



Ms Chloe Lin Na-ling  
Ms Ong Chui Ni

chloe\_nl\_lin@ttsh.com.sg  
chui\_ni\_ong@ttsh.com.sg

## Improving Daily Out of Bed Activities for Spinal Cord Injured Patients at Rehab

### Problem Statement

- Cardiovascular disease is one of the major causes of morbidity and mortality in persons with SCI (Manns PJ, 1999; Noreau L, 1993)
- Physical activity is low in the inpatient SCI rehabilitation setting outside of structured therapy (Dominik Zbogor, 2016)
- At TTSH Rehab, **only a median of 29%** of Spinal Cord Injured (SCI) patients were actively mobilised out of bed.

### Project Aim

To increase the percentage of \*spinal cord injured (SCI) patients to achieve daily 30-minute out of bed #leisure activities at Rehab from median 29% to 70% over a sustained period  
\* Patient who requires more than min assist (A1) for transfer to chair/wheelchair, including used of equipment (transfer board/hoist/sara steady).  
# Any physical/leisure activities out of therapy time (eg. watch TV, reading book, having meals out of bed).

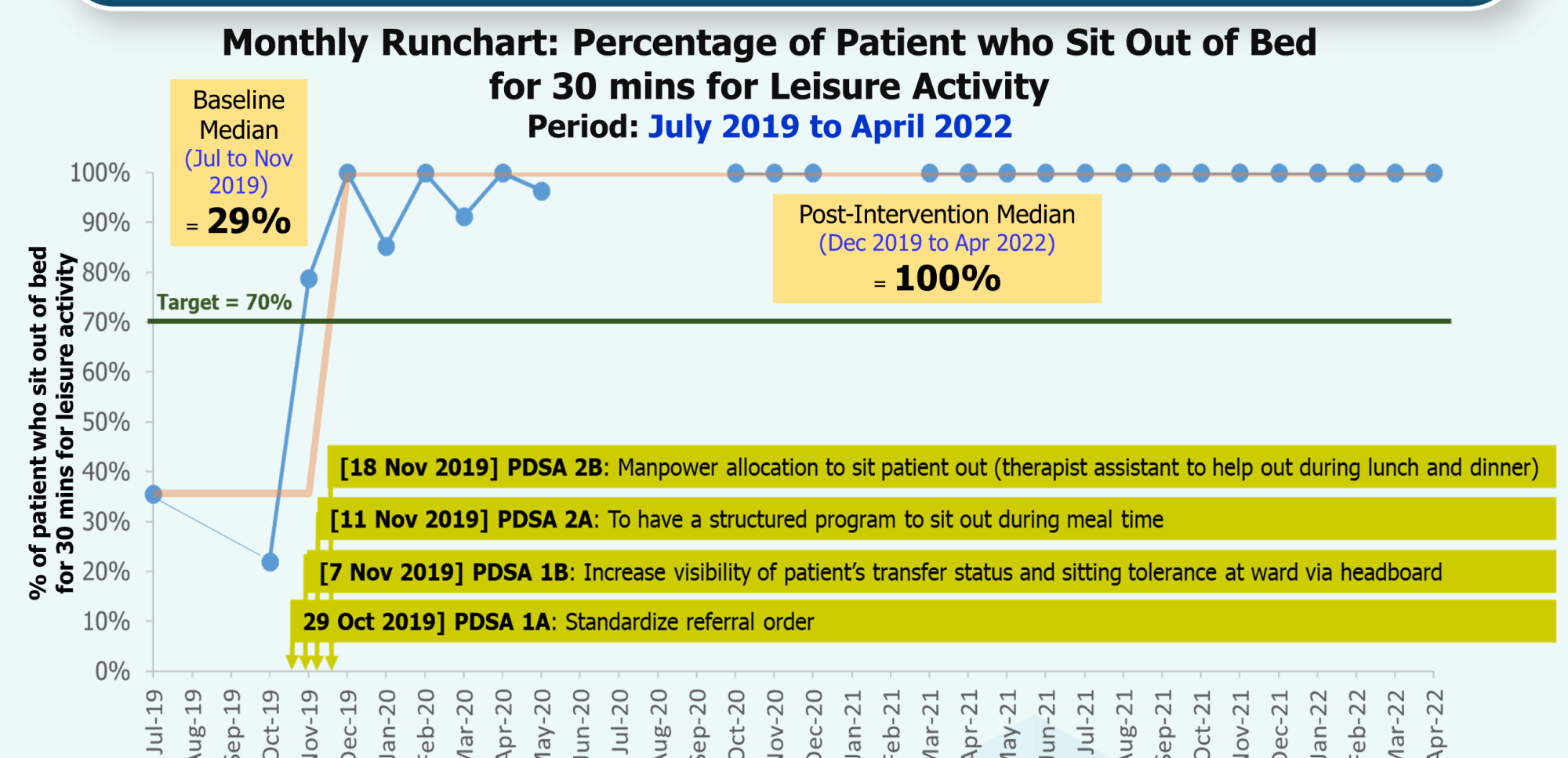
### Lessons Learnt

- It's important to listen to ground challenges and to implement solutions that facilitate work processes
- Multidisciplinary collaborative approach will enable us to look at problems from different perspectives
- To rely on system level changes rather than people driven changes

### Potential Solutions

Root Cause	Intervention
Referral for sit out bed program is ad-hoc (Nurse unsure if patient is fit to sit out of bed)	<b>PDSA 1A:</b> Standardization of order referral - improving communication between different professionals <b>PDSA 1B:</b> To increase visibility of patient's transfer status and sitting tolerance at ward
The program for spinal cord injury patient at ward is ad-hoc	<b>PDSA 2A:</b> To have a structured program to sit out during meal time <b>PDSA 2B:</b> Manpower allocation to sit patient out (therapist assistant to help out during lunch and dinner)

### Outcomes & Impacts



- GOOD OUTCOME:** Percentage of SCI patients achieving a 30-min leisure activities out of bed daily from median of 33% to 100% from Jul '19 to Nov '20. This was **sustained at 100%** till April '22 and become **routine work process** till now.
- BALANCE MEASURE:** No serious reportable events due to postural hypotension and no pressure sores developed.
- VALUE:** Projected savings of \$22,712 for a 68 days rehab length of stay saved.