



NATIONAL RE-CONDITIONING GAMES



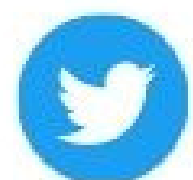
#ReconditionTheNation

#ItCouldBeYou

WINTER ~~DE~~-CONDITIONING GAMES
East of England

Inspired by

#EndPjparalysis



@ReconGamesUK

Hospitalised patients “put to bed”

How do hospitalized patients spend their day?

- Lying in bed – 20 hours
- Sitting in a chair – 3 hours
- Standing/walking – 1 hour



Resources and considerations

- [Bed rest: a potentially harmful treatment needing more careful evaluation?](#)
- Improving [care and support](#) for people with frailty
- Consider early MDT intervention/ physiotherapy?

Those who are more mobile do better

- High mobility 13% disabled at discharge
- Moderate mobility 35% disabled at discharge
- Low mobility 71% disabled on discharge

[Brown CJ, JAGS 2009: 1660](#)

[Zisberg A, JAGS 2009: 266](#)

[Earlier Physical Therapy Input Is Associated With a Reduced Length of Hospital Stay and Reduced Care Needs on Discharge in Frail Older Inpatients](#)

What does the evidence tell us?

Hospitalised patients are 61 times more likely to develop disability in ADL's than those not hospitalised

17% of older medical patients who were walking independently 2 weeks prior to admission needed help to walk on discharge

Patients spend up to 83% of their time in bed, and 12% in a chair

Risks of hospital based deconditioning

For 60% of patients on bed rest there is nothing documented to explain why

50% of patients experience functional decline between admission and discharge

Hospital admission in past 12 months is single most predictive risk of functional decline

Impact of bedrest in older people

In first 24 hours

Reduced muscle power 2-5%

Reduced circulatory volume by upto 5%

In first 7 days

Reduced circulatory volume by upto 25%

Reduced VO2 max by upto 8-15%

Reduced muscle strength by upto 5-10%

Reduced FRC by upto 15-30%

Reduced skin integrity

Reduced dignity, quality, confidence, independence, choice

Deconditioning contributed to delayed discharge in more than 47% of older patients

Up to 50% of older people become incontinent within 48 hours of admission

Once discharged, on 39% of those with a new or additional ADL disability were back to their usual level of function after one year

Courtesy: Acute Frailty Network, UK

Purpose of Re-conditioning Games



1. **Raise awareness of deconditioning in health & care settings**
2. **Share best practice – make it simple to get involved, have fun and create impact**
3. **Maintain the focus on reducing hospital length of stay, supporting people where possible to continue their recovery at home (D2A) and development of alternative pathways**
4. **Opportunity to link with winter planning improvement plans across health and social care settings**
5. **Reduce moral injury to staff, while doing the right thing for patients and having fun**

Campaign schedule 2022/23

Build momentum within Regions, systems and organisations (consider Games torch visits). Talk with your teams to identify changes they would like to test. Register to take part (see above). Get ideas from Futures Pages

The Games will officially open on 1 November 2022, however there is nothing to stop teams starting to test their small scale changes or plan their quality improvement ideas in advance of this date

**End of September
2022**

**October
2022**

**From October
2022**

**November
2022**

**From 1 December
2022 onwards**

Regions and Systems to start to champion and share details of how teams can get involved - include in winter events

Resources to support:

- Briefing letter
- How to get involved booklet
- Slide set to socialise

Communications teams help socialise and engage with teams across all health and care settings. Develop good communication links with teams across the region, system and organisation. Share updates, ideas and celebrate progress
[downloadable resources available here](#)

Teams can submit medal applications for their achievements at the end of every month
ECIST will share medals and updates with regions, systems and providers taking part
Shared learning events can be arranged to support wider learning

Medal categories

1. Making a difference
2. Supporting people to keep moving
3. Supporting staff to keep active and well

Medals awarded	Achievement
Bronze	To be awarded where initiatives are being tested or taking place to support improvements in quality or performance
Silver	To be awarded where there is evidence that the initiatives are starting to make a difference. This can be evidenced through audits, SPC charts, patient or carer / family experience, staff experience or other data
Gold	To be awarded where there is evidence of sustained improvement, either through best practice initiatives or performance data



1. Making a difference

Focus on what will make the biggest difference to the people in your care.

