



Early mobility

AMPAC “6-CLICKS” TOOL

Getting Patients Up and Moving

Goals

- Promote a culture of mobility, reduce deconditioning
- Reduce inappropriate resource use (appropriate PT/OT referrals)
- Optimize post-acute discharge planning (appropriate NSOC location)



Overview

- Overview of Activity Measure for Post- Acute Care (AMPAC)® & Johns Hopkins Highest Level of Mobility (JHHLM)® Goals
 - Evidence based tools assesses mobility and ability to complete activities of daily living
 - Recommends evidence-based goals to optimize mobility
 - Short forms to be completed by interdisciplinary care team:
 - Basic Mobility
 - Daily Activity
 - Applied Cognition (PT/OT/SPEECH ONLY)
 - Provides guidance to Case Management and care teams on discharge planning
- **EMR Impacts and Epic workflow for Physicians/LIPs**
 - Providers must address if they want the patient to follow the AMPAC protocol or not on the activity order
 - BPA alert for Providers to place an Activity Order

6 Clicks short form- Basic Mobility

Function

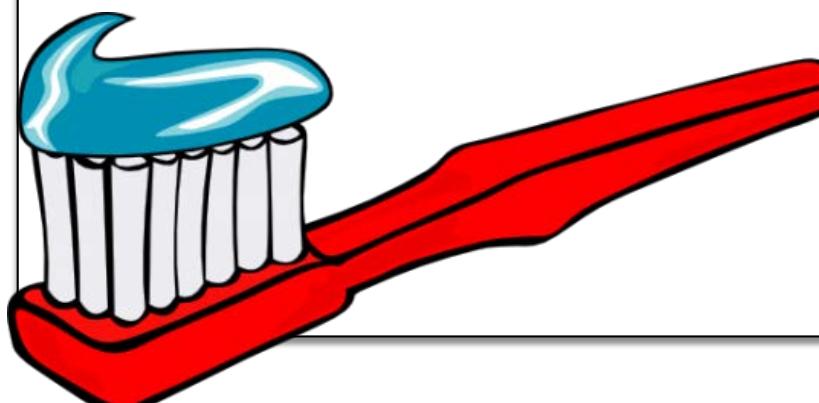
1. Turning over in bed
2. Sitting/standing from chair
3. Moving from lying to sitting
4. Moving to/from bed to chair
5. Walk in hospital room
6. Climbing 3-5 steps



Rating

- 4- No assistance (Independent)
- 3- A little assistance (Min A – Supervision)
- 2- A lot of assistance (Mod – Max Assist)
- 1- Total assistance, cannot do at all (D)

6 Clicks short form- Daily Activity

Function	Rating
<ol style="list-style-type: none">1. Lower body dressing2. Bathing (washing, rinsing, drying)3. Toileting (includes toilet, bedpan, urinal)4. Upper body dressing5. Personal grooming (brushing teeth)6. Eating meals	<p>4- No assistance (Independent) 3- A little assistance (Min A – Supervision) 2- A lot of assistance (Mod – Max Assist) 1- Unable (Dependent)</p> 

Applied Cognition (PRN Speech & Language Pathology)



Function

1. Following 10-15 minute speech/presentation
2. Understanding familiar people in ordinary conversation
3. Remembering to take medication at appropriate time
4. Remembering where things were placed
5. Remembering list of 4-5 errands
6. Taking care of complex tasks (managing checking account)

Rating

4- Does not experience any problems activity	completing
3- Can do the activity but requires a little more time and effort	
2- Can do the activity but requires a lot more time and effort	
1- Cannot do at all or with help from another person	

EMR Impacts

□ System-Wide Initiative

- Hamilton was the Pilot site- first of 11 hospitals to build and roll out
 - Planned roll out across all sites as they transition to Epic
- Quick overview of EPIC impacts for Physicians/LIPs
 - **ACTIVITY ORDERING**
 - Activity order typically placed at admission- will not change
 - Activity order now requires the provider to identify if the patient should be on the AMPAC protocol or not
 - **If no activity order placed a BPA fires to provider requiring them to enter an activity order**

New Documentation Fields

NURSING ASSESSMENT of Basic Mobility

Flowsheets

File Add Rows LDA Avatar Add Col Insert Col Data Validate Hide Device Data Last Filed Reg Doc

Vitals Basic Assessment I/O IV Assessment Daily Cares/Safety Screenings Adult/OB Intervention... Sharing Network Organ...

