

Mobilization of patients with hip fracture

A multidisciplinary approach for the planning of patients' mobilization

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I have become more aware of how important it is to get things done so that others can move on

Definitely, more patients are up. Also, there are more attempts to get them up (...) more patients get a chance to be mobilized early

Negotiations about whether 'it's your job' or 'my job' (the mobilization)...there's longer between them

I think the communication has improved. We have gained more respect for each others' professional areas

Introduction

The need for a **multidisciplinary approach** to treat and prevent complications after hip fracture surgery following the fast-track program (figure 1) is well established.

Studies have shown that working in multidisciplinary teams **challenges the collaboration** between the different professional groups.

Interviews with health professionals were conducted, focusing on the elements from relational coordination (figure 2), and showed:

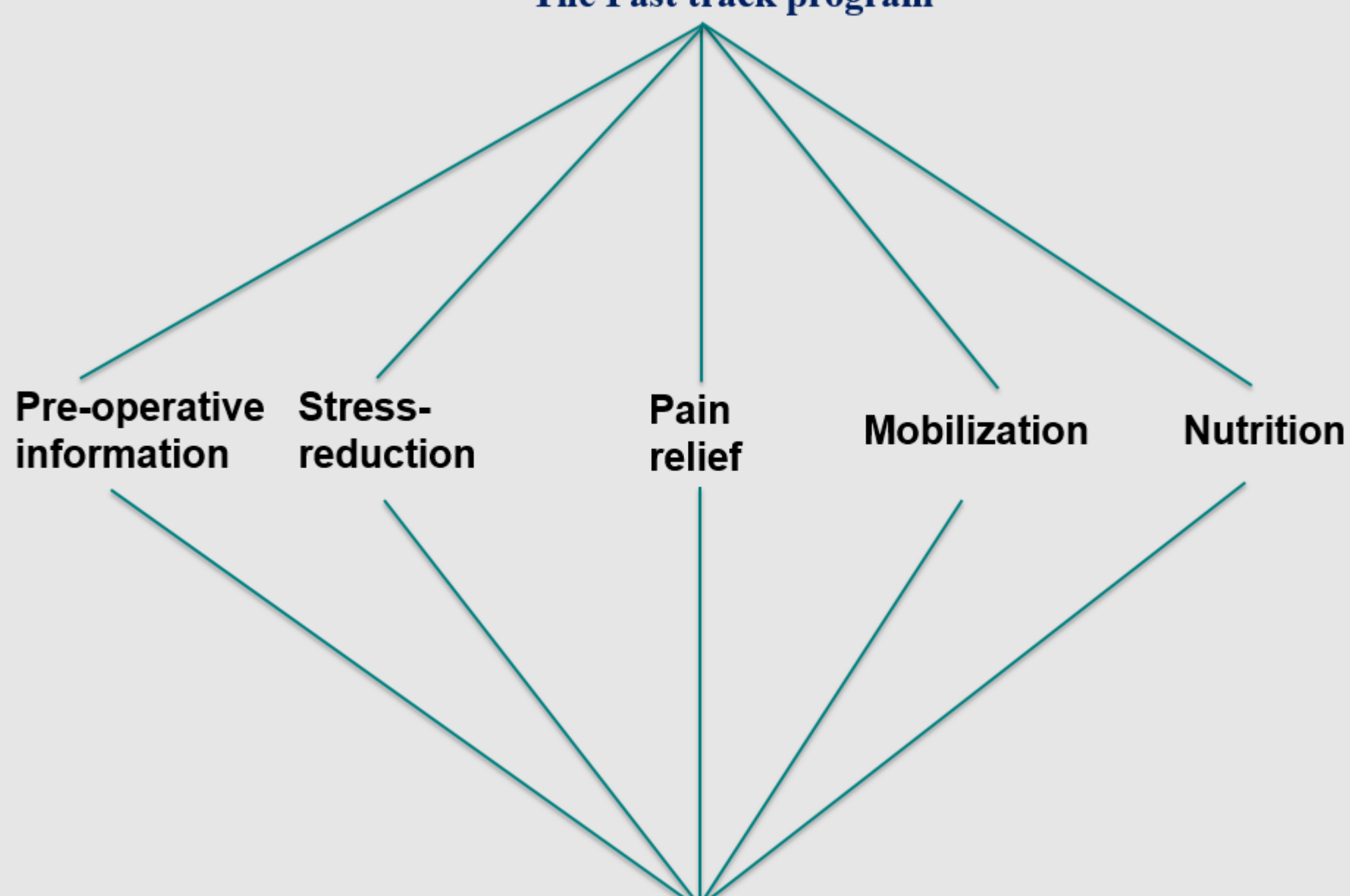
- mobilization of patients as part of the morning routine was associated with challenges in the multidisciplinary collaboration
- there was limited consensus on how to best plan the mobilization task between the different professional groups
- there was a lack of a common definition of the concept 'mobilization', uncertainty of whom had the main responsibility and a need for an optimization of the multidisciplinary communication

Early mobilization of the patients was therefore lacking due to inconsistencies in the multidisciplinary coordination

Aim

To explore whether an optimization of the daily planning of the patients' mobilization before breakfast and medication can improve the multidisciplinary collaboration and thereby aim for more patients being mobilized to avoid complications thereof.

The Fast track program



Reduced morbidity & accelerated convalescence (Kehlet, 2001)

Figure 1.

Methods

The study used the theory of relational coordination as a conceptual framework.

The interventions consisted of

- a multidisciplinary planning board where the patients' need for mobilization was being assessed each morning at 7.30 am by the nursing staff (picture below)
- changed working hours for physiotherapists in the ward with shift start from 8.15 am, contrary to before where shift started at 8.45 am
- an orderly in the ward each morning from 8.00-9.00 am

The interventions were carried out between February-May 2018.

