

**Get Up  
Get Dressed  
Get Moving**



*60 Day Challenge*

October 2021



Dr Colm Henry  
Chief Clinical Officer

#GUGDGM21

Healthcare associated functional decline is shown to have significant deleterious effects on older patients, their families and carers. In addition, it can result in significant demand on healthcare given the resources that are needed to address decline. As well as the great impact COVID-19 has had across healthcare, the pandemic has compounded deconditioning, either directly through illness or indirectly through the harm associated with social restrictions. To mitigate the expected increase in demand within the Irish healthcare system a comprehensive change in our approach to care delivery is necessary. This will prove beneficial in relation to patient outcomes and patient flow in the acute setting, and will reduce healthcare associated harm and improve financial stewardship in all care settings.

The Get Dressed, Get Moving Challenge is an opportunity to focus on some of the most vulnerable people in our health care system. The idea is simple. Getting patients up and dressed rather than remaining in their pyjamas when they do not need to helps to promote a mind-set that patients are recovering in readiness to go home and back to their usual routine, living as independently as possible, as quickly as possible. Consistent with prudent healthcare principles, this approach empowers patients to be active participants in their own care, ensuring they do not spend any time longer in hospital than is clinically necessary.

We know many hospitals already adopt a similar approach, but participating in the Get up, Get dressed, Get moving 60-day challenge will help to demonstrate the positive impact this can have on patients, as well as providing data that can inform the cost of deconditioning and functional decline at local and national level.

I would encourage you to participate in this 60 day challenge, as we collectively lead change, add value and make it better for patients and their carers

“Teach us to live that we may dread unnecessary time in bed. Get people up and we may save our patients from an early grave”  
Asher, 1947

I warmly welcome this initiative both in its content and its timing. I would like to acknowledge the work of the Office of the Nursing & Midwifery Services Director (ONMSD) who have led on this in conjunction with the Health & Social Care Professions (HSCP's) office, who along with the Get Up, Get Dressed, Get Moving network members have ensured its development through to implementation”

Yours sincerely

A handwritten signature in dark ink, appearing to read 'Colm Henry', with a long horizontal stroke extending to the right and a vertical line dropping down from the end.

# Foreward



**Dr Geraldine Shaw**  
Nursing and Midwifery  
Services Director  
Assistant National Director

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Internationally, awareness of the “epidemic of immobility” amongst hospitalised older adults is increasing. In acute settings, older adults have been shown to spend 97% of their day sitting or lying down. In rehabilitation settings, where patients are presumed to be more active, older adults spend as much as 95% of the day in sedentary behaviours. Older adults are particularly vulnerable to the detrimental effects of immobility. After only ten days of bed rest, older adults can lose 1kg of muscle mass and 16% of their strength. Low physical activity and bed rest during hospitalisation are associated with serious adverse outcomes, such as functional decline, hospital-acquired disability and complications including thrombosis or pressure injuries, hospital readmission, new institutionalisation, and death.

The Get up, Get dressed, Get moving Programme refers to 1.4 CCO Operational Plan 2020: Develop and Launch a National Get up, Get dressed, Get moving Campaign and is a work stream of the Office of the Nursing & Midwifery Services Director (ONMSD) in collaboration with the Health & Social Care Professions (HSCPs) Office.

Nursing and HSCP staff working collaboratively is integral to embedding the culture change of the Get up, Get dressed, Get moving campaign.

We are delighted you have agreed to participate in the Get up, Get dressed, Get moving 60 day Challenge which is supported by The RCSI Faculty of Nursing and Midwifery and will be provided free of charge to participating organisations for the duration of the challenge.

As this project involves all Health Care Professionals we suggest that Nursing and HSCP come together locally to form a project group and agree the 60 day challenge implementation methodology.

The ONMSD and the HSCP office will be seeking feedback from participating sites.

Please forward the contact details of your Nursing and HSCP nominated leads to [Deirdre.Lang@hse.ie](mailto:Deirdre.Lang@hse.ie) and [Catherine.devaney1@hse.ie](mailto:Catherine.devaney1@hse.ie) and a survey will be sent at the start and the end of this initiative to evaluate its impact.

Yours sincerely

Handwritten signature of Geraldine Shaw in blue ink.

Handwritten signature of Jackie Reed in blue ink.



**DMs Jackie Reed**  
National Lead  
National HSCP Office

##GUGDGM21

The Get Up, Get Dressed, Get Moving Challenge is an opportunity to focus on some of the most vulnerable people in our health care system. It creates an opportunity to both educate and empower health professionals and care staff and it develops a specific evidence base for ongoing best practice.

The 60 day Challenge has been supported by The RCSI Faculty of Nursing and Midwifery and will be provided free of charge to participating organisations for the duration of the challenge.

*Its aim - to get patients up, dressed and moving*

There is ample evidence that immobility in hospital leads to deconditioning, loss of functional ability and cognitive impairment, all of which have the potential to increase a patient's length of stay, using up their valuable time.

