

# Impact Report 2019

How the Point of Care Foundation's programmes support healthcare staff and patients



# Introduction

We last published impact reports for our Schwartz and Sweeney programmes in January 2018. This document reports on the period up to April 2019. For the first time we have brought together our various strands of work into a single report, which we hope will provide a more rounded picture of our work and help readers to understand better how our activities link together. The common thread that links our programmes is that they all help to create the conditions for better relationships in health and social care, among staff and between staff and patients. Staff and patients benefit when they feel that relationships and people really matter.

The period covered in this report saw the continued expansion of our work supporting Schwartz Rounds, as Rounds were taken up by more organisations around the UK and Ireland. We also began work piloting Schwartz Rounds in other sectors outside of health and care, where we see potential for staff to benefit from the structured reflective practice that Schwartz Rounds provide.

Our 'Sweeney programme', focusing on patient-centred quality improvement, delivered projects in the UK and overseas, including a major programme working at scale across sites in the USA. This report also looks at our work in patient experience, where we concluded our management of the 'Heads of Patient Experience' (HOPE) network and launched a new qualification in patient experience, which has been a significant development of our work during the year.

Alongside our programmes of work we conducted research and published reports and articles on areas of concern including staff engagement and the mounting workforce challenges faced by the NHS. The report is structured to reflect these areas of our work, and gives some commentary on how we are taking the various parts of our work forward into 2019/20 and beyond.

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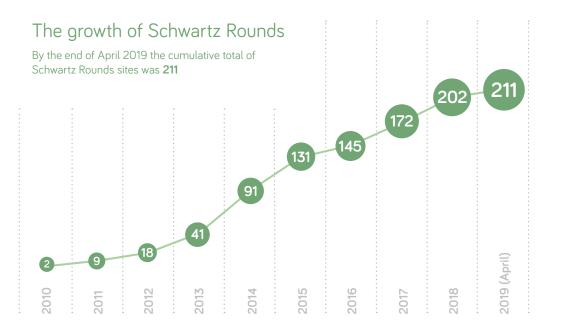
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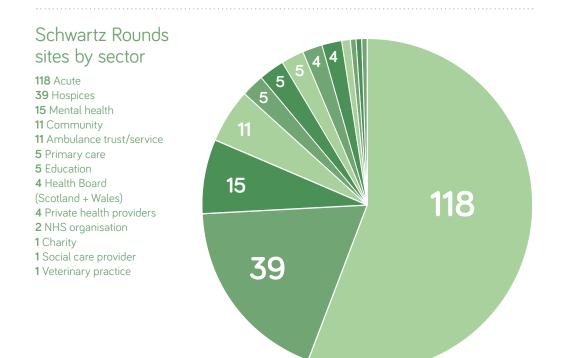




**5855** Facilitators trained in 2019 (That's 1303 in total since inception) Schwartz Rounds are a unique forum for people working in health and care - clinical and non-clinical - to come together regularly to reflect on the emotional and psychological impact of their work. The Point of Care Foundation is licensed to provide training for Schwartz Rounds facilitators in the UK and Ireland, and we are active in promoting Rounds to health organisations throughout those territories. At the end of March 2019 there were 211 organisations across the UK and Ireland operating Schwartz Rounds.

During 2018/19 we have developed relationships outside of the healthcare sector, as organisations from other sectors have identified the potential for Schwartz Rounds to support their colleagues' wellbeing and improve staff relationships. Schwartz Rounds have been shown to be effective in supporting the mental health of staff in healthcare organisations, where the work presents particular challenges, such as working closely with patients at particularly traumatic moments in their lives, and working in a system that places significant strain on the individuals within it. We believe that professionals in other types of organisation - such as veterinary practices, prisons and children's social care - face similar challenges, and we are keen to support work exploring how Schwartz Rounds could support these people too. A further key development during 2018/19 was the establishment of a network for Schwartz Rounds researchers. We wish to support research into Schwartz Rounds, their effectiveness, best practice for Rounds facilitators, and innovations in applying Rounds in different contexts. The Schwartz Researchers' network forms part of the wider Schwartz Community of facilitators and clinical leads for Schwartz Rounds within UK healthcare organisations.





#### @PointofCareFdn · Feb 21, 2019

Pleased to see <u>#SchwartzRounds</u> included in the new <u>@NHS\_HealthEdEng</u> <u>#NHSMentalWellbeing</u> report. We believe Rounds have a crucial role to play in supporting NHS staff to deliver high quality care.

