



Activity Levels of Rehabilitation and Geriatric and Evaluation Management Inpatients

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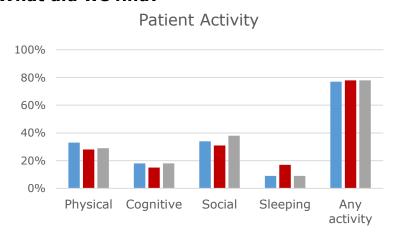
Why?

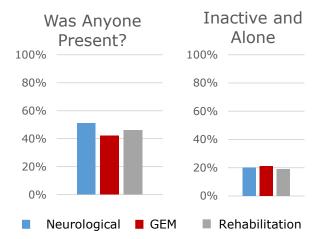
Research indicates stroke patients in inpatient rehabilitation spend a large proportion of their time inactive and alone (West and Bernhardt, 2012). Little is published about activity levels of other diagnostic groups.

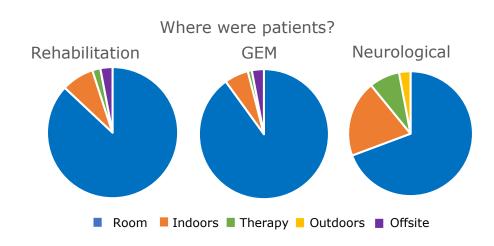
How?

We recorded the activity levels, location and people present (staff, visitors and other patients) for three subacute inpatient wards: 1) Neurological, 2) Geriatric Evaluation and Management (GEM) and 3) Rehabilitation (Ortho/Amputee/General Rehabilitation/Trauma). A behavioural mapping protocol was used (Janssen et. al, 2014). Seventy three patients were observed (Neurological = 14, GEM = 31 and Rehabilitation = 28) every 15 minutes between 8am and 4.30pm on a single weekday.

What did we find?







What does this mean for allied health?

All three wards had similar activity levels, higher than the stroke literature reports. Patients spent large percentages of time in their rooms. GEM patients spent the most time sleeping. This suggests all subacute inpatients may need encouragement to be active and have the opportunity to experience different locations.

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References:

Janssen, H., Ada, L., Bernhardt, J., McElduff, P., Pollack, M., Nilsson, M. & Spratt, N. (2014) Physical, cognitive and social activity levels of stroke patients undergoing rehabilitation within a mixed rehabilitation unit. Clinical Rehabilitation, 28(1): 91-101.

West, T. & Bernhard, J. (2012) Physical Activity in Hospitalised Stroke Patients. Stroke Research and Treatment, 2012, 1-13. doi:10.1155/2012/813765







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