

Prescribed Exercise Program during inpatient rehabilitation (PiPER)

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Problem Statement

It is recommended that patients admitted for inpatient rehabilitation should receive at **least 1.5 to 3 hours of therapy sessions daily** during their stay^{1,2}.

But this is not achieved **due to the lack of therapy during the weekends and public holidays.**

Therefore, patients undergoing inpatient rehabilitation will **benefit from a higher compliance to a weekend exercise program**; as the baseline data shows that **compliance rate has been low at approximately 60%.**

In this project, we have identified several areas which can be improved.

Potential Solutions

ROOT CAUSE	INTERVENTION	DATE OF IMPLEMENTATION
Lack of standardised workflow	Implement a standardised workflow:	Dec 2022
Poor health literacy	To educate patients with printouts	Feb 2023
Unconducive Environment	To create/allocate a dedicated portion of the cubicle/ ward	March 2023
Lack of Carer/ Family Engagement	To involve the family members/carers	April 2023

WEEKEND EXERCISE PROGRAM- ORDERING WORKFLOW

1. Check if someone else has already created exercise order for the week. (Don't duplicate orders)
2. Use "free text" under "order tab"
3. Set as the date of "Friday"
4. Set as "3 days"
5. Set as 20:00 hours
6. Use smart text: Weekendex
7. Add your exercises (to reorder every week please) and click "sign"
8. Doctors will discontinue all exercise orders weekly, Monday by 12pm.



Project Aim

To increase the compliance rate of prescribed exercise programmes on weekends from 62% to 80% in inpatient rehabilitation patients in AH Ward 3 within the next 6 months.

Lessons Learnt

Lesson 1:

Standardisation of workflow.

Implementing a standardised workflow had been one of the most significant interventions. Noticeable improvements were seen in the compliance rate with this implementation.

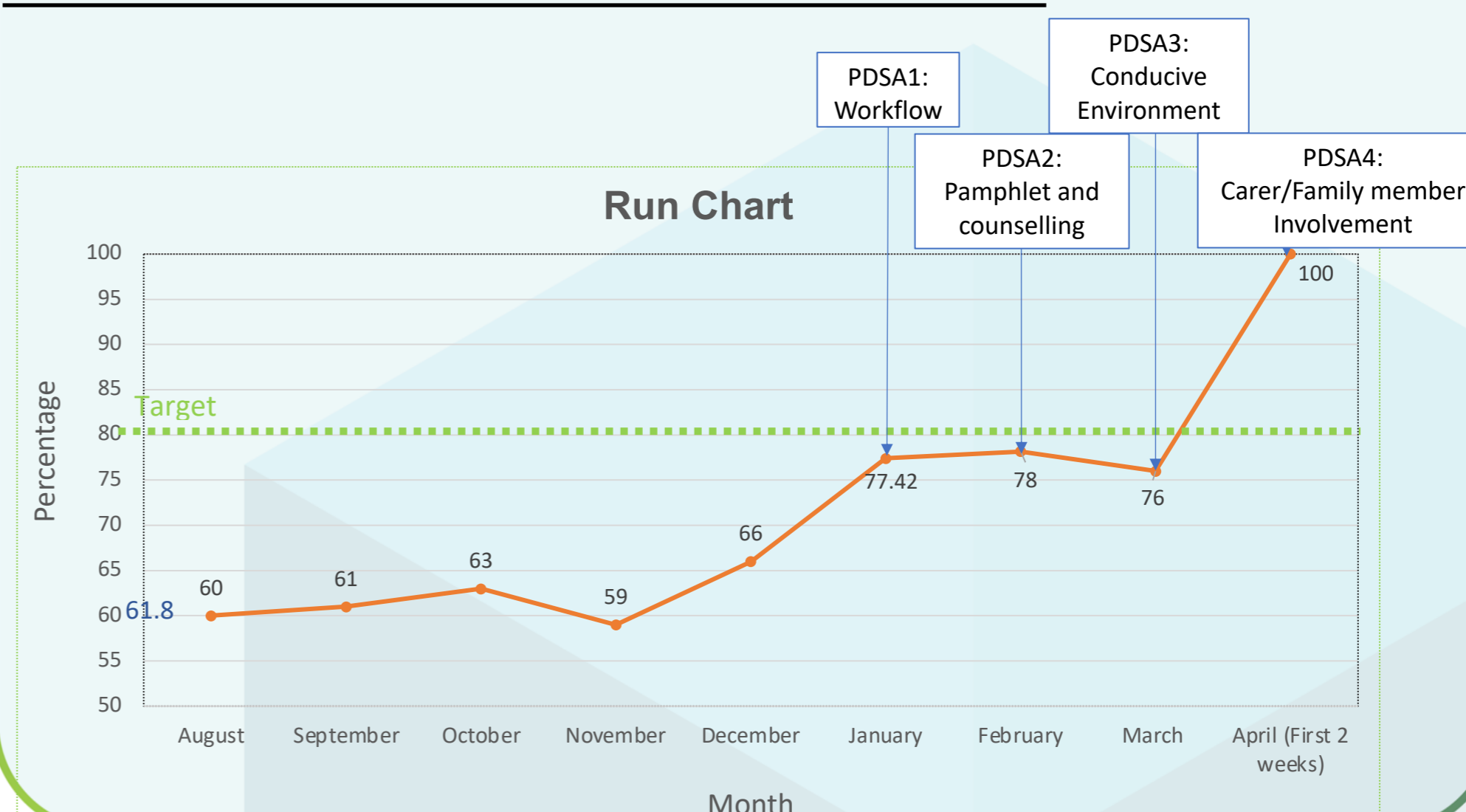
Lesson 2:

Providing patient/caregiver education.

Educating the patient or the main carer on the benefits of the weekend program showed noticeable improvements in compliance rates. Patient's understanding of the benefits and carer's involvement in motivating the patient, played a key role in increasing their compliance.

Outcomes & Impacts

We saw an **increase in compliance from about 60% to nearly 80%** by then end on the interventions. The most important change implemented was improving our workflow, as we saw a >10% increase in compliance. We plan to incorporate technology such as mobile applications and fitness devices to improve compliance and tracking. We are planning to expand the program to other wards in AH and to NUH thereafter.



1. Stroke Foundation. Clinical guidelines for stroke management. 2017. https://files.magicapp.org/guideline/06ee1655-b8ca-4f47-b468-41306dc8efc5/published_guideline_3995-6_0.pdf.

2. Royal College of Physicians. National clinical guideline for stroke. 2021.