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### Case study : NHS England

NHS England began to consider Schwartz Rounds for its staff in London after the London Bridge terror attacks in 2017, which took place close to its offices in Elephant and Castle in London.

With the attacks so close, many were concerned for friends, family and colleagues, and the emergency response teams within the organisation became closely involved with managing crises throughout the summer, resulting in long shifts, rota working and cancelled holidays. Training of facilitators took place in 2018 and Rounds began the following year.



Jason Nair

We work very hard to support staff, and we have a very good employee support programme, but we identified Schwartz Rounds as a way to support internal communications between staff members. While we don't work with patients directly, we think about the patient all the time, and we have teams here who deal with sensitive issues around patient care.

Schwartz Rounds have created a real buzz. Our latest Round, which was about 'a difficult time', was really well attended and every single person contributed. This included senior people right down to a young apprentice, on her second or third day, who shared a story. It blew me away, and the impact could be seen almost immediately from the insights shared in the Round. We could see the energy around the place changing, and we have a lot of interest now in the next Round. We are already borderline evangelical about Schwartz Rounds! **)** 

Jason Nair Head of Organisational Development, NHS England

### The Point of Care Foundation

## Schwartz Rounds sites by location

182 England
21 Ireland
3 Wales
2 Scotland
2 Northern Ireland
1 Isle of Man

#### @MeekinSarah ∙ Mar 14, 2019

Great to see the schwartz movement spreading across NI. Delighted to welcome @NHSCTrust colleagues to RBHSC round and wishing them all the best in their launch! @PointofCareFdn @theSCCH @BelfastTrust #staffcare

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## Case study : LauraLynn Children's Hospice, Dublin, Ireland

LauraLynn, Ireland's Children's Hospice, is the only hospice in the Republic of Ireland providing palliative care to children with lifelimiting conditions and their families.

The experience of working in a children's hospice like LauraLynn is unique and challenging, so we needed a programme for staff that could build resilience, empathy and selfacceptance. The Rounds were our solution and in less than two years they have become a regular feature of hospice life. We introduced them as a means of improving staff emotional wellbeing, along with driving our values of Compassion, Collaboration and Excellence but they have done so much more! They have helped to create a more open and inclusive organisational culture.



Amanda Vaughan

There is that broader sense that no matter what level or role we work at, we're all connected in our commitment to do our best for the people that we meet. That connectivity piece impacts strongly on me - in a nutshell, the Rounds are creating a resonance that permeates culture and community in the hospice, enhancing tolerance, empathy and connection amongst staff. **J** 

Amanda Vaughan Schwartz facilitator, LauraLynn Children's Hospice

Schwartz Rounds in Ireland were the subject of a study published in June 2019 by the Irish Health Service Executive (HSE), which reported that Schwartz Rounds benefit staff in terms of relevance to their daily work, working better with colleagues and gaining insight into how others care for patients.



Amy Martin

## Case study : Holly House Veterinary Hospital, Leeds

Holly House is a group of veterinary hospitals that began using Schwartz Rounds in 2017. The organisation has felt the impact of Rounds in terms of the way colleagues relate to each other.

The hospital operates as a 'first opinion practice', taking both emergencies and referrals, creating a busy environment where the fast turnaround between cases can make it hard to take any time to examine the emotional impact of the work. Rounds have helped to bring to the surface issues that members of the team were privately grappling with, such as guilt, anger and sadness.

Rounds have really brought our organisation together in a positive way. We have each gained an understanding of one another's work. The after effect has been increased support for each other especially after a difficult case. Everyone is on the same level in Rounds: there are no managers, just human beings. This understanding is translating into more care and compassion for our patients and their owners. **)** 

Amy Martin Schwartz facilitator, Holly House Veterinary Hospital

## Case study : Moorfields Eye Hospital London

Moorfields Eye Hospital is one of the largest and busiest eye centres in the world. Schwartz Rounds began in February 2018 as a way for staff to step away from the busy clinical environment and connect with one another. The Rounds have enabled staff to reflect on the personal and wider impact of caring for people with visual problems. Patients can experience a real sense of vulnerability and fear when diagnosed with an eye condition and this in turn can have a huge emotional and psychological impact on staff.