Search (Alt+C) Accordion Expanded View All

Admission (Current) from 2/4/2022 in HA... 4/25/2022

0700 0800

AM-PAC ADL Inpatient

Lower body dressing	
Bathing	4
Toileting	3
Upper body dressing	3
Grooming	2
Eating	4
Daily Activity Inpatient Raw Score (calculated)	
Standardized IP T-Scale Score (Calc for Raw Score...)	

AM-PAC Basic Mobility Inpatient

Turning in bed without bedrails	4
Lying on back to sitting on edge of flat bed	4
Moving bed to chair	4
Standing up from chair	4
Walk in room	4
Climbs 3-5 stairs	4
Mobility Inpatient Raw Score (calculated)	24
Standardized IP T-Scale Score (Calc for Raw score...)	57.68

Mobility

Johns Hopkins Highest Level of Mobility	8
Goal of the Day	8 Walked 250 f...
Level of Assistance	No assistance n...
Assistive Device	None
Distance Ambulated	250
Ambulation Response	Tolerated well

1. Document the AMPAC Basic Mobility on admission and every shift
2. Document AMPAC ADL on admission
3. Req Doc will prompt you to complete these flowsheets
4. Completing these assessment will generate score

Radiant, Dumbledore 1200-A Values/Beliefs
70 y.o. /M CSN: 10100169638
Code: Assume Full
Completed (S)
AM-PAC ADL Care Plan Started
Gender Identity
Smoking History Documented
VAT Assessment

Attending: Scott Robert Eisenberg
Infection: _____
Primary Problem: _____
None
Isolation: _____
Allergies: Penicillins
PRN
A S D
Notifications: _____
4 hours

Flowsheet rows display all details of the tool

4/25/22 0700 | Reset Now

Lower body dressing

Last Filed

4
3
3
2
4
4
4
4
4
4
24
57.68
8
8 Walked 250 feet...
No assistance nee...
None
250 ft
Tolerated well

Comments (Alt+M)

Row Information

Admission, Monday, Thursday, and with change in level of care

1=Total
2=A lot
3=A little
4=None

How much help from another person does the patient currently need putting on and taking off regular lower body clothing?AM-PAC Short Form Manual (v.2). 2016. Trustees of Boston University. Used with permission from Boston University School of Public Health, 715 Albany Street Talbot TSW, Boston, MA 02118

How much help from another person does the patient currently need putting on and taking off regular lower body clothing?AM-PAC Short Form Manual (v.2). 2016. Trustees of Boston University. Used with permission from Boston University School of Public Health, 715 Albany Street Talbot TSW, Boston, MA 02118

Mins/Maxes

Max: 4
Min: 1

Flowsheet Information

Row ID: 30440105815
Group ID: 304900201



4/25/22 0700 | Reset Now

Standardized IP T-Scale Score (Calc for Raw scores > 10)

57.68

Last Filed

4
3
3
2
4
4
4
4
4
24
57.68
8
8 Walked 250 feet...
No assistance nee...
None
250 ft
Tolerated well

Value Information

57.68
Taken by: Nurse Inpatient, RN
at 4/25/22 0700 (today)
Recorded by: Nurse Inpatient, RN
at 4/25/22 0758 (today)
Press the space bar to jump to the data's location in the grid.

Row Information

IP Raw scores of 6-10 are low level and will NOT yield an IP TScore. See Low Level Scores below instead.

T Score is standardized allowing scores to be compared across care settings. (10 point change is significant).

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Last Filed Values (24 hours)

57.68
by Nurse Inpatient, RN at 4/25/22 0700

First Filed Value

57.68
by Nurse Inpatient, RN at 4/25/22 0700

Flowsheet Information

Row ID: 30440105801
Group ID: 304900202

AMPAC Scores

The generated score is meant to guide in discharge planning for placement needs.