Examples include:

- Embedding "What Matters To Me"
- Volunteer exercise buddies
- Winter Wimbledon (fly swats and balloons)
- Chair exercises / chair yoga
- Working differently as an MDT
- Promoting continence not incontinence
- Nutrition and hydration improvement projects
- Embedding mobility and functional decline discussions into board rounds
- Patient, family and carer information and involvement
- Introduce training to raise awareness of deconditioning, frailty, HomeFirst principles and to build confidence in mobility assessments for nursing staff



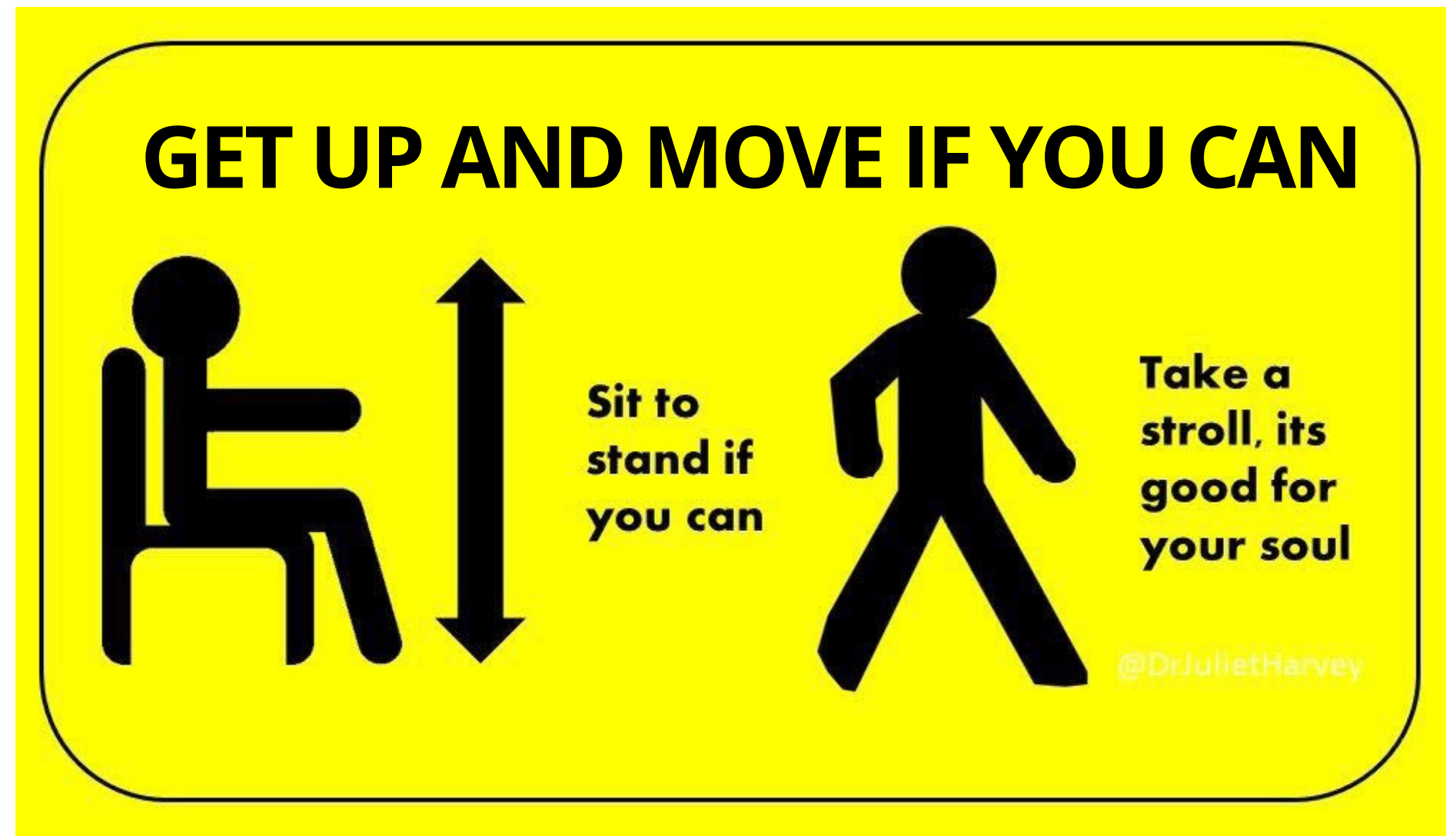
2. Supporting people to keep moving

Schemes to increase the numbers of:

- People who are up and dressed for lunch
- People who have activity goals set

Allow teams to be creative and adapt to different settings (e.g. 'up, dressed and weighed ready for a ward activity', start a clothes bank for patients, introduce initiatives to beat bedside boredom, mark out a Sir Tom 10m walkway, be creative with introducing seasonal activities)

Resources are available - including SPC chart to "plot the dots" and mobility and ADL goal setting resources [East of England Winter De-conditioning Games](#)



3. Supporting staff to keep active and well

How can staff be supported to look after their own physical and emotional wellbeing?

Examples include:

Student memory boxes