The Rounds have been well received with 92% of participants rating them as excellent or exceptional, and 88% saying they would recommend them to colleagues. Focus groups revealed staff developed greater understanding of pressures and challenges faced by front line staff. Staff also felt sharing experiences was empowering and liberating.

To care is human and humans need care. Suppressing our humanity is an unspoken rule in healthcare, but Schwartz enables us to be human again – to cry, feel hurt, anger, laugh and share it all. That's the Schwartz magic. **)** 

Dr Rashmi Mathew Clinical lead, Moorfields Eye Hospital



Dr Rashmi Mathew





The Sweeney programme provides a suite of tools and methodologies to help teams working to improve care quality to better understand the experience of their patients as recipients of care. Work under the Sweeney banner takes a range of forms, including:

- Open training courses for individuals in methodologies such as Experience-Based Co-Design (EBCD)
- Support for clinical teams to implement quality improvement methodologies in their particular context
- Wider collaborative projects where we support cohorts of teams working in the same area to learn together, and from each other, to improve care quality

In 2018/19 we worked on 12 programmes with organisations across the UK. Some, such as Gloucester Royal Hospitals, include multiple project teams within a single organisation. We estimate we trained more than 300 people in total across the organisations we worked with. Our work continues to have impact internationally through participation in our open training and commissioned programmes. This year we have worked in Norway and the USA. The programme in America with the Vermont Oxford Network has seen us applying Sweeney methodologies at scale for the first time, working to improve neonatal health across a wide geographic area through webinars.

Analysis of completed projects has shown many specific improvements that teams have made to their service. Often these can be quite small changes that are not difficult to implement but make a big difference to patients' experience of care.

As well as benefiting patients and families, patient focused methods deliver a strong beneficial impact on staff, who have reported that the process re-connects them with their intrinsic motivation for entering caring professions.

The focus on relational aspects of care connects strongly with staff, and represents a culture change in which human aspects of care are placed centre-stage. This complements Schwartz Rounds and contributes to making environments of care more human for staff and patients. The Sweeney Programme in numbers

Over **3000** staff trained through the

Sweeney programme

From 52 organisations

Sweeney End of Life Care Collaborative, 2018 cohort:

**24 out of 26** surveyed participants reported that the programme had a beneficial impact on patients and families, 6 months after project completion **133** specific changes to patient services identified in 14 completed project reports

#### Our international impact

During 2018/19 we worked with international delegates who attended our open EBCD training. They have subsequently gone on to apply the methodology in their home countries. We have also worked directly with organisations overseas through the Sweeney programme.



## Case study : Vermont Oxford Network, USA

The Vermont Oxford Network (VON) is an international network of neonatal units, based in the USA. During 2019 we are delivering co-design webinars to VON members – the first time a Sweeney methodology will be applied in a large-scale programme.

We began in October 2018 by providing training in Burlington, Vermont for the VON core team, following up with three subsequent webinars, in which around 65 teams participated from across the USA. A pilot site (Portland Providence health system) attended the face to face training, and took forward a case study which they presented on the webinar. Thirteen units from across the USA presented their work using experience-based methods at VON's Annual Quality Congress in Chicago in October 2019.



Julie Metcalf

The training provided by the Point of Care Foundation on Experience-Based Co-Design has changed the way I approach my daily interactions with patients and families in the neonatal intensive care unit (NICU). Over the last decade, the NICU culture has been evolving to a more family centered approach, but EBCD takes this approach one step further by ingraining the family in the improvement process from the inception. With the introduction of this process, our unit has been able to invite families to not only participate in an advisory role, but be heard as an integral part of the team. **)** 

#### Julie Metcalf

Clinical Lead Neonatal Nurse Practitioner, Providence Portland Medical Center, USA



Gráinne Brady



Dr Justin Roe

## Case study : Royal Marsden NHS Foundation Trust, London

An Experience-Based Co-Design project, working in partnership with head and neck cancer patients at The Royal Marsden NHS Foundation Trust, revealed that people wanted a range of information resources in numerous formats.

People valued the provision of protective swallowing exercises during treatment and the fact that it gave them a degree of control at a time when they felt they had limited control during treatment. Patients and staff also agreed on the need for more flexible appointment scheduling.

Whilst we were confident that our department had an evidence-based clinical pathway for patients undergoing radical treatment, we knew less about how that pathway was experienced by our patients.