In this example the patient score is 24 and should ambulate in the hallway with the nurse

AM-PAC Basic Mobility Inpatient	
Turning in bed without bedrails	4
Lying on back to sitting on edge of flat bed	4
Moving bed to chair	4
Standing up from chair	4
Walk in room	4
Climbs 3-5 stairs	4
Mobility Inpatient Raw Score (calculated)	24
Standardized IP T-Scale Score (Calc for Raw score...)	57.68

Mobility

Proprietary and Confidential for Internal Use Only

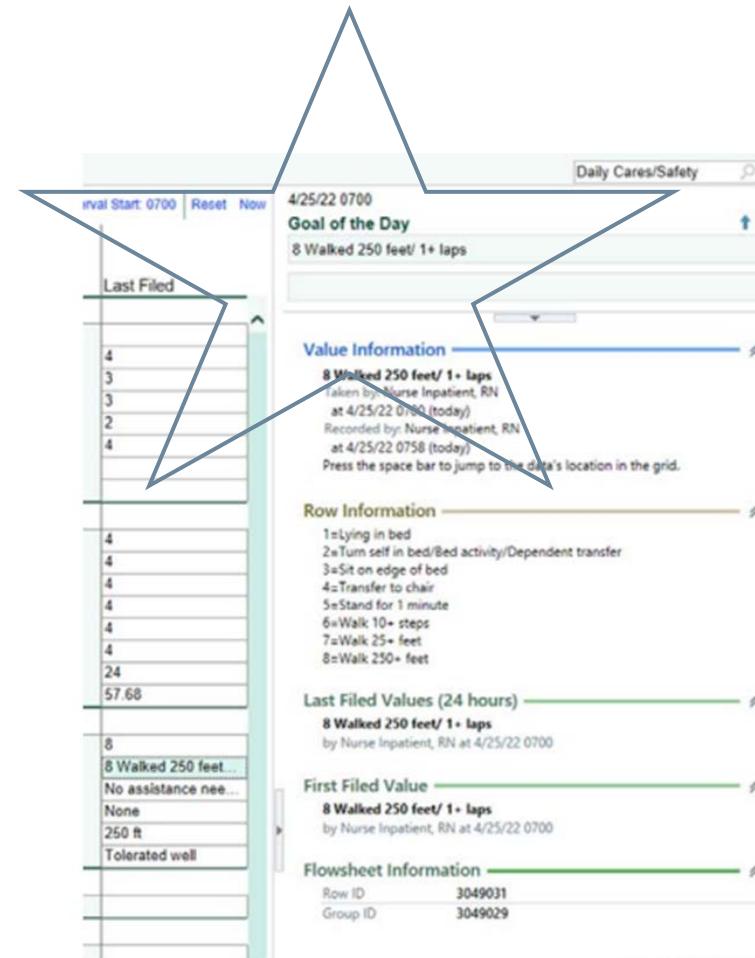
Mobility 6 clicks tool scores	
6 clicks score - Basic Mobility	Activity order (mobility interventions)
revised ranges 12/7/19	
5-6	Encourage patient to independently change position in bed; Transfer OOB with mechanical assist;
7-8	Sit at edge of bed with assistance;
9-10	OOB to chair w assistance BID
11-15	OOB to chair w assistance and Stand/ambulate pt at bedside (1-3 minutes) TID
16-18	Ambulate in room and bathroom
19-20	Ambulate ad lib
21-24	Ambulate in hallway by nursing

JHHLM

The calculated JHHLM score will recommend a goal for the day.

Document against that goal in the flowsheets below

Mobility	
Johns Hopkins Highest Level of Mobility	8
Goal of the Day	8 Walked 250 f...
Level of Assistance	No assistance n...
Assistive Device	None
Distance Ambulated	250
Ambulation Response	Tolerated well





Provider Orders

Orders Examples- Screenshot

Orders

Active Signed & Held Home Meds Cosign Order History Future Outpatient

View by: Order Type Go to: Imaging

Scheduled

amLODIPine (Norvasc) tablet 5 mg 5 mg, oral, Daily, First dose on Mon 4/4/22 at 1100, For 90 days
Notify provider if medication is held.
Reason to hold? SBP < 100 mmHg

Imaging

IR Angiogram Pulmonary Artery Left Routine, Once, On Tue 2/8/22 at 1506, For 1 occurrence
Reason for Exam: test

