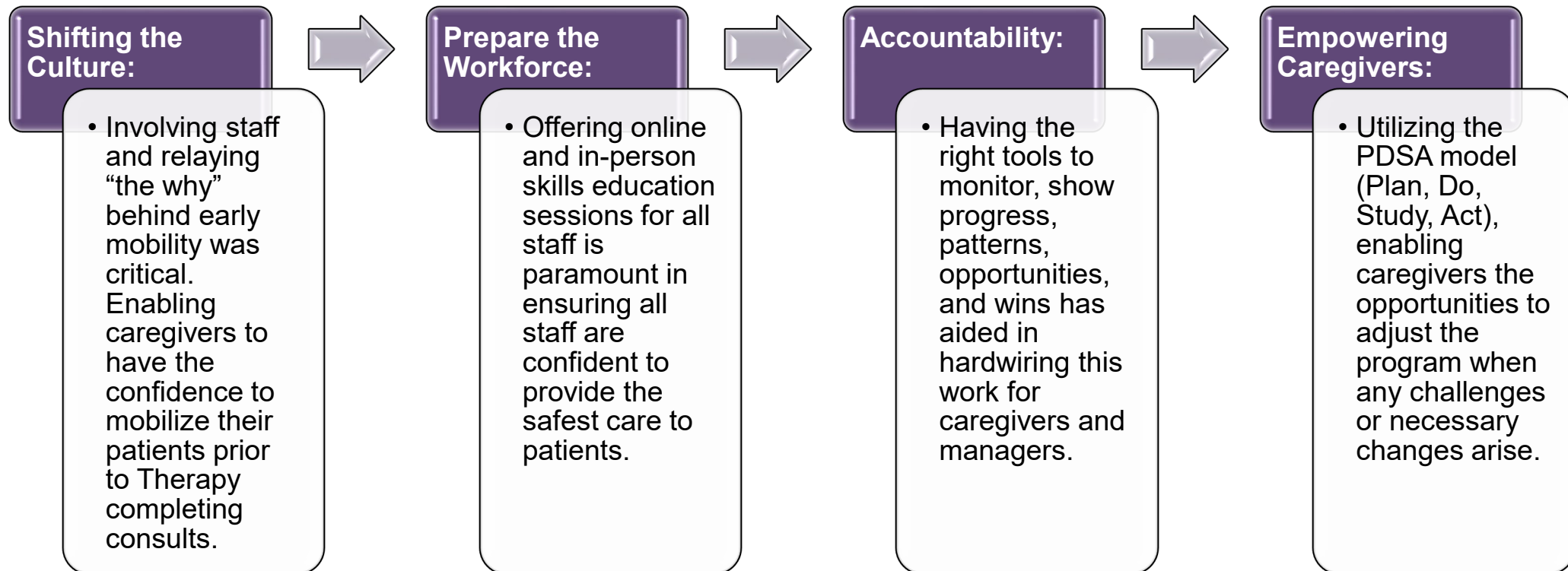
# Celebrate the Wins!

imagine  
THE POSSIBILITIES



- Caregivers enjoying a celebratory breakfast
- Individual awards for going the extra mile with their patient mobility

# Lessons Learned



# Key Takeaways



Know your baseline



Engage leadership



Engage frontline caregivers with “the why”



Bring in the frontliners to build the program—the people who will be doing the work



Embed into established workflows



Monitor and share



Celebrate the wins

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# Questions?



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