Taking a Big Step to Shorten LOS: Expediting Patient Recovery Utilizing B.M.A.T.

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Taking a Big Step to Shorten LOS: Expediting Patient Recovery Utilizing B.M.A.T.

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Background / Significance

• Immobility leads to undesired complications during a patient’s hospital stay, including deep venous thrombosis (DVT), pressure ulcers, and falls. By avoiding these complications, hospital stays are reduced.

• In mid-2022, hospitalists brought their concern about lack of early patient mobilization impacting number of DVTs and length of stay to the attention of nursing practice leaders.

• The BMAT – an evidence-based tool designed for nurses to assess patient mobility in acute care – was introduced by the rehab team.

Purpose / Goals / Objectives

• Goal of this study was to encourage early patient ambulation and decrease patient length of stay using the evidence-based nurse-driven Bedside Mobility Assessment Tool (BMAT).

Methods / Implementation Plan

In July 2022, following hospitalists’ request to address early mobilization, the rehab team presented the BMAT tool to nursing team to help improve patient outcomes.

From August to October 2022, interprofessional collaboration between nursing and rehab resulted in nursing staff being trained to use BMAT at least once a shift.

Results / Outcomes

• Prior to the BMAT initiative implementation, the ALOS was 6.60 days.

• Following BMAT’s full implementation, the four-month ALOS averaged 4.76 days This represents a 28% decrease and nearly two-day decrease in length of stay.

• Early mobilization of hospitalized patients will improve patient outcomes.

• Having an evidence-based tool that validates nursing assessment empowers nurses and ensures interventions are in place for safe early mobilization resulting in expedited discharges and transitions of care at a higher functional level.

Discussion

References


