Implementation of a Deconditioning Prevention Program: Getting Dressed Makes a Difference

Seleem R. Choudhury

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ABSTRACT

Objective: Keep patients participating in activities of daily living and self care

Aim: Reduce the emotional, physical and financial toll of hospitalization

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METHODS AND MATERIALS

To prevent deconditioning through the development of promoting activity by getting dressing in day clothes encourage hospital patients to be more active, stay conditioned and help them focus on recovery?

RESULTS

Three months of data were analyzed and compared in 2016 and 2017. The data were also segregated into age groups to analyze any benefit to over 65-year-olds.

The comparison did not demonstrate a clear correlation that the deconditioning program impacted the LOS and Patient Satisfaction.

The data from median versus mean showed all age groups LOS did decrease.

Patient Satisfaction metrics (n=207) showed no clear inference or consistent pattern that deconditioning program improved satisfaction. Scores stayed comparable to previous years, especially among 18-54 age group. The 75 plus age group did see a decline in scores. Hospital Acquired Complications (HAC) was not a reliable indicator with only one incident in a two-year mortality.

Figure 1. LOS by age

Figure 2. Nurses' attitude toward your requests

Figure 3. Extent to which you felt ready to be discharged

Figure 4. Staff effort to include you in decisions about your treatment

DISCUSSION

The importance of being active is universally understood, yet hospitals struggle to implement this action. Data of 1 year mortalities of over 65 support that hospitals need to do more to improve this outcome.

A simple program of getting dressed everyday has the potential to reduce LOS and with further study, improve 1-year mortality.

This study also showed that whilst patient satisfaction is not increased, it also does not significantly decrease therefore it's possible to assume that our patients want hospital staff to be assertive with preventing Deconditioning Syndrome.

Finally, whilst not supported in this study future work, could analyze staff's perception of patient readiness for discharge along side data gradually demonstrating a decrease of LOS of 75-year old.

REFERENCES


