

An analysis of the implementation of Schwartz center rounds at a large multi-site central London NHS trust.

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Background

To promote compassionate care, healthcare organisations must support the wellbeing of its staff. Schwartz center rounds are one example in which hospitals can support employees by enabling time for staff to reflect upon and share the emotional non-clinical aspects of delivering care to patients. Schwartz center rounds were implemented at Imperial College Healthcare NHS Trust in June 2015 supported by Macmillan Cancer Support and Imperial charity.

The Analysis of Healthcare Provision aimed to 1) define and describe how SCRs are hypothesised to work and 2) evaluate the implementation of Schwartz center rounds at Imperial College Healthcare NHS Trust in relation to **Quality*: are the guidelines and recommendations adhered to? **Impact*: have Schwartz center rounds had an impact on individuals, teams and / or the organisation? and **Accessibility*: are staff from all areas of the organisation aware of and able to attend Schwartz center rounds?

Imperial College Healthcare NHS Trust

The Trust consists of five hospitals with three main sites which are located on average 4 miles apart. The Trust provides acute, specialist and maternity care to a population of a million people and employs over 10,000 staff including 2,300 Doctors, 4,300 nurses & midwives, 600 AHPs, 1,000 scientists and 120 pharmacists.



Method

Defining and describing how Schwartz center rounds are hypothesised to work: a literature review including all literature about Schwartz center rounds resulted in the development of a logic model and composite definition of Schwartz center rounds.

Evaluation of the implementation of Schwartz center rounds: The logic model and definition, together with standards provided by the Point of Care Foundation (PoCF) underpinned the evaluation. A mixed methods approach to data collection incorporated a) documentary analysis of evaluation forms, sign in sheets and minutes of steering group meetings; and b) a survey & interviews with key stakeholders including non-attenders. Data were used to audit implementation against the standards. The standards were categorised as *Quality*, *Impact* or *Accessibility* in relation to their focus.

Findings

37 papers were included in the literature review and a composite definition and logic model were produced. Evaluation findings included:

**Quality* – Schwartz center rounds were largely implemented in line with best practice and continued to attract new and repeat attenders

**Impact* - individual and team level impact was reported however it was considered too soon to benefit from an organisational level impact only one year after implementation of Schwartz center rounds

**Accessibility* - there were several barriers identified which affected accessibility, one of these barriers was the multi-site logistics of the Trust and also the time of day at which the Schwartz center rounds are held which impacted on diversity across all staff groups.

Results



Recommendations

The following recommendations resulting from this evaluation are planned for discussion with the Schwartz center rounds steering group at the Trust:

Quality

- the panels should be prepared in advance
- steering group and core project group membership and roles should be defined and include senior nurses
- steering group meetings should take place immediately following a Schwartz center round

Impact

- too soon to evaluate impact. Criteria should be re-evaluated at a later date

Accessibility

- the time of day should be changed to allow ward nurses to attend Schwartz center rounds, the current lunchtime slot clashes with meal and medication times for patient on wards, Schwartz center rounds should be held earlier or later in the day
- consider different rooms to avoid intimidation (e.g. avoid lecture theatre style rooms and aim for conference style layout to level hierarchy).
- consider contacting neighbouring trusts who may have similar challenges to identify ways to address issues

Further research

The recommendations below should be considered for future research:

- the logic model should be revised to include findings from this evaluation and published to support trusts implementing Schwartz center rounds
- further research should be undertaken into the impact on teams & individuals of being on a panel and sharing a case together
- PoCF should produce guidelines for shared learning for implementation at large trusts operating on multiple sites.