3 Peaks, Mount Everest, Race to Lapland challenges



Kindness Board – Time to Talk

Joint staff and patient challenges and activities



Monthly activity challenges



Wellness Wednesday

I'm not just a

Celebrating cultural diversity

Team Breakfast

Forget Me Knot Pins

Key learning points from East of England (178 teams participated)



It made QI accessible to all

Improved staff well being

Highlighted the importance of healthy competition and fun

Highlighted the importance of leadership and MDT approach

Recognition and reward was key

The approach involved everyone and energised teams

Some gaps in knowledge were identified (relating to deconditioning, frailty and HomeFirst)

Opportunities for the use of technology became evident

**Sustainability was important“It is the right thing to do for our patients and staff and we will be keeping this going beyond the end of the campaign”
Summary of many quotes from those involved**

Evaluation from East of England Winter Games 2021/22



Feedback from Northampton General Hospital



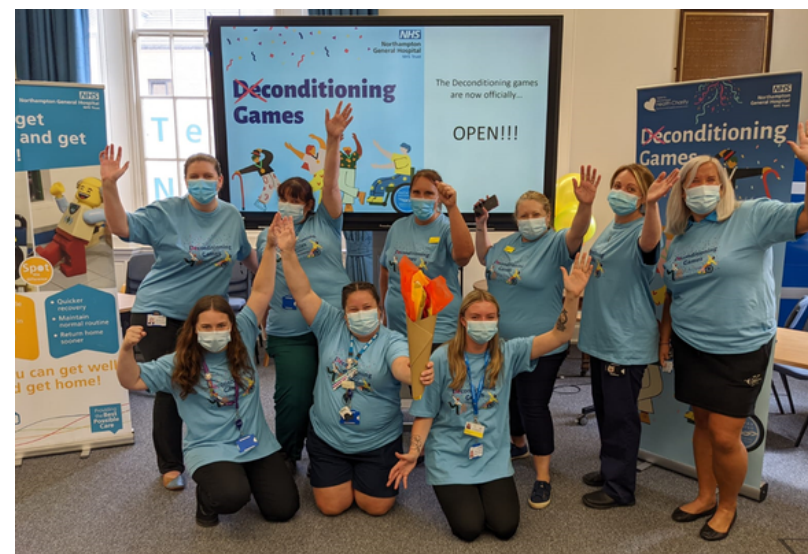
The Deconditioning games campaign was launched at NGH as it had been observed that patients had low levels of activity whilst in hospital, which was increasing length of stay & reducing patient outcomes – ultimately delaying discharge & increasing dependency on health & social care.