The physical and emotional impact of deconditioning on individuals has been known about since the 1940's. One of the major impacts of Get Up, Get Dressed, Get Moving campaigns is the focus on both the individual and the organisational impact of 'staying in bed'. Prior to this neither were fully explored or fully challenged.

Deconditioning is a significant problem for hospital patients and is associated with:

- Loss of muscle mass.
- Constipation.
- Incontinence
- A five-fold increase in the risk of needing institutional care post-discharge
- Malnutrition
- Accelerated bone loss

The UK 70 Day #EndPJparalysis Challenge in 2018 changed practice, improved outcomes and redressed some of the unconscious bias around longer stay patients. The 70 Day Challenge resulted in 710,468 patients recorded as up and mobilised and 703,161 patients recorded as dressed. It galvanised healthcare staff from multiple disciplines and levels of seniority into action. The campaign has changed the language, focus and behaviour of health professionals across the NHS acute sector.

One organisation, the Northern Care Alliance, a 2,000 bed system in NW England, saw the following results

- 37% reduction in falls
- 67% reduction in pressure sores
- 1.8 day (16%) reduction in length of stay.

Other organisations have also reported excellent results. In England there was clear evidence of increased bed capacity across the health economy. Allowing for seasonal variation, over the course of the challenge approximately

- 5000 fewer beds were occupied
- 4000 fewer patients stayed >7 days in hospital
- 1500 fewer patients stayed >21 days in hospital

In 2018 several Irish hospitals participated in the 70 day challenge including Beaumont Hospital, Dublin, University Hospital, Waterford, Cork University Hospital, Cork, St James's University Hospital, Dublin and St Luke's General Hospital, Kilkenny. Based on their IPIMS, the latter saw an increase in discharges home, increased use of rehab beds, and a decrease in new long term care transfers.

Anecdotally, there have been numerous reports of improved patient experience and staff wellbeing and engagement, enhanced access to beds through emergency departments, less food wastage as mobile patients are eating more and lowering risk of malnutrition, plus cost avoidance through reduced adverse patient outcomes.

The continued focus on Getting up, getting dressed and getting moving through ongoing measurement and education will enable organisations to identify best practice, any internal risk areas and evaluate how initiatives are contributing to success. A 60 Day Challenge creates an unparalleled opportunity to collect data that can inform the cost of hospital acquired deconditioning. It also keeps the focus and activity on enhancing patient experience, valuing their time and protecting both their mobility and their cognitive function.



## How it works

The 60 Day Challenge is managed through a web application (supported by a mobile app) provided by Health Service 360. Its purpose is two fold:

1. To collect and collate data from participating clinical areas identifying the numbers of patients mobile and the number of patients dressed. It is also possible to collect information on the following important metrics, number of falls, and pressure areas, This will be accessible in a manner that can be cross-referenced with existing organisational data, such as length of stay and discharge destinations. The data can be analysed and cross-tabulated at facility, specialty and ward levels allowing granular understanding of improvements in patient safety over time with information.
2. To share information about best practice, innovation and challenges through online video content and live webinars during the challenge. These are likely to be carried out every two weeks during the challenge and will be free to all participating organisations and individuals. This content will be developed and presented by Lynda Holt, Professor Brian Dolan OBE and leaders and experts from across Ireland.

Participants register for the app with a verifiable work-related email address to enhance security, after which they create their own unique login. They are invited to answer two questions (plus optional fields) daily;

1. How many patients have mobilised eg walked to the toilet / shower or walked around the bed?
2. How many patients are dressed in day clothes at midday?

If more than one person in a ward/unit collects this data it accepts the first submission, however this can be corrected as necessary. To further enable access in areas with poor Wi-Fi connections, a pc web-portal is available to upload the daily ward/unit data online, including retrospective data submissions.

The dashboard enables a view of care facility/hospital, specialty and ward level data of mobilised and/or dressed patients. Inter-facility comparative data between each organisation, specialty and ward is also built into the dashboard.

The app enables downloadable reporting within the constraints of an individual user's permissions.

The data, which will be non-patient identifiable as it is collecting numbers only, will be housed on located European data servers and will be compliant with GDPR and all local legislative requirements. Health Service 360 complies with enhanced cyber security and holds Cyber Essentials certification in the UK. Staff handling data and responsible for the challenge IT have been BPSS certified in the UK.

A help desk will be provided by Health Service 360.



The Get Up, Get Dressed, Get Moving 60 Day Challenge is being managed by Health Service 360

Challenge Lead: Lynda Holt [lynda@dolanholt.co.uk](mailto:lynda@dolanholt.co.uk)  
Tech Lead: Andy Moss [support@dolanholt.co.uk](mailto:support@dolanholt.co.uk)

Tel: +44 1789 205178. Website: [www.healthservice360.co.uk](http://www.healthservice360.co.uk)  
Registered Office: Oak Tree House, Farnell Drive, Stratford upon Avon, Warwickshire, CV37 9DJ, UK