

Schwartz Rounds: An Intervention to Support Emotional and Psychological Wellbeing of Hospice Staff

We are working to radically improve the way people are cared for and to support the staff who deliver care





Schwartz Rounds: An Introduction



'We have to get on with the job'

Distressing situations become the **norm**.



Staff use **protective strategies** to help deal with
the emotional distress

Such strategies can **inhibit** the ability to empathise and connect with patients

"I have learned that medicine is not merely about performing tests or surgeries, or administering drugs...
For as skilled and knowledgeable as my caregivers are, what matters most is that they have empathized with me in a way that matters gives me hope and makes me feel like a human being."



Confidential forum for **ALL staff** to come together once a month to reflect on the nonclinical aspects of caring for patients – that is, the **emotional and social experiences** associated with their work

At each Round 3 people present an experience from their work.

Story is told from the **staff perspective**





1. Normalising emotions

Healthcare settings can be lonely places.

Thoughts of incompetence and feelings of fear, grief and shame are commonly expressed during Rounds.

Sharing emotions allows staff to move from a place of **isolation** to **shared understanding**, reducing the sense of difference.



2. Creating a culture of openness

The discussions that occur in Rounds model new models of interaction, in which staff can share experiences without judgement or solutions.

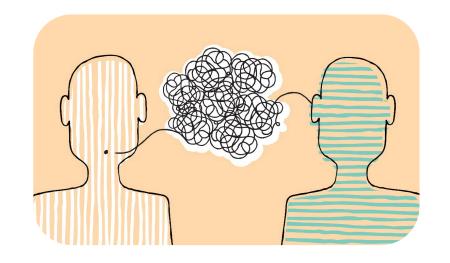
A consistent reflective space may impact on the organisation more broadly, encouraging staff to employ their reflective stance in their work outside the Round.



3. Promoting connectedness and increasing insight

Healthcare environments are increasingly fragmented. Not necessarily with a sense of how individual contributions connect with the complete patient journey.

Rounds appear to engender a **sense of connectedness** with the 'whole' system.



4. Role Modelling

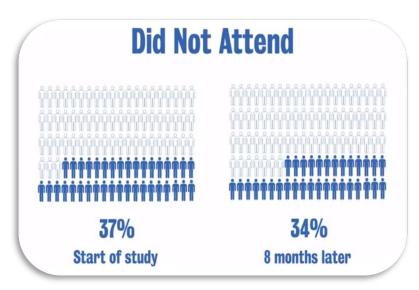
"that surgeon is so high up I would normally be intimidated by him. I'm a medical student and don't want to say anything stupid, but his presentation made him so much more approachable. So if I now had him {for a teacher} and you find a situation upsetting you would be more likely to say something or be more open with him. Not so scared to say something."

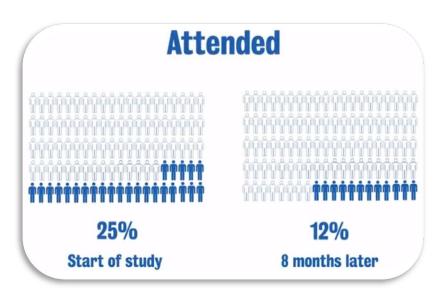
A Longitudinal National Evaluation of Schwartz Center Rounds

Results

The wellbeing of staff who attended Rounds regularly significantly improved, with the proportion of those with psychological distress halving down from 25% to 12%.*

There was little change in the psychological wellbeing of staff who did not attend Rounds over this period.





*According to the GHQ-12



Conclusion 14

Rounds offer a safe, reflective space for staff to share stories with their peers about their work and its impact on them.

Attendance is associated with a statistically significant improvement in staff psychological wellbeing.

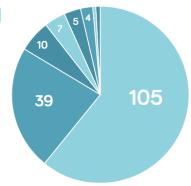
Reported outcomes included increased empathy and compassion for patients and colleagues and positive changes in practice.



Schwartz Round sites, by sector

172 sites in total:

- 105 Acute
- 39 Hospices
- 10 Mental health
- 7 Community
- 5 Primary care
- 4 Universities
- 1 Prison
- 1 Veterinary hospital



The growth of Schwartz Rounds

The spread of Schwartz
Rounds has been rapid. Piloted in the UK in 2009, many healthcare leaders immediately realised the potential for Schwartz Rounds to fulfil an unmet need within their organisations.

Today, 150 Rounds take place across the UK and Ireland each month. Despite pressured working lives, 7,500 NHS and hospice staff make the time to attend Schwartz Rounds.



Acknowledging feelings to preserve one's humanity

For Consultant Nephrologist **Aroon Lal**, Schwartz Rounds involved breaking new ground. But the benefits of opening up have become clear.

One of the things I was concerned about was what would people think of me, getting involved in something that was all about emotions and feelings rather than about hard clinical facts and dealing with patients.

There's a desire to protect oneself by not opening up to patients and not acknowledging one's feelings. But the more you store those up, the less human you become.

The whole point of the Schwartz Round is not about solving the problem. The problem is only the framework around which we are discussing the impact that it's had on us – the difficulties in working in a busy health service, the difficulty in knowing how much of ourselves we can reveal to patients, how involved we can get with patients. It's been really positive.

→ AROON LAL

Consultant Nephrologist Basildon Hospital



Getting Rounds started

The Point of Care Foundation deliver practical advice and help by:

- Providing information and ideas to help you get the discussions started
- Arranging for you to observe a Round
- ☐ Training three members of staff to be able to facilitate Rounds
- Assigning you an experienced mentor who will support you
- Giving you access to resources and webinars
- Connecting you to a community of Schwartz Round organisations
- An annual national event for Schwartz Rounds sites in the UK

Thank you



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