Data collection consisted of

- focus group interviews before and after the intervention and field observations during the intervention focusing on communication and relationships among the health professionals

DATO	Vurdering	Farmakonorm	Porter	Fysioterapeut	Ergoterapeut
16/5	OP				
32.1	Red				
32.2	Red				
33	Red	X	X	X	
34	Red	X	X		
36.1	Red	X	X		
36.2	Red	X	X		
37.1	Yellow				
37.2	Yellow				
42.1	OP				
42.2	Green				
43.1	Green				
43.2	Yellow	X			
44.1	Red	X	X	X	
44.2	OP				
45.1	Yellow	X	X	X	
45.2	Green				
46.1	Yellow				
46.2	Green				
47					
48					

The multidisciplinary planning board

Red indicates a need for two people to mobilize, yellow a need for one person to mobilize and green where the patient is self-sufficient.

Pharmaconomists are marked when early pain relief is needed, orderlies are marked when additional assistance is needed for mobilization, physiotherapists are marked when early training is needed.

Occupational therapist write the time for ADL

Results

The professional groups experienced that the **relational coordination was optimized** after the intervention period:

- the multidisciplinary collaboration and communication increased during the intervention
- a shared purpose led to more attention toward the patients' mobilization
- an experience of more patients being mobilized in the morning
- a clinical tendency towards fewer cases of dysphagia

Relational Coordination

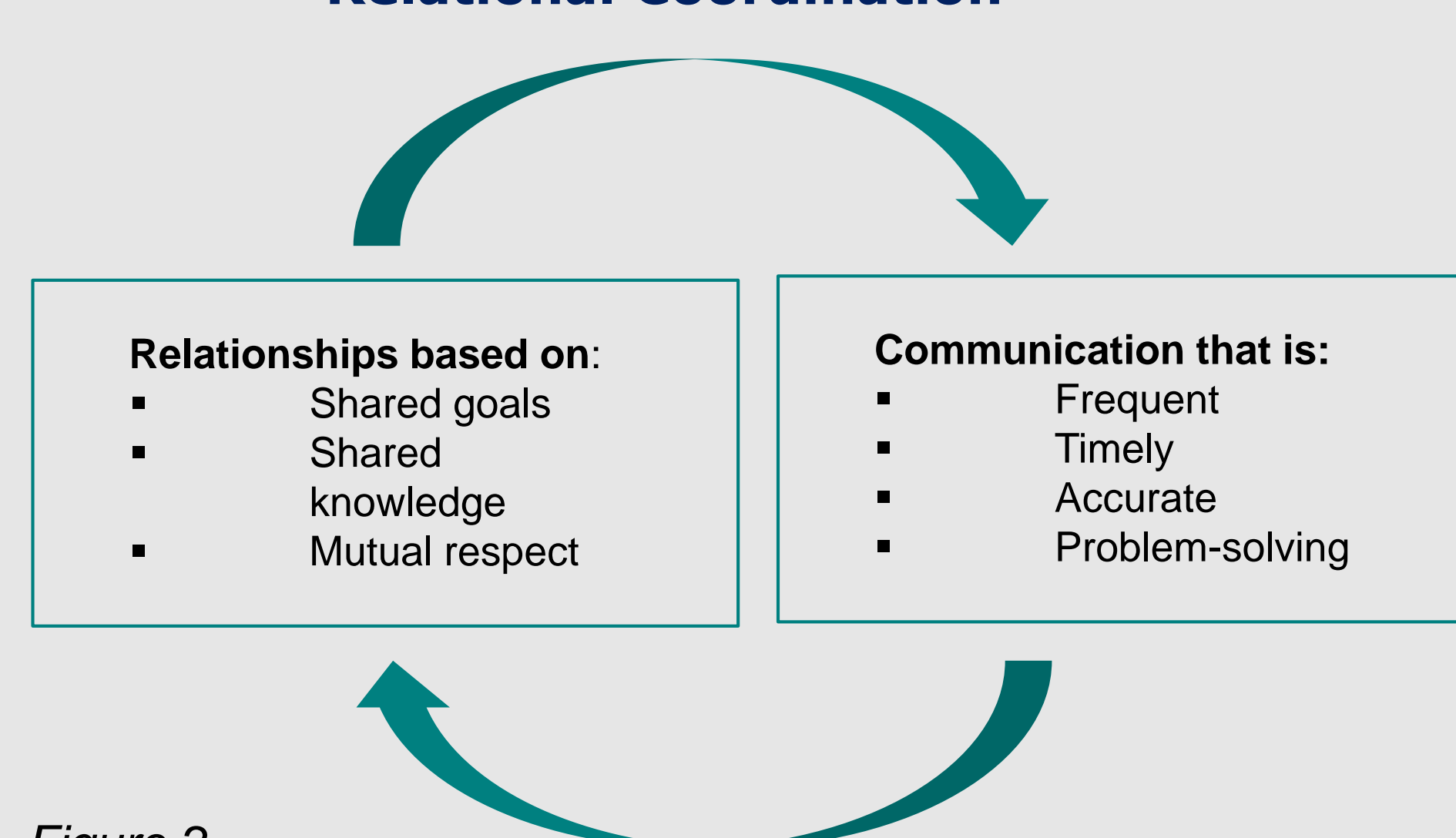


Figure 2.

Conclusion

The study demonstrates the value of focusing on the collaboration within the multidisciplinary team, using a relational coordination approach. Clarifying where health professionals have a shared goal may increase the efficiency of the available resources.

Implications for practice

Challenges in the fast-track concept can be found at the organizational level. By focusing on the relationships and communication among the professional groups it is possible to design practices that are applicable to all professionals and optimize patient care in an acute setting.