The training provided by the PoCF for our project has not only improved our service provision but changed our mindset in how we work so that we can continue delivering the highest quality, evidence-based services, with patient experience always at the centre. **9** 

Gráinne Brady & Dr Justin Roe Therapies Department, Royal Marsden NHS Foundation Trust

## Case study : Norfolk and Suffolk Mental Health Trust, Norwich

Norfolk and Suffolk Foundation Trust used Experience-Based Co-Design in a project that aimed to reduce restrictive interventions in adult acute mental health wards. The project saw 12 patients and 12 staff being interviewed about their experiences, feelings and emotions of restrictive interventions by using narrative to identify key themes and opportunities for improvement.



The process identified 47 changes, with four key priority change ideas: to create a sensory room on the ward; to provide access to pets; to create accessible information relevant to recovery; and to arrange reunion groups post discharge to inform further improvement.

Experience-Based Co-Design is a direct conversation between staff who deliver services and patients who receive services. The improvements we have identified will lead to a reduction in restrictions.

We are currently working on four key priority change ideas and have shared the project and its progress to date at a celebration event with partners, service users, carers and staff. ))

Lesley Drew Participation Lead and member of the EBCD project team Lesley Drew



#### The HOPE network in numbers

Starting in 2015, the Point of Care Foundation led the Heads of Patient Experience (HOPE) network, which we established with funding from NHS England.

2018/19 was the last full year of our management of the network, as NHS England decided to take the network in-house from May 2019. During the year we ran an expanded programme of meetings, including regional meetings in the southwest and east of England. Meetings often focused on issues suggested by members or that emerged from discussions at earlier meetings.

By April 2019 the network contained 304 members. A review of the network during the year found exceptionally high rates of engagement compared with other types of healthcare network. Since the closure of the programme we have maintained contact with the network and the resources developed through the programme remain available on the Point of Care Foundation website. In May 2018 we published a new toolkit on our website on using patient feedback to improve quality.

The biggest change during the year was the development of a new accredited course, Foundations in Patient Experience, for people who work in patient experience. This has been highly popular and ran for three cohorts during 2018/19. We also developed a 'bespoke' variety of the course for organisations to provide for their staff, which shares some core modules but includes practical elements that are tailored to the needs of the organisation(s) involved.

As with other aspects of our work, we see the potential for the theory and practical training in patient experience to be used to support organisations providing support or a duty of care to service users. For example, in June-July 2019 we worked to provide bespoke service-user engagement training to staff from organisations across the integrated care system in Dorset. 16

meetings between March 2015 to January 2019



99.2%

of attendees rated meetings as 'good' or 'excellent' 304

Members by end of April 2019



**ZOI** Network members

attended meetings

#### Impact of the HOPE network

During the operation of the HOPE network we ran a survey of members to gauge the value and impact of the network to members.

#### We surveyed members of the HOPE network and they told us:

rated the network as 'very valuable'

said they had taken forward changes to their workplace

said they were likely to recommend HOPE membership to colleagues

Top 3 benefits of the network: 1: Practical resources and evidence 2: Hearing from experts in the field 3: Having space to reflect on practice with peers

## Case study : HOPE network: Princess Alexandra Hospital, Essex

In my job leading on patient experience at The Princess Alexandra Hospital NHS Trust the HOPE network helps me connect with like-minded peers, people who just 'get it', no explanations needed. For me that's really energising. It makes me think, I am not alone, there are people here who are trying to achieve the same goals, dealing with the same challenges.

HOPE network meetings have often functioned as a 'third space' for me, a chance for reflection and for better thinking in a way that can make a real difference, because there is that chance to connect experience and improvement.

I go back to work with greater clarity and better leadership, because the conversations cut through the fads and the white noise and I know what I want to do.

Too often we get lost in process, when it is people that we need to focus on, the very human everyday interactions and experiences which are the most important part of making our patients, families and carers feel comforted, supported and cared for. That is, it seems to me, what the HOPE network has been about. **?** 

Shahid Sardar Associate Director Patient Engagement, Princess Alexandra Hospital



Shahid Sarda



## Case study : Foundations in Patient Experience: Walsall Healthcare NHS Trust



Kuldeep Singh

Strategically patient experience has parity with and threads across patient safety and quality. I used to often wonder, given the importance and usefulness of patient experience insights, why there isn't any formal training course or qualification which prepares patient experience professionals for nationally accepted standards.