XR Cervical Spine 4-5 Views Complete Routine, Once, On Fri 2/4/22 at 1210, For 1 occurrence
Reason for Exam: Osteoarthritis, cervical

XR Lumbar Spine 4+ Views Complete Routine, Once, On Fri 2/4/22 at 1210, For 1 occurrence
Reason for Exam: Lumbar radiculopathy, no red flags

XR Sacroiliac Joints 3+ Views Complete Routine, Once, On Fri 2/4/22 at 1211, For 1 occurrence
Reason for Exam: Spondyloarthropathy, cervical spine, Spondyloarthropathy, lumbar spine, Spondyloarthropathy, thoracic spine

XR Thoracic Spine 3 Views Routine, Once, On Fri 2/4/22 at 1211, For 1 occurrence
Reason for Exam: Chest pain, nonspecific

Lab

CBC and differential Once, On Mon 4/25/22 at 0807, For 1 occurrence
Specimen Types - Blood; Specimen Sources - Blood, Venous; New collection

Nursing

Activity (specify) AM-PAC/JH Highest Level of Mobility Protocol; No Restrictions Until discontinued, Starting on Mon 4/25/22 at 0808, Until Specified
AM-PAC/JHHL: AM-PAC/JH Highest Level of Mobility Protocol
Activity Level: No Restrictions



Nursing

Activity (specify) AM-PAC/JH Highest Level of Mobility Protocol; No Restrictions Until discontinued, Starting on Fri 7/15/22 at 0654, Until Specified
AM-PAC/JHHL: AM-PAC/JH Highest Level of Mobility Protocol
Activity Level: No Restrictions

Modify Discontinue

BPA

While signing orders, if there currently is not an active activity order, and one is not being signed, Providers and APPs will receive a BPA reminding them to place a new order.

The screenshot shows a software interface for managing medical orders. At the top, a navigation bar includes tabs for 'Active', 'Signed & Held', 'Home Meds', 'Cosign', 'Order History', and 'Future Outpatient'. Below this, a dropdown 'View by: Order Type' and a 'Go to: Expired Orders' button are visible. The main area is titled 'Expired Orders' and lists several orders:

- Complete Blood Count (CBC), w/Differential: Every 6 hours, First occurrence on Mon 6/27/22 at 0140, Last occurrence on Wed 6/29/22 at 1800, For 3 days. Includes 'Reorder' and 'Discontinue' buttons.
- heparin injection 5,000 units/mL: 9,000 Units (rounded from 9,120 Units = 80 Units/kg × 114 kg Order-specific weight), intravenous, Once, On Sun 6/26/22 at 1945, For 1 dose. Includes 'Discontinue' button.
- magnesium sulfate 1 g in 100 mL D5W (Premix): Includes 'Discontinue' button.
- multivit with minerals-folic acid chewable tablet: Includes 'Hold' and 'Discontinue' buttons.
- warfarin (Coumadin) tablet 4 mg: Includes 'Discontinue' button.

A 'High Priority (1)' BPA dialog box is overlaid on the interface. It displays the message: 'AM-PAC: Patient currently does not have an active Activity order. Please enter one.' It contains three buttons: 'Order' (highlighted in green), 'Do Not Order', and 'Activity (specify)'. At the bottom are 'Accept' and 'Cancel' buttons.

Below the BPA dialog, an 'Activity (specify)' dialog is open. It shows the following settings:

- Frequency: Until discontinued
- Starting: 7/15/2022, Today, Tomorrow
- At: 0654
- For: Days
- Starting: Today 0654
- AM-PAC/JHHL: AM-PAC/JH Highest Level of Mobility Protocol (selected), No AM-PAC/JHHL Protocol
- Activity Level: Strict Bed Rest, Bed Rest With Exceptions, No Restrictions
- Additional Activity Instructions: (empty text area)
- Comments: + Add Comments

At the bottom of the 'Activity (specify)' dialog are 'Accept' and 'Cancel' buttons.

REMINDER

- Providers will continue to place orders for PT/OT/Speech Evaluation as needed
- AMPAC is an activity order and does not take the place of PT/OT orders