We also observed a lack of accountability & ownership about whose role it is to maintain patients' mobility & function whilst in hospital. We decided to launch this campaign as a fun way for teams to find their own solutions to these challenges & help build working relationships. The message of the campaign being; lets work together as an MDT, to identify small scale changes we can embed in our daily routine that will have a long-lasting impact for our patients, to improve their patient experience & improve recovery.



Top tips.....

- Work closely with communications team to develop eye-catching branding & messaging for staff
- Clear messaging & expectations setting - small scale, sustainable initiatives
- Use screen savers and briefings to spread the message internally and social media externally
- MDT approach is essential – Deconditioning is everyone's business
- Engage with your stakeholder/points of influence to help with launch & keep it on the agenda
- Use volunteers & families as a resource
- Engage speciality teams, they have knowledge and skills to help with ideas and training; Dementia, Falls, tissue viability, LD, HR & well-being teams
- Staff like rewards & recognition so think about how you will celebrate success
- Optimise the 'Games' concept to structure your event & engage people
- Use the staff award to help showcase the campaign is for everyone to get involved



National Re-conditioning Games



Leading the campaign

Role of Region	Role of ICB	Role of Providers
<ul style="list-style-type: none"> • Strategically lead and champion the campaign – visible leadership • Provide tools and material for ICBs / providers to utilise • Provide regional communication briefs for ICB to utilise. Resources and learning from East of England can be found here • Support tour of the region to celebrate success with ICBs • Link to other regional winter strategic plans • Share and celebrate regional best practices 	<ul style="list-style-type: none"> • Lead and champion the campaign – visible leadership • Using the regional communication plan generate social movement • Lead tour of ICB providers to celebrate success • Celebrate medal winners and share success with region • Oversight to winter strategic plans 	<ul style="list-style-type: none"> • Champion the campaign – visible leadership • Develop & implement a local brand/communications plan and generate social movement • Share our online resources with staff throughout your organisation • Implement small scale sustainable initiatives • Showcase success stories • Submit medal applications to the national team • Celebrate success with medal ceremonies

Getting ready.....

If you would like to find out more and get a copy of the [“how to get involved booklet”](#)

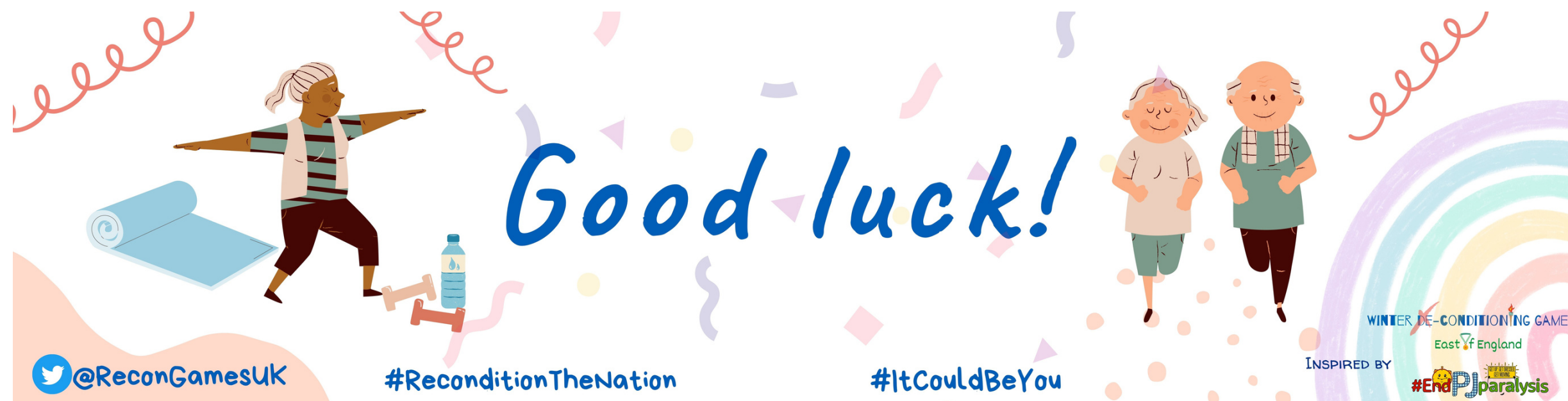
If you would like to register to take part – complete the simple application form [here](#)