Some people still have the myth that patient experience is just about 'pink and fluffy' hence it is treated as an add-on to portfolios of managers and executives. The 'Foundations in Patient Experience Course' was a real eye opener for me and empowered me with deeper understanding of patient experience and how to use this knowledge and skills to lead and do my job better. The course's theory and well referenced evidence sources gave me the confidence to address the entrenched attitudes and culture about patient experience to put patients firmly at the heart of everything we do.

Learning to effectively measure and create meaningful feedback insights along with authentic co-production to improve clinical and non-clinical outcomes for patients has been the course highlight for me.  $\mathfrak{M}$ 

Kuldeep Singh Patient Experience Manager, Walsall Healthcare NHS Trust Foundations in Patient Experience training March 2018 to May 2019

Participants in core Foundations courses:

55

Proportion of participants rating the course as 'very relevant'

93%

Participants in bespoke Foundations courses:

58

Average reported confidence that participants will apply learning to their jobs

**8/10** (10 = totally confident)

## Case study : Scottish Foundations in Care Experience course

We worked with Healthcare Improvement Scotland and NHS Education for Scotland to develop the 'Foundations in Care Experience' course. This was an adapted version of the Foundations in Patient Experience course, maintaining core elements but adapting it to the context of the Scottish health and social care system. The course built confidence, skills and knowledge among people leading on improving care experience in Scotland.



Diane Graham

This was a remarkable opportunity to bring people together to become a learning community that could focus on systematically and effectively improving the experiences for people who receive care and support across Scotland.

Not only did it deliver on increasing our knowledge around the evidence base, theory and good practice, it also helped us to see how those in different roles and functions within our organisations can work better together and share feedback, insights and data to really make a difference in improving our care services. This training proved a good experience for everyone involved which was mostly due to the incredibly experienced and knowledgeable faculty delivering the course. **)** 

Diane Graham Improvement Advisor (person-centred health and care) Healthcare Improvement Scotland Great format and structure. Informative, interactive, lots of opportunity to network. Thought provoking. **)** 

As a result of this course I feel the participants became more connected around care experience in a way that wasn't there before. It has brought the agenda and people who lead in different roles together in order to deliver better care and experience for patients, and it made them more confident in their roles.

We can already see the value of this course in providing reassurance about skills and knowledge to lead improvement in care experience within our organisations. We will now build on the foundations that this has provided. )

Claire Curtis Associate Improvement Advisor Healthcare Improvement Scotland



Claire Curtis





A core value at the Point of Care Foundation is that our work is based on the best evidence, and our website contains an extensive library of research evidence that presents the case for our work. We also publish our own research.

In September 2018 we published a report on staff engagement at three NHS trusts which explored the ways in which staff engagement activities within different hospital trusts were impacting on wellbeing.

This was part of a project funded by the Health Foundation to look in depth at staff engagement, and was published alongside reports from our partners, RAND Europe and the Work Foundation.

We also published a report on the teaching of medical professionalism in undergraduate medical education. Our recommendations from the report were published by the GMC to support improved professionalism training, reflecting the GMC's concern about the wellbeing of medical students and medical professionalism more generally.

In addition to our published research we are active as speakers at events, and as collaborators on dissemination projects. We quest-edited the Journal of Health Design twice during the year, and contributed to many conferences.



Other reports by **PoCF** authors

journal papers since the Point of Care Foundation began

Conference presentations 2018 - Apr'19

#### Website analytics - April 2018 to March 2019

Our website provides a range of resources, including toolkits to support patient-centred care, publications and blogs.

Website readers

Blogs unique page views

Unique visits to evidence and resources library

Page views of evidence and resources content

11.148

EBCD toolkit unique users

PFCC toolkit unique users

The Point of Care Foundation

#### **Publications**

Our report on staff engagement was the latest in a sequence of research publications, following on from the Staff Care report (2015) and Behind Closed Doors (2017), which both continued to attract readers during 2018/19.

## Readership of key Point of Care Foundation publications during 2018/19



The case for staff engagement in the NHS

882 unique page views488 downloads



Behind closed doors (2017)

**568** unique page views **249** downloads



Staff care report (2015)

**795** unique page views **159** downloads Conference presentations 2018/19



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Conference appearances by senior staff

3,500+ Delegates reached

3

Demonstration Schwartz Rounds staged at major medical conferences

Events we have addressed include:

Royal College of Physicians conference BMA symposium on bullying Royal