

The introduction of Schwartz Centre Rounds into Medical Undergraduate Education

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I am a clinical academic; I have a clinical role as a palliative care doctor, and an academic role as academic lead for Clinical and Professional Practice at University College London Medical School (UCLMS). I, with colleagues, aim to promote a culture of reflection amongst medical students.

There is emerging data to suggest that medical students begin to experience compassion fatigue during their clinical training (1-5) and that they experience similar emotions to qualified doctors. These feelings include anger, shame, helplessness, hopelessness, isolation and sadness. Many believe they are at medical school primarily to learn 'science', and many do not expect to reflect on their clinical interactions. Many feel that written reflective practice pieces are artificial; there is a realisation that more 'palatable' forms of reflection need to be introduced in order to affect medical school culture and instil effective methods of reflection in learners (6).

Medical students experience significant stress during their training (7,8). It is previously unknown as to whether SRs could enhance training for medical students by promoting reflection and empathy, thereby enhancing patient care. Building resilience can have profound implications for future professional practice. A compassionate culture embedded during an 'apprenticeship' at medical school, can set the culture for subsequent attitudes in a career.

Having already become a SR facilitator in my clinical practice, I wished to trial SR in medical school. This is the second school in the world (and first outside the United States) to introduce dedicated SR for students, so this is highly innovative. This work was enabled by a Health Education England (HEE) grant of £23,000. Planning involved the team at the Point of Care Foundation at all stages.

Initially two SRs were piloted at UCLMS. Attendance was not compulsory. The first SR ran with year 5 medical students. A panel of clinicians presented their stories of 'A Patient I Will Never Forget'. Two trained facilitators then opened the confidential discussion up to the 265 attendees (see picture below). Feedback was obtained electronically.

The second SCR was entitled 'In at the Deep End' and focussed on transitioning to becoming a doctor and the associated emotions, including anxiety. 180 final year students attended. A focus group was conducted afterwards to gather qualitative data.

The result was a successful learning opportunity for participants. Pilot round data from 400 students showed widespread student support for SRs, (79% said they would attend again; over 80% said SRs had given them insight into emotions that patients can elicit). Many said it was a uniquely valuable opportunity in their training to process and reflect. Most students felt that SRs should be incorporated into the curriculum. A significant proportion (90%) admitted to worrying about compassion fatigue and burnout.

Some feedback comments from the focus group:

- *"Schwartz Rounds are a better way to reflect than the writing tasks...those are just an obligation"*
- *"One of the most useful thing is for me was going home in talking about it"*
- *"It helps knowing that whilst being professional you can still have feelings"*
- *"I think the way you deal with your personal situation is something that is swept under the carpet in the medical profession"*
- *"everyone I spoke to has taken something useful away"*

Since conducting this pilot study, I have formally introduced SR into the undergraduate curriculum and 5 SRs have now run. To date, 710 medical students have experienced a SR.

I presented to the General Medical Council (May 2016) about the potential role of SRs in UK medical schools. I have also presented this work at a resilience symposium at which 28 of the 34 UK medical schools were represented. At UCLMS we are combining Schwartz rounds with other tools such as mindfulness, to promote medical student emotional wellbeing and reduce feelings of isolation and anxiety.

In addition, in conjunction with colleagues at the Point of Care Foundation and UCL, I have published two papers in peer reviewed journals (12,13). UCLMS has taken part in a national evaluation of Schwartz Rounds (Kings Fund).

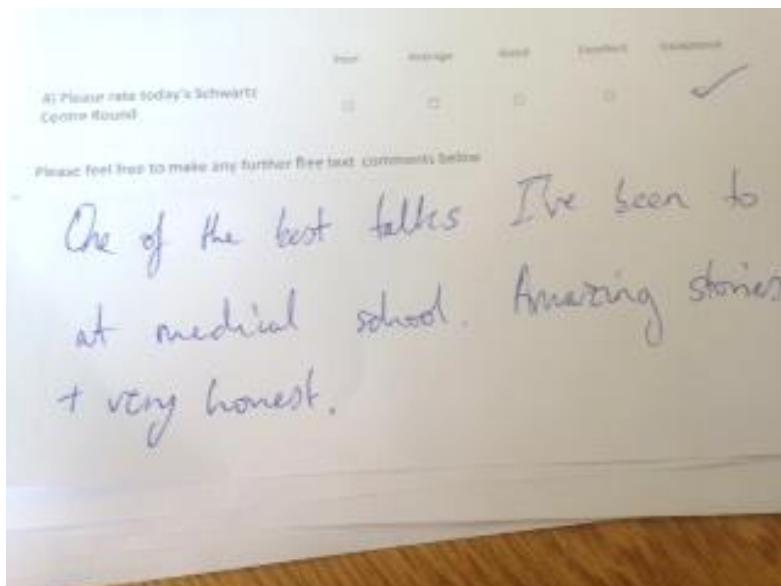
I hope this demonstrates my enthusiasm for adopting innovative, evidence-based learning techniques. SRs can promote excellent role modelling for learners. Other medical and nursing schools have approached me about how to implement this tool. This has been a fascinating project to run and implement. I was also very grateful to receive a University College London Provost Teaching Award in 2016 in recognition of this work.

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The first pilot Schwartz Centre University College London Medical School (September 2014)



Some free text feedback from a year 6 medical student about to graduate from the University (June 2016)