

PREVENT DECONDITIONING



"Get Up, Get Dressed and Keep Moving"

PREVENT & IDENTIFY DECONDITIONING

- Is the patient at high risk of deconditioning?
- What is the patient's level of mobility/ bladder and bowel control/ cognitive function?
- Has there been a change in the patient's mobility/ bladder and bowel control/ cognitive function?
- Has there been a conversation with the patient and family/ carers on what they can do to prevent deconditioning and why it is important?







Click on the link to **Goal 5** where you will find the main documents

PROMOTE FUNCTIONAL ACTIVITY

- Patients should be enabled and encouraged to get out of bed, sit out in a chair and mobilise everyday if clinically able to do so
- Patients should be encouraged to wash and dress themselves when possible or with as minimal assistance as required
- The clinical environments should promote functional activity and mobility (chairs at the bedside, corridors kept clear of clutter)
- Enable and encourage patients to mobilise to the toilet and/or bathroom to use the facilities
- If patients require their glasses or a walking aid to mobilise, ensure they are within easy reach
- Encourage patients to sit out for lunch

CONTINENCE MANAGEMENT

- Patients should be encouraged and supported to use toilet facilities if clinically able to do so
- The use of bedpans and commodes at the bedside should be actively discouraged to ensure patient dignity and encourage mobility
- The use of incontinence products such as pads should be discouraged for patients with bowel/ bladder control – including at night-time
- Promote and support good nutrition and hydration
- Record bowel movements and prevent, identify and manage constipation as early as possible



COGNITIVE FUNCTION

- Focus on delirium prevention
- Ensure mechanisms are in place to orientate patients to time, date and day
- Promote establishing a day and night routine in the clinical environment
- Promote activities that will provide cognitive stimulation and social interaction in clinical areas
- With the patient's permission, promote involving family, friends and carers in their care to prevent deconditioning and delirium – review visiting times to facilitate this
- Promote and support good nutrition and hydration- monitor and record intake
- Patients with an acute change in cognitive function should be screened for delirium
- Patients that are delirium positive should have a medical review and a holistic management plan in place, including a medication review and appropriate pharmacological management of delirium

DECONDITIONING STARTS WITHIN HOURS – PREVENTION IS EVERYONE'S BUSINESS

Deconditioning is a complex process of physiological change following a period of inactivity, bedrest or sedentary lifestyle. It results in functional losses in areas such as mental status, degree of continence and ability to accomplish activities of daily living. (Gillis et al 2005)