#### Get Moving Team: A Model to Promote Early Functional Mobility of Stroke Survivors in Acute Care



2024

↑ The James Beach Health Care Centre Childbirth Centre Main Entrance

Differential of



Kim Fitzpatrick OT Reg. (Ont.) Queensway Carleton Hospital



#### **PRESENTER DISCLOSURE**

- **Presenter:** Kim Fitzpatrick
- Relationships with commercial interests: None

#### MITIGATING POTENTIAL BIAS

- **Presenter:** Kim Fitzpatrick
- Mitigation of conflict: None



## **LEARNING OBJECTIVES**

#### **Learning Objective 1**

- Gain insight into the Get Moving Team (GMT) program Learning Objective 2
- Describe how GMT supports functional mobility in acute care

#### **Learning Objective 3**

Identify how GMT promotes stroke best practice in acute care



# Background

- Functional decline common in patients due to immobility in acute care
- Early and consistent mobility challenging in acute care
- The Get Moving Team (early mobility program) was successfully implemented November 2022 on med/surg units at QCH
- Inpatient stroke team identified the need for Get Moving Team to support early mobilization of stroke survivors in acute care





# Get Moving Team (GMT)

- High intensity short duration functional mobility program in inpatient medicine & surgery units
- Structured treatment protocol
- 7 day care model
- Members of team: Care Transition Coordinator, Rehab Assistants (RA) and Personal Care Aides (PCA).
- Unit Nurses, Physiotherapists and Occupational Therapists refer patients based on established criteria for safe participation.



### **GMT Goals and Interventions**

- · GOALS
- Early and consistent functional mobility to prevent deconditioning
- Return to preadmission living environment
- Shorter length of hospital stay and avoid alternate level of care (ALC) status

#### INTERVENTIONS

- Up in chair for meals
- Mobilization to bathroom
- Engagement in basic ADLs such as toileting and grooming
- Surface transfer practice
- Ambulation training 2x/day



## **Program Evaluation and Results**

- Phase 1: 280 patients (inpatient medicine and surgery units) during 20 weeks of program implementation
- Metrics Used: Timed Up and Go (TUG) test, Functional Independence Measure (FIM) score subscales, Get Moving Team Length of Stay, Discharge Destination, Patient survey
- Outcomes:
  - Improved functional mobility
  - Reduced length of stay
  - Supported return to preadmission home environment
  - High patient satisfaction and positive feedback



### **GMT Benefits for Stroke Survivors**

- GMT program expanded to Acute Medicine/Stroke Unit in Spring 2024
- Aligns with Stroke Best Practice Recommendations:
  - Early mobilization and engagement in functional activities (including ADLs)
  - 7 days/week of therapy
  - Frequent and short therapy sessions throughout the day
- Improved staff resources for acute stroke interventions
- GMT is a bridge between acute stroke care and outpatient stroke rehab
- Prevents deconditioning for patients waiting for stroke rehab



## **Questions?**





# For further details regarding GMT, please contact:

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- and/or
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# THANK YOU