

A Schwartz Round for Clinical Librarians – a case study

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Abstract

The authors, based on their involvement in supporting Schwartz Rounds at their hospital, presented and facilitated a Schwartz Round at the 9th International Clinical Librarians Conference in 2017. The paper discusses the preparations for the Schwartz Round, and the logistical and emotional issues encountered beforehand and on the day. They plan to hold future Schwartz Rounds on a regional basis.

Key words: librarians; empathy; emotions; organizational innovation.

Background

Following the terminal illness of healthcare attorney Ken Schwartz, The Schwartz Center was established in 1995 in the United States to ensure that all patients receive compassionate and humane care. One initiative is the Schwartz Round. This is a “group reflective practice forum which provides an opportunity for staff from all disciplines to reflect on the emotional aspects of their work” (1). The Rounds intend to help staff to explore and reflect upon the challenges and rewards of providing care; they are not for problem solving despite the instinct to want to find solutions.

Schwartz Rounds have been taking place at Hampshire Hospitals NHS Foundation Trust since 2013. Topics have included cross-site working, dealing with a fire, getting it right when it goes wrong, and maintaining safe staffing levels during a flu outbreak. Hampshire Healthcare Library Service (HHLS) has been supportive of the Rounds by attending, producing supporting material, and a Knowledge Specialist has now been trained as a Schwartz Round facilitator through the Point of Care Foundation (licensed to support Schwartz Rounds in the UK.)

A Schwartz Round for Clinical Librarians

Knowledge for Healthcare (2) encourages library services to embed knowledge specialists within clinical teams to provide services at the point of need. Becker and McCrillis (3) have shown that knowledge professionals can be affected by direct patient contact.

Schwartz Rounds could be an opportunity for knowledge professionals to share their experiences and can help curtail the emotional toll of patient contact. HHLS was invited to facilitate a Schwartz Round (entitled The Emotional Impact of being a Clinical Librarian) at the 9th International Clinical Librarians Conference in 2017. Having gained permission to carry out the Schwartz Round from The Point of Care Foundation, a panel of three clinical librarians from across the NHS in England agreed to share, with a small audience, stories where direct patient contact had deeply affected them.

The process of the Schwartz Rounds begins with panel preparation that is usually done face to face, but in this case it was done through email, which was challenging as the facilitator only knew one of the panellists and none of the panellists knew each other – unusual for a Round where panellists are usually members of the same organisation and often get to meet as a group to share stories before the Round. Preparation is important as there is a duty of care to the panel members (4) as they are presenting in public and revealing something about themselves that they may not normally choose to do.

“Speaking in front of the small, but very selective audience at ICLC made me feel quite nervous, but I managed to ‘hold it together’ and working with other librarians who shared a common interest was a delight!” (panellist).

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It was disheartening that very few people signed up to be the audience for the Round but this may have been due to unfamiliarity with the concept. However, in the end this was advantageous as it gave opportunities for all of the audience to speak and share their own stories.

“Telling my story was a really cathartic experience. I had mentioned bits of it before to others, but this was the first time I told it all explaining all my emotions and felt that I was with people who understood” (panellist).

The panellists had varying degrees of experience in the NHS but all were embedded with clinical teams. After the panel shared their stories audience members opened up to describe their experiences. Common themes included not knowing the outcome of a patient and identifying with an individual patient.

It should be noted that Schwartz Rounds are usually multidisciplinary and do not tend to focus on a single staff group, i.e. clinical librarians. But the panel felt strongly that clinical librarians are not often given the opportunity to debrief in the way that clinicians do, and as non-clinicians there is a tendency to feel over-awed and uncomfortable in the clinical environment (5). This, therefore, was an opportunity to allow clinical librarians to explore their issues in being at the coal-face, as it were.

Despite the initial apprehension around sharing their stories, the panel members found the experience useful to reflect on the emotional side of having direct patient contact.

“I thoroughly enjoyed the experience. Having attended a number of Schwartz Rounds in my local Trust as a member of the audience, it was a great experience to be on the other side. Working on the wards, personally made it easy to write about a specific patient case which had affected me. I found writing my reflective thoughts down very cathartic and easy to do, even though I don't actually consider myself to be very reflective!” (panellist).

The open environment of this particular Schwartz Round is clearly demonstrated in this comment.

“It was lovely how the session naturally evolved into an inclusive group Round. Once the

panellists had broken the ice with our stories, others started voicing their own experiences, and by the end there was no distinction between panellists and audience (I think nearly everyone shared something)” (audience member).

While there are many clinical librarians around the country, they may work in isolation as the only clinical librarian within the ward team, and so the Schwartz Round “helps to increase understanding between colleagues, and so reduce isolation and provide support” (6). In addition to which, the librarian may be the only person in the team seeing patients directly. The rest of the team may not understand what the librarian might see or experience:

“As a fairly new clinical librarian (...) it is reassuring to know now, as I become more established in my clinical librarian role, that I am not alone with these sometimes uncomfortable experiences” (audience member).

Although Rounds are not for problem solving, it seemed appropriate to spend a few minutes at the end of the Round discussing how emotional support could be given to clinical librarians who may not be included in a clinical team debriefing. Librarians may not feel it appropriate to share details of patients and cases with library colleagues: ideas discussed included remote buddying, reflection, and discussing issues within a national or regional clinical librarians group.

“It was interesting that we focused so much on our interactions with patients. There are other parts of the job that I find emotionally draining, but perhaps the patient interactions are the most powerful and the ones we are least prepared for. More specifically, for all of us it seemed to be individual patients that left the deepest mark” (audience member).

Conclusion

Although the audience was relatively small with about seven people attending (plus the three on the panel and the facilitator), the feedback indicated that both the panel and the audience appreciated having the protected time and space to explore the emotional impact of being a clinical librarian.

“Being a panellist at a Schwartz Round has made me think about the emotional wellbeing and impact of being a Clinical Librarian and I am sure there would be some weight and interest in doing further study into this aspect” (panellist).

There are currently plans to run another Schwartz Round at a regional study day in England, thus increasing the opportunity to share experiences and reflect on those thoughts and feelings. Given the relatively limited opportunity to explore the emotional impact of being a clinical librarian, this was a worthwhile experience and we would encourage people to attend a Schwartz Round if at all possible.

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