

## **Guidance for Schwartz Center Rounds panellists**

Thank you for agreeing to take part in the Schwartz Center Rounds.

To help you prepare to participate on the Rounds panel, the following summary provides some brief background information on the history and purpose of the Rounds, explains the format of the meeting and offers some tips on ways to prepare for the discussion and what you might expect on the day.

### **What are Schwartz Center Rounds®?**

Developed by the Kenneth B Schwartz Center in the USA, the Rounds provide a structured monthly one-hour forum for staff from all disciplines to discuss difficult emotional and social issues that arise in caring for patients. The goal of the Rounds is not to solve problems but to explore the human and emotional aspects of the experience of delivering care and the challenges that staff face from day to day.

The Rounds are based on a patient case that raises specific issues for those caring for the patient.

Schwartz Rounds have been running for thirteen years and have expanded to more than 180 sites in the USA. In 2008 a partnership between the Schwartz Center and The King's Fund's Point of Care programme brought Schwartz Rounds to the UK to begin testing and implementation. Pilot Rounds were launched at Cheltenham Hospital and the Royal Free Hospital in London in Autumn 2009.

One of the main purposes of the Rounds is to help staff feel more supported in their jobs, to give them the time and space to reflect on their roles which they might not otherwise have in their everyday routines on busy hospital wards.

### **The Rounds format**

A particular topic is chosen for each session – for example, giving bad news or being caught between the patient and their family – and Rounds organisers identify a case that they think will allow participants to explore some of the issues around this topic.

On the day, the Rounds will be briefly introduced by the facilitator, who will explain the format to those attending and lay out some ground rules, in particular asking participants to maintain confidentiality both of the details of the case discussed and of the comments made during Rounds discussion.

Next the panel, which is composed of 2–3 staff who were involved in the care of the patient and know the case well, spend about 10–15 minutes presenting. A clinician on the panel very often provides a case summary to start, and then panellists take about 5 minutes each to describe their involvement in the case, particularly focussing on how it made them feel and what emotional or social issues it may have raised for them.

The facilitator then leads the discussion as the dialogue is opened to the floor. Attendees ask questions of the presenters, share experiences and reflect on the challenges of delivering care both in this and analogous situations. Near the end of the hour, the facilitator may prompt the panellists for some final thoughts or try to summarise some of the key themes that have come out of the discussion.

### **Tips for preparing for the Rounds**

- Refer to case notes written at the time and ask colleagues who were also associated with the case whether they'd be willing to compare their memories of the case with yours.
- Ask yourself not what you could have done better or how you could have 'fixed' the problem but how the case made you feel. What were its particular challenges? What techniques did you use to cope with the situation? Has it changed the way you work? If so, how?
- Try to keep your presentation to 5 minutes. Remember that there will be time for questions and discussion following your presentation. If you don't have the time to squeeze in everything you want to say about the case, there's a good chance you can pick up the thread again in discussion or that Rounds participants will raise the question themselves.
- Please speak up! Acoustics are often a challenge in some of our larger sessions, and this, combined with the fact that speakers are often sharing emotional stories and may feel a bit exposed doing so, can make it difficult for everyone in the room to hear. Please be alert to attendees' body language while you are speaking, as it may become obvious that they cannot hear you. We will make every effort to provide microphones for larger Rounds.

**For further information:**

Kenneth Schwartz's personal experience of care, published as 'A patient's story' in the *Boston Globe*, is available at [www.theschwartzcenter.org/story/index.html](http://www.theschwartzcenter.org/story/index.html) and provides an excellent introduction to the concepts underlying the foundation of the Rounds.

*For more on Schwartz Center Rounds and The Point of Care, please visit the following sites:*

[www.theschwartzcenter.org/programs/rounds.html](http://www.theschwartzcenter.org/programs/rounds.html)

[www.kingsfund.org.uk/pointofcare](http://www.kingsfund.org.uk/pointofcare)