ATTITUDES AND BARRIERS RELATED TO PATIENT MOBILIZATION:
A Survey of General Medicine Nurses at Mount Sinai Hospital.

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2008: Rehabilitation and Nursing Departments in Joint Initiatives to Support Patient Mobilization on Medicine Units

- Nursing Education
- Communication Tools
- Purchase of additional walkers
2009 PROGRAM EVALUATION
Are these initiatives effective?

BARRIER ASSESSMENT
Are there other factors that limit patient mobilization by RNs?
• Determinants of Community Health Year II Faculty of Medicine, U of T

• Cameron Starratt and Monique Martin assisted in development and administration of questionnaire
The questionnaire

- Demographics

RN Opinions: Role and daily practice of RN mobilizing patients
  Importance of transfer training
  Usefulness of Patient Specific Transfer Guidelines
  Effectiveness of additional walkers and commodes
  Need for Other Equipment

Barrier Assessment Tool

Self report of pain/injuries
Questionnaire Results

- 61 respondents (37% of target group)
  - 33 <2yrs. experience
  - 11 2-5yrs.
  - 8  5-10 yrs.
  - 8 >10 yrs.
  - 1 did not specify

Data analyzed as a whole group and also by years of experience
Attitudes Towards Patient Mobilization

RNs asked to respond to various statements

Strongly    Somewhat    Neutral    Somewhat    Strongly
Agree        Agree              Disagree      Disagree

For purposes of reporting data responses of Strongly Agree and Somewhat Agree were combined as “Agree”
Attitudes towards Patient Mobilization: Results

• Mobilization minimizes complications and improves patient outcome
  97% agree (88-100% range among groups)
• Patient mobilization is an important RN role
  92% agree (75%-100% range among groups)
    75% of 5-10 yrs. exp.
    100% of 2-5 yrs exp.
• I consider patient mobilization as part of my daily care plan
  93% agree (63%-100% range among groups)
    63% of 5-10 yrs. exp.
    100% of <2yrs and 2-5 yrs. exp.
Barrier Assessment

A list of 20 potential barriers were listed; RNs were asked to indicate to what extent each impacted on mobilization of patients:

To a great extent  To a moderate extent  To a little extent  To no extent  No opinion
20 Potential Barriers

- Benefits of mobilization minimal
- RN does not have authority
- Lack of help from other staff
- Lack of appropriate equipment
- Management is not interested
- It is not the norm for RN to do so
- Mobilization not taught in RN school
- No monetary incentive to do so
- Increase risk to pt without equivalent benefit
- The RN does not see the value
## 20 Potential Barriers

<table>
<thead>
<tr>
<th>Potential Barriers</th>
<th>Other Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>The RN is unwilling to change/try new ideas</td>
<td>Lack of evidence to advantages</td>
</tr>
<tr>
<td>Increased risk of injury/strain</td>
<td>It costs too much time</td>
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<tr>
<td>There are no guidelines to do so</td>
<td>It is easy to fall back in old routines</td>
</tr>
<tr>
<td>It is easily forgotten during rush hrs.</td>
<td>Nobody oversees implementation</td>
</tr>
<tr>
<td>It is not part of RN role</td>
<td>Other work requirements make it infeasible</td>
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</tbody>
</table>
BARRIER ASSESSMENT

To present responses in a meaningful way they have been regrouped:

To a great/moderate extent  
To a little extent  
To no extent/no opinion

The 20 Potential Barriers were then ranked into the following categories:

**Significant Barrier:** If >40% responses in great/moderate extent
**Possible Barrier:** If responses equally distributed between 3 categories.
**Not a Barrier:** If >40% responses in no extent/no opinion
Barriers
As identified by all respondents

**Significant Barriers**
- Lack of appropriate equipment
- Increased risk of injury/strain
- Easily forgotten in rush hours

**Possible Barriers**
- Lack of help
- Costs too much time
- Other work makes it unfeasible
Barriers
As Identified by Respondents  <2 yrs exp.

Significant Barriers
Lack of appropriate equipment
*Increased risk of injury/strain
Easily forgotten in rush hours
Costs too much time

Possible Barriers
Lack of help by other staff
RN does not have authority to do so
Risk to patient greater than benefit
Barriers
As Identified By Respondents 2-5 years exp.

**Significant Barriers**
- Lack of appropriate equipment
- Easily forgotten in rush hours

**Possible Barriers**
- Increased risk of injury/strain
- Lack of help
- Costs too much time
- Other work makes it infeasible
Barriers as Identified by RNs 5-10 yrs. exp.

**Significant Barriers**
- Lack of appropriate equipment
- Increased risk of injury/strain
- Lack of help
- RN feels benefits are minimal
- Management not interested

**Possible Barriers**
- Easily forgotten in rush hours
- Other work makes it infeasible
- RN does not have authority to do so
- Easy to fall back to old routines
- Nobody oversees
Barriers as Identified by RNs >10 yrs. exp.

**Significant Barriers**
None

**Possible Barriers**
- Lack of appropriate equipment
- Increased risk of injury/strain
- Lack of help
- Other work makes in infeasible
In Summary

- RNs surveyed appreciate the importance of patient mobilization and generally consider it as part of the RN role and patient care plan.
- RNs across all years of experience consider the following as Barriers to Patient Mobilization:
  - Lack of Equipment
  - Lack of Help
  - Increased risk of injury/strain
  - Other work makes it infeasible
In Summary

• Survey respondents with less years of experience (< 5 yrs.) identify the theme of time constraints as a barrier to mobilizing patients to a greater extent than their more experienced peers.

• Survey respondents with 5-10 yrs. experience do not agree as strongly as other groups that mobilization is an important RN role and part of their daily care plans. This group also suggests that barriers to mobility include a perception that management is neither involved in or monitoring this activity.

• Both <2yr. and 5-10 yr. groups suggest another barrier is that RNs do not have authority to mobilize patients.
Study Limitations

- Less than 50% of target population completed survey.
- Some RNs did not complete entire survey.
- A few RNs confused about wording.
- Nursing surveys have low re-test consistency because of unpredictable work environment.
- There could be various interpretations of questions.
Recommendations

- Additional equipment is needed to further promote safe patient mobility and reduce staff injury. Ongoing mobility education has also been identified as necessary and effective in this area.

- Manpower and time management issues should be discussed further. Creative solutions may be necessary due to budget restraints. As less experienced RNs identify time constraints as a greater issue; perhaps more experienced RNs could offer support and strategies to assist/mentor their coworkers in this area.

- RN participation in patient mobilization should be continually encouraged and supported.
Thank You!!

Any Questions?