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Attitudes and behaviour of nursing staff toward in-patient rounding by hospitalists

Historically, medicine and nursing has had a hierarchical and patriarchal relationship, with physicians holding monopoly over knowledge-based practice of medical care, thus impeding inter professional collaboration. Power gradient prevents nurses from demanding cooperative patient rounding. We surveyed attitudes of nursing staff at our tertiary care community hospital, before and after implementation of a patient-centered interprofessional (hospitalist-nurse) rounding process for patients. We obtained a baseline Nursing Staff survey of about 90 nurses working at Mayo Clinic Health System, Franciscan Healthcare in La Crosse, Wisconsin. Survey questions were used to assess baseline attitudes and satisfaction with current model of in-patient rounding. Starting March 19th 2012, the “patient-centered in-patient rounding plan” was implemented by every hospitalist staff for next 3 months. After the implementation period, attitudes and satisfaction of nursing staff towards Hospitalist rounding and communication were reassessed using the same surveys. There was a substantial improvement in nursing staff satisfaction related to the improved communication (7%-54%, $p < 0.001$) and rounding (3%-49%, $p < 0.001$) by hospitalist providers. Patient-centered rounding also positively impacted nursing workflow (5%-56%, $p < 0.001$), nurses’ perceptions of value as a team member (26%-56%, $p = 0.0018$)

and their job satisfaction (43%-59%, $p = 0.103$). Patient-centered rounding positively contributed to transforming the hospitalist–nurse hierarchical model to a team-based collaborative model, thus enhancing inter professional relationships.

Speaker Biography

Umesh Sharma, MD, MBA, FACP, FHM is currently serving as Consultant at Department of Hospital Medicine, Mayo Clinic Health System; Assistant Professor of Medicine at Mayo Clinic College of Medicine; Chair of Division of Community Hospital Medicine, Mayo Clinic Health System (Jan 2014 to date) and; Regional Chair of Department of Hospital Medicine, Mayo Clinic Health System, South-East Minnesota practice (Aug. 2016 to date). He also served as Chair of Department of Hospital Medicine, Mayo Clinic Health System, Franciscan Health Care, La Crosse, WI (Jan 2012 to July 2016). His roles include: Leading clinical integration of Hospital Medicine departments across various sites in Mayo Clinic Health System in WI, MN; dissemination of Mayo Clinic’s corporate strategies and rearrange community division of hospital medicine’s priorities and resources to ensure sustainable competitive advantage; strategic consulting, including identifying and solving current state challenges, planning and implementation of projects to achieve an integrated future state model for Community Division of Hospital Medicine and; work-force planning: physician recruitment, contracting, on-boarding, etc. He has completed his Master of Business Administration from University of Massachusetts, Amherst, Isenberg School of Business in May 2015; Residency: Internal Medicine, Weill Medical College of Cornell University at St. Barnabas Hospital, Bronx, NY July 20, 2003 to July 20, 2006; MBBS (Bachelor of Medicine & Surgery), Byramjee Jeejeebhoy Medical College, University of Pune, Pune, India July 1993 to Jan. 1999.

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