There is strong research that states sitting versus standing at a patient's bedside significantly impacts patient compliance with the treatment plan, provider-patient rapport, and patient satisfaction [1]. These factors are known to decrease lengths of stay and costs, as well as improve clinical outcomes. While you can generalize these results, there is a lack of evidence on the impact of sitting at the bedside specific to Case Managers (CM) and Medical Social Workers (MSW), as well as evidence supporting the effectiveness of this intervention on medical-surgical patients in the hospital. Our evaluation address these gaps in the research literature.

**PROCESS**

Project S.I.T. D.O.W.N. was implemented in two Phases (30 days each):

**Phase 1** – designated program administrators (PAs) collected data on the amount of “real time” the CM/MSW stood at the bedside while performing an assessment. They then administered a survey within one hour of the initial assessment, asking 5 questions that were catered to meet the needs of this specific project (See Appendix A). Upon completion of the first month of surveys (standing) Phase 2 was implemented.

**Phase 2** – Portable chairs were distributed. During the 30 days, PAs followed the same procedure and collected data on the amount of “real time” the CM/MSW staff sat at the bedside. Surveys asking the same 5 key questions were conducted within one hour after the initial assessment.

**RESULTS**

Patients perceived the CM/MSW as present at their bedside longer when they sat, even though the actual time they spent at the bedside did not change significantly whether sitting or standing. Patients with whom the CM/MSW sat:

- Reported a more positive interaction.
- Increased understanding of what they could expect during their hospital stay.
- Participated more fully in their discharge planning.

**Actual Patient Comments**

“*She didn’t rush she sat with me, yes very appropriate*”

“*She was quite a gal, very impressive good amount of time*”

**LESSONS LEARNED**

Sitting instead of standing at the bedside impacts:

- the patient experience
- patient compliance
- provider patient rapport

**AND**

You are eye level with the patient instead of ‘standing over’ them, which makes patients feel vulnerable;

Sitting down has a calming effect, like an adult moving to the same level as a child;

Sitting down creates an open, friendly and relaxed atmosphere; and MOST IMPORTANTLY,

Sitting down says “You have my undivided attention.”

**PRACTICE IMPLICATIONS**

All healthcare providers on a patient’s care team should consider these findings while new ways of enhancing the patient care experience are being developed. Any healthcare provider has the power to have a positive effect on patient satisfaction with the quality of the visit [2].

**Appendix A**

<table>
<thead>
<tr>
<th></th>
<th>Standing (n = 175)</th>
<th>Sitting (n = 104)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>89 (50.9%)</td>
<td>49 (47.1%)</td>
<td>0.546</td>
</tr>
<tr>
<td>Female</td>
<td>86 (49.1%)</td>
<td>55 (52.9%)</td>
<td>0.546</td>
</tr>
<tr>
<td>Age &gt; 65</td>
<td>94 (53.7%)</td>
<td>54 (51.9%)</td>
<td>0.772</td>
</tr>
</tbody>
</table>

Q1. Patient felt staff spent appropriate amount of time in room

146 (83.4%) vs. 102 (98.1%)< 0.001

Q2. Satisfied with Staff

157 (89.7%) vs. 102 (98.1%) 0.004

Q3. Staff Understood Needs

162 (92.6%) vs. 104 (100%) < 0.001

Q4. Staff included me in plan of care

141 (80.6%) vs. 100 (96.2%) < 0.001

Q5. Mean Staff LOS in Room (see Graph)

8.3 (5) vs. 15.9 (8.2) < 0.001

References


**IMPLICATIONS FOR PRACTICE**

- Patients perceived the CM/MSW as present at their bedside longer when they sat.
- Sitting has a calming effect, like an adult moving to the same level as a child.
- Sitting creates an open, friendly and relaxed atmosphere.

**LESSONS LEARNED**

- The CM/MSW stood at the bedside while performing an assessment.
- They then administered a survey within one hour after the initial assessment.

**The TEAM**

Laurie Biscaro, RN, ACM
Ashley May Ronaldson, BSN, RN; and Case Management and Medical Social Work Team; at Santa Barbara Cottage Hospital

**The CHAIR**

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- Cottage Health System
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**P-value below 0.05 considered statistically significant.**

**Notes**

- P-value below 0.05 considered statistically significant.