FORUM

The Stiegelmeyer-Group's company magazine



Mobility promotion in care-giving routines

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Simone Weinfurtner, center manager, talks about the mobilization in everyday care

Ms Weinfurtner, you have been working in the field of rehabilitation for 22 years. What has motivated you to continue your professional development in this area over the years?

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In addition to your main occupation, you also give courses on professional patient mobilisation. How has the response been?

Many employers have recognised how important the topic of patient mobilisation is. They are increasingly investing in training for their employees. I feel pride in the way my students develop and in the results at the end of a course.

In 2012, you became a charge nurse at a psychiatric hospital. What did this change mean for you, moving from overseeing nursing care to charge nurse of a unit?

At first it was not easy to combine my primary professional tasks of more than 40 hours a week with my studies. The charge nurse position in Regensburg, however, allows me to devote myself not only to the profession I learned, but also my work as a lecturer and to pursue my professional development in the form

In addition to your numerous activities, you present the Vertica bed for Stiegelmeyer at trade fairs. How did your contact with Stiegelmeyer come about?

I saw the new Vertica mobilisation bed at the Stiegelmeyer trade fair stand in 2010. Since I find the theme of mobilisation particularly interesting because of my profession, I started talking to Stiegelmeyer. They were interested in my many years of professional experience in the area of rehabilitation and offered me a chance to present the bed at trade fairs.



Mobility promotion in care-giving routines

You are a professional assistant for therapeutic stimulating care of patients with central nervous system damage (BOBATH BIKA® method). One aspect of this is the mobilisation of patients. Why is this so important?

After a long time in an intensive care unit, after surgery or a serious disease, patients' perception of their body's position and posture are affected. Targeted movement promotes the perception of the self, which is why it is important. With mobilisation – movement, in other words – the nerve cells responsible for muscles, tendons and joints are stimulated. Even the patient's first contact with the floor results in an improvement and strengthening.

What physical discomfort occurs when mobilisation of patients does not take place?

If patients cannot be mobilised for a lengthy period of time, balance and circulatory problems frequently arise. The muscle mass breaks down, like when a broken leg is enclosed in a cast. In addition, the sleeping-waking rhythm is negatively affected. The longer mobilisation is put off, the greater the physical deterioration process.

What challenges have to be overcome by nursing or care staff and patients during mobilisation?

For the staff, early-stage mobilisation often means maximum assistance and therefore greater effort. The first thing that happens is sitting up on the edge of the bed, and here patients often become dizzy due to the speed this occurs. Mobilisation aids, such as the mobilisation bed, help both staff and patients with sitting up and standing up at an appropriate speed. It reduces the effort required on the part of the staff as well as the physical effort required by the patient.

What mobilisation measures are used in practice?

There are several different transfer techniques which are oriented towards normal movement. We use a lot of physical effort, but no lifting or carrying. This allows the patient to relearn normal movement. Staff work with weight transfer, staying very close to the patient – but doing everything in small steps. This allows whatever the patient has learned to be consolidated in the brain so that it can be retrieved more easily the next time, since it is no longer a new motion sequence. The goal is to permit patients to be able to mobilise themselves independently or with minimal assistance again by the end of therapy.

Many thanks for your time and responses. We wish you all the very best for the future in your professional and personal life.

This interview was conducted by Kirsten Kaawar and Sonja Tödtmann



Simone Weinfurtner is the charge nurse at the centre for gerontology in the German healthcare company "Medizinischen Einrichtungen des Bezirks Oberpfalz". She also teaches the Bobath method to nursing staff of patients with central nervous system damage. In addition, she works as a trainer for the LiN concept of neutral positioning at various hospitals. Besides these activities, she is also enrolled in a bachelor degree programme in health and social management. After her training at the healthcare company medbo Regensburg school of nursing, Ms Weinfurtner worked in the area of rehabilitation as a nurse, charge nurse and, ultimately, senior nurse.