

Abstract

Nadine Henry-Thomas

Johns Hopkins

Abstract

Background: Older adults account for 60-85% of hospitalized older adults on the telemetry unit, with 18-58% of these patients noted to have experienced new or worsening functional decline. Functional decline can occur as early as day two of admission.

Purpose: The purposes of this quality improvement project were to 1) improve or maintain the functional status of hospitalized older adults by using the intervention of hallway ambulation and communal dining, and 2) improve nursing staff documentation practice of functional status on the cardiac telemetry unit.

Methods: Pre/post project design on a 48-bed unit. A total of 86 patients and 50 registered nurses participated in this project from August 2018 to November 2018.

Results: The findings revealed that functional status was maintained from admission to discharge. Mobility levels were maintained or improved from admission to discharge. There were significant increases in nurses' documentation of functional status on admission.

Conclusion: Interventions focused on mobility and provision of a stimulating environment appear to maintain and/or improve independent performance of activities in daily living for the hospitalized older adult. The positive effects of nursing staff education on documentation adherence remains an integral aspect for early identification of at risk patients and application of prompt and appropriate interventions to prevent functional decline.