Atlas Mobility: A Legacy of Making Mobility Part of Care

After 17 years of working alongside hospitals to advance safer patient mobility and caregiver safety, Atlas Mobility has concluded its operations across the country.

While the company has reached the end of its operating journey, the work behind Atlas was built around an idea that remains as relevant as ever: **Mobility is Medicine.**

Atlas began in 2009 with a simple observation from a Level 1 Trauma Center in the San Francisco Bay Area. Patients needed to move. Caregivers needed to move them safely. Yet hospitals often lacked the people, processes, and resources needed to make mobility a consistent part of everyday care.

Founder and CEO Eric Race set out to change that.

What began as a focus on safe patient handling grew into a broader approach to mobility care. Atlas developed the Mobility Technician model, embedding specially trained professionals alongside hospital care teams to support patient mobilization, safe patient handling, equipment use, training, rounding, and the day-to-day work required to make mobility part of the culture.

Over time, that model expanded beyond the bedside. Atlas developed program management capabilities, workflow software, mobility analytics, and real-time patient monitoring technology designed to help hospitals understand what was happening with patient movement and take action earlier.

The evolution from Atlas Lift Tech to Atlas Mobility in 2025 reflected that broader mission. The company had grown from a safe patient handling organization into a technology-enabled mobility platform bringing together people, processes, software, and hardware to help hospitals improve care.

Turning Mobility Into Something Hospitals Could Measure

One of Atlas' most important contributions was helping move mobility from an activity that happened at the bedside to something hospitals could measure, manage, and improve.

The Mobility Technician model gave care teams additional support where it was needed most. Atlas' software helped capture mobility activity and program performance. The company's monitoring technology was developed to make patient movement visible in real time, including how often patients were repositioned, the quality of those movements, and whether planned mobility was actually occurring.

That combination of people, process, and technology allowed hospitals to look at mobility differently.

Instead of viewing movement as a task that had to be completed around everything else happening in a hospital, Atlas worked to establish mobility as part of the care plan itself.

The results demonstrated what was possible.

Across Atlas programs, hospitals reported outcomes including:

- **Up to a 77% reduction in hospital-acquired pressure injuries**
- **Up to a 53% decrease in preventable patient falls**
- **Up to a 93% reduction in total safe patient handling and mobility-related injury costs**
- **Up to 4.5 hours returned to care staff during a 12-hour shift through assistance with patient mobilization**

These results represented more than performance metrics. They reflected patients who experienced fewer complications, caregivers who received more support at the bedside, and hospital teams that had additional capacity to provide care.

The People Behind the Work

Technology was always only one part of the Atlas model.

The heart of the company was the people who showed up in hospitals every day.

Mobility Technicians worked directly alongside nurses, therapists, physicians, and other care team members. Program Managers worked with hospital leadership to build programs, measure progress, and sustain change. Clinical advisors, educators, engineers, technology teams, and countless hospital partners contributed their expertise and experience.

Together, they helped turn mobility from an aspiration into something that could be practiced consistently at the bedside.

For the Atlas team, that meant working in some of the most demanding environments in healthcare and finding ways to make difficult work safer. It meant helping a nurse reposition a patient, teaching a team how to use equipment safely, supporting early and progressive mobility, helping prevent a pressure injury, and finding ways to give time back to caregivers.

Those individual actions accumulated into something much larger.

They helped demonstrate that hospitals could approach mobility as a measurable component of patient safety, caregiver safety, quality, and operational performance.

A Lasting Idea

Atlas was built around a problem that will continue long after the company itself is gone.

Patients need movement to recover. Caregivers need safe ways to provide that movement. Hospitals need systems that make both possible.

The industry has made enormous progress in measuring many aspects of patient care. Atlas believed mobility deserved that same attention.

The company's work helped advance that conversation through bedside experience, clinical education, data, technology, and thousands of interactions with healthcare professionals across the country.

There is still work to do.

The future of mobility care will continue to depend on clinicians, hospital leaders, technology companies, equipment manufacturers, educators, and others who believe that movement belongs at the center of recovery and safe care.

Atlas is proud to have been part of that effort.

Thank You

To the hospitals that trusted Atlas with their patients and their teams, thank you.

To the nurses, therapists, physicians, technicians, and other healthcare professionals who worked alongside Atlas, thank you.

To the clinical advisors, educators, industry organizations, equipment companies, and healthcare leaders who shared their knowledge and challenged us to keep improving, thank you.

And to the Atlas team, thank you for the years spent doing work that was often difficult, sometimes exhausting, and always deeply connected to the people we were trying to protect.

Atlas Mobility may have concluded its operations, but the belief that inspired the company remains:

Mobility is Medicine.

The patients still need to move. The caregivers still need to move them safely. And the work of making mobility an essential part of care will continue.