Start talking to your team about being involved and what ideas they have

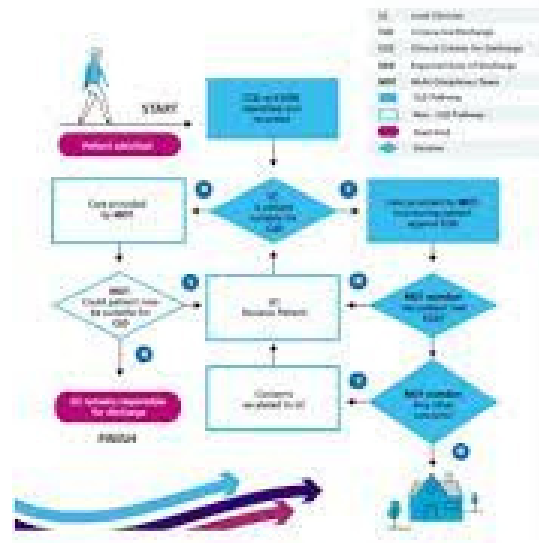
Teams can find further resources and apply for medals [here](#)

Contact us on ECIST email: england.eeci@nhs.net

We look forward to hearing from you all!

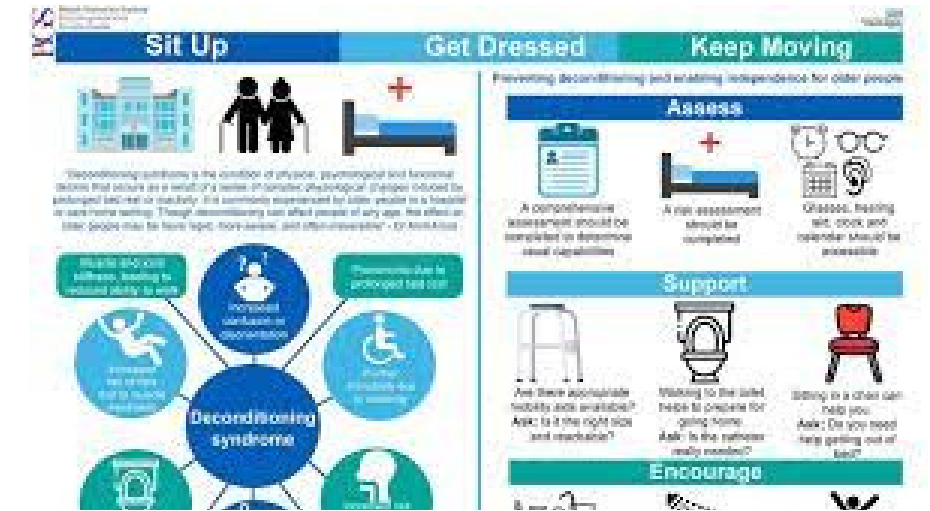
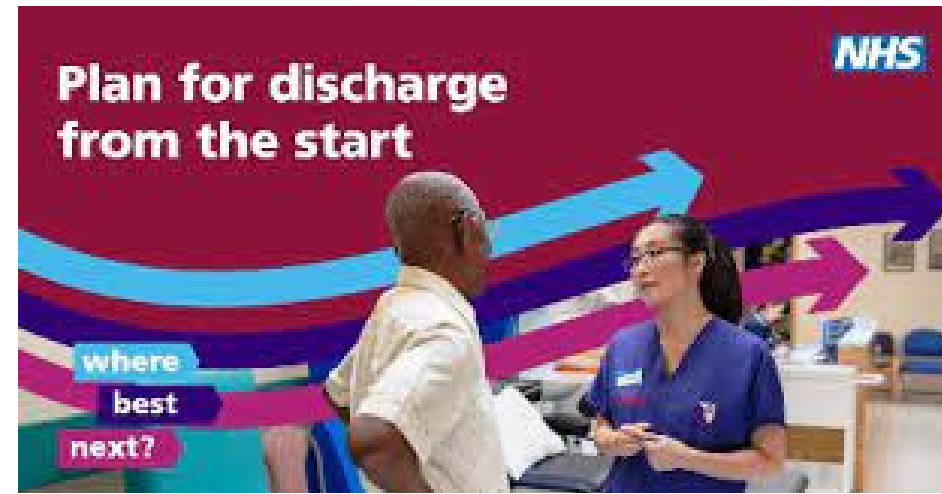


Support materials available



Key Points:

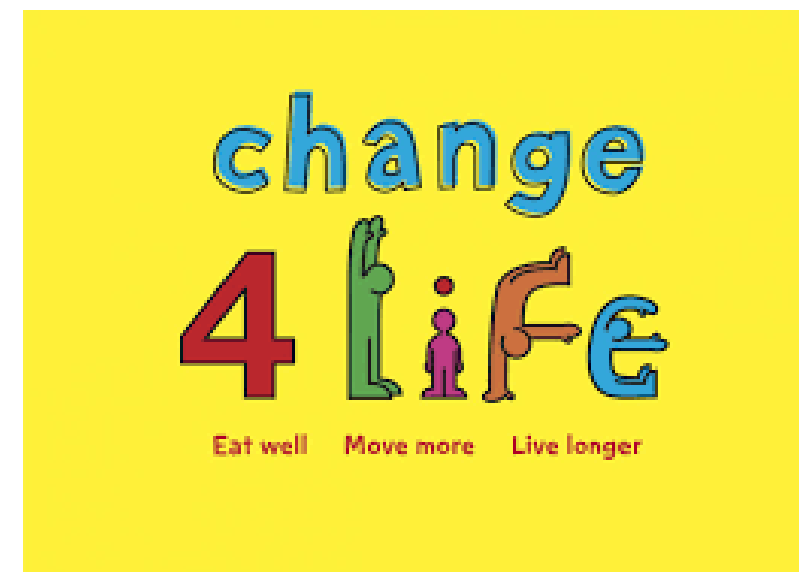
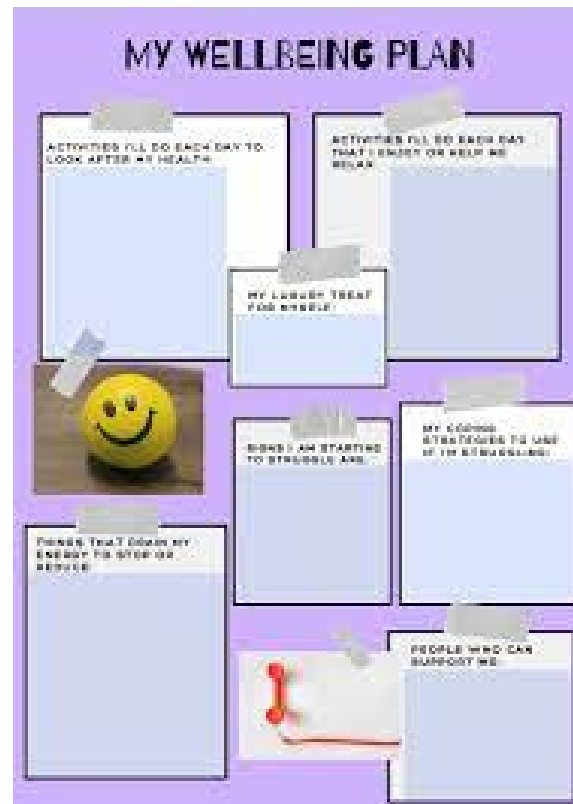
- TTO's and "Discharge Summary" should be completed at the same time the CLD sticker is completed.
- CLD is for every day, not just Fridays!
- CLD should be considered as early as possible in the patient's pathway.



[East of England Winter De-conditioning Games](#)

Well-being materials available

[Get active - Better Health - NHS \(www.nhs.uk\)](http://www.nhs.uk)



Any
questions....?