

Supporting compassionate care: lessons from introducing Schwartz Rounds into a district general hospital

Authors: Peter Wilkinson, Heather Caudle, Farhana Nargis and Matthew Hagger

Aims

To describe the process of introducing Schwartz Rounds into a district general hospital (DGH) with the aim of allowing all staff members to express their emotional reaction to providing healthcare in a safe and supported environment.

Methods

A qualitative description of the challenges in introducing Schwartz Rounds.

Results

Schwartz Rounds were introduced into the USA about 20 years ago and in the last 6 years have spread to the UK. They follow a standard format that allows a small panel of staff to describe their emotional reactions to providing care in front of an audience, followed by a facilitated discussion.

Schwartz Rounds were introduced into our DGH serving a population of around 380,000 with the support of the Point of Care Foundation.

Key to their success has been the identification of a team – clinical lead, facilitator(s) and administrator – who have an interest in the emotional impact on staff of working in healthcare. We have run 10 rounds in the last year, with an audience varying between 35 and 70. The panels have consisted of a wide variety of staff including a porter, nurses, therapists, doctors and members of the executive team. The themes have included challenging situations concerning end-of-life care, communication with families, coping when things go wrong and the pressures when we need to ensure that patients are put into the right bed when the hospital is under pressure.

Feedback, which is encouraged on standard forms, has indicated that the rounds have been found to be of great value. This is not only to the staff on the panel, who are able to express and share emotions that would otherwise have been hidden, but also to the audience who realise that the feelings they have in their work are commonly felt. Positive comments from the audience about how the team worked well together and supported each other are often heard.

Conclusions

The problems when compassionate care is not provided have been recently highlighted by the Francis report. Measuring the impact of Schwartz Rounds on the quality of care provided in a busy DGH is difficult, but the feedback we have seen from the rounds has shown that those who have attended have gained appreciably by sharing their emotional reaction in providing healthcare in our hospital.

Conflict of interest statement

None. ■

Authors: Ashford and St Peter's Hospitals NHS Foundation Trust, Chertsey, UK, and Surrey and Borders Partnership NHS Foundation Trust, Chertsey, UK