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Schwartz Center Rounds® Evaluation Report

Executive Summary

PREPARED BY

Colleen F. Manning, M.A.
Michelle Acker, Psy D.
Laura Houseman
Emilee Pressman
Irene F. Goodman, Ed.D.

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EXECUTIVE SUMMARY

The Schwartz Center Rounds® (hereafter referred to as Rounds) are a multidisciplinary forum where caregivers discuss difficult emotional and social issues that arise in caring for patients, with the goal of improving caregiver-patient relationships. Rounds have been growing since their inception in 1997 at Massachusetts General Hospital, and now take place in more than 135 hospitals nationwide.

The Schwartz Center contracted with Goodman Research Group, Inc. (GRG), an independent evaluation, research and consulting firm in Cambridge, MA, to conduct the first external evaluation of Rounds. The evaluation investigated three major research questions:

1. Do caregivers have increased insight into the non-clinical aspects of care after attendance at the Schwartz Center Rounds?
2. Is there increased teamwork among caregivers after attendance at the Schwartz Center Rounds?
3. Do caregivers perceive increased support after attendance at the Schwartz Center Rounds?

In addition to outcomes for individual caregivers, the evaluation also gathered perceptions of departmental and hospital outcomes associated with Rounds and caregivers' feedback about Rounds.

The evaluation included two major components:

1. A retrospective web-based survey of 256 caregivers at six experienced Rounds sites (i.e., where Rounds had been operating for three or more years), supplemented by 44 interviews with caregivers, Rounds clinical leaders, Rounds facilitators, and hospital administrators; and
2. Pre-post web-based surveys of 222 caregivers from ten hospitals newly implementing Rounds.

KEY FINDINGS AND RECOMMENDATIONS FOLLOW AND ARE DISCUSSED IN GREATER DETAIL IN THE FULL REPORT.

KEY FINDINGS

High Quality Rounds

- Caregivers are extremely enthusiastic about Rounds.
- Caregivers give high marks to the topics (90% rate them *very good* or *excellent*), panel presentations (84%), facilitation (83%), and group discussions (78%).
- Caregivers find Rounds very relevant to their individual needs as caregivers (78% rate Rounds *very* or *extremely relevant*).

Increased Insight into the Non-Clinical Aspects of Patient Care as a Result of Rounds

- 88% of caregivers at new sites report greater feelings of adequacy responding to patients' social and emotional issues.
- 86% of caregivers at experienced sites are more focused on the effects of illness on patients' lives and 84% are more compassionate toward patients and their families.
- Rounds provide a touchstone for caregivers, reminding them why they entered their professions and strengthening caregiver-patient relationships and counteracting the pressures to approach patient care as a business.

Improved Teamwork as a Result of Rounds

- 93% of caregivers at experienced sites report Rounds give them a better appreciation for the roles and contributions of their colleagues.
- 90% of caregivers at experienced sites report better communication with their co-workers about non-clinical aspects of care.
- 88% of caregivers at experienced sites report more openness to giving and receiving support from their co-workers.
- Outside of Rounds, caregivers follow up with one another with questions and to talk more about Rounds cases or topics. They deepen their understanding of one another's difficulties and approaches to handling difficulties. This promotes solidarity and enhances their teamwork, both within and across disciplines.

More Support as a Result of Rounds

- 82% of caregivers at new sites feel that Rounds support them in their patient care.
- 76% of caregivers at experienced sites report that Rounds decrease their feelings of being alone in their work with patients.

More Rounds, Better Outcomes

- At hospitals that are relatively new to Rounds, the greater the number of Rounds attended, the better the caregivers' interactions with patients and their teamwork after Rounds.
- At sites where Rounds have been operating for three or more years, caregivers who attend Rounds more frequently, compared to colleagues who attend less frequently report:
 - more comfort discussing tough non-clinical issues with patients and their families
 - more compassion for patients and their families
 - more energy for their work with patients
 - more new strategies for handling patient situations

An Unanticipated Positive Outcome – Rounds Benefit Departments and Hospitals

- 51% of caregivers at experienced Rounds sites and 40% of those at new sites report that Rounds have prompted patient-centered changes in practices or policies within their departments or in their hospitals at large.
- Caregivers report that Rounds increase or improve communication and teamwork within the department or between the department and the hospital at large.
- Changes have included: greater use of palliative care teams or new or enhanced palliative care services and changes in nursing care in an ICU.
- Caregivers say that Rounds have made unique and profound contributions to their institutions.

Attending with Co-Workers Increases Impact of Rounds

- Caregivers who attend Rounds with co-workers have higher degrees of increased insight into the non-clinical aspects of patient care.
- Attending with co-workers is associated with greater improvement in teamwork after Rounds.

RECOMMENDATIONS

The results of the evaluation point to recommendations for individual Rounds sites and for the Schwartz Center.

The following recommendations are best directed to the key staff and planning committees at individual Rounds sites, although they are points the Schwartz Center may wish to discuss during new site start-up conversations or in written implementation guidelines.

- Continue to promote regular attendance at Rounds.
- Encourage caregivers to attend Rounds with co-workers.

- Promote collaboration or coordination between Rounds and other opportunities that hospitals offer for exploring the non-clinical aspects of patient care, such as other Rounds (e.g., Palliative Care Rounds, Ethics Rounds, Chaplaincy Rounds).

A number of other recommendations warrant further consideration by the Schwartz Center, though each of them would require the buy-in of individual sites.

- Acknowledge in program materials and communications that departments and hospitals are beneficiaries of Rounds (in addition to individuals).
- Continue to consider how to reach caregivers who are not currently attending Rounds, especially those who need to develop insight into the non-clinical aspects of care and improve their teamwork.
- Investigate further how sites are incorporating the patient perspective or input in Rounds and highlight such opportunities.
- Continue to promote and consider new ways of facilitating discussion and exchange of information among the sites, especially regarding site-specific concerns such as scheduling, promoting attendance of specific disciplines, negotiating the challenges of space and sound, and facilitation.