

**“Eat, Drink, DRESS, Move” Project, Green Ward Competition 2017,
University Hospitals Southampton NHS Foundation Trust**

Project Description

Background: The therapy department in 2017 created an initiative called “Eat, Drink, DRESS, Move” to encourage patient engagement with activities of daily living. Among inpatients with long stays, a “pyjama paralysis” can develop where patients have slower recovery due to not eating, drinking, dressing, and moving regularly. The team hoped to increase patient readiness for discharge and reduce impact of immobilisation on older persons.

Approach: In order to introduce this project, a Band 2 therapy assistant and healthcare assistants were needed. A therapy assistant would enter the ward every morning over 4 weeks and encourage patients to get washed and dressed in their own clothes. They would contact the patients and relatives to request day clothes and shoes to be brought in. Healthcare assistants would make sure the patients had access to those items and supervise patients in personal activities of daily living. The team recorded the number of patients who were getting dressed and active before and after implementing the change.

Intended Benefits

Patient outcomes: Maintaining mobility and reducing length of stay can improve outcomes in an elderly population, maintaining independence on discharge and reducing the risk of falls/other complications (Stolbrink et al., 2014).

Environmental and financial:

Item	Quantity	Cost or Savings	£/year	kgCo2e
Band 2 Therapy Assistant	1/month	Cost	- 12,768	
Bed day	1/week	Savings	+ 11,452.32*	1,819.2
Gowns (as load of laundry)	0.5/week	Savings	**	314.6
Pyjamas & Socks	2.5/week	Savings	+ 1,482	429.78
Total Savings (as is)			+ 166.32	2,563.58
Total Savings (possible)***			+ 12,934.32	2,563.58

Notes:

* extrapolated based on similar intervention (Stolbrink et al., 2014)

**cost of laundry unavailable

***if intervention was integrated into educational materials and regular training

Social: Through the initiative, patients are encouraged to sit out for meals and activities, interacting with other patients, staff, and relatives. This intervention aims to increase patient satisfaction, which could be measured through a tool.

Potential Barriers

Challenges to this project:

- Establishing a new routine for patients, staff, and relatives
- No control group established to compare length of stay before and after change

Participant quotes:

Patients commented that...

“Wearing my own clothes again makes me feel like me!”

“Wearing my clothes in hospital made me feel tall and empowered to ask the Drs questions.”

Staff reported that...

“Such a small and easy change in practice has [led] to such a huge impact to our patients!”

“The clothes donation scheme also meant patients without relatives at home to bring in clothes could be included... and it’s free!”

Key Aspects of the Project:

This project considers the different stages of patient care at the hospital and targets patient well-being and recovery as an area to improve. There is also the possibility of eliminating the cost of Band 2 Therapy Assistant by incorporating into educational materials and training programme.

For more information please contact:

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Citation

Stolbrink, M., McGowan, L., Saman, H., Nguyen, T., Knightly, R., Sharpe, J., ... Turner, A. M. (2014). The Early Mobility Bundle: a simple enhancement of therapy which may reduce incidence of hospital-acquired pneumonia and length of hospital stay. *Journal of Hospital Infection*, 88(1), 34–39. <https://doi.org/10.1016/j.jhin.2014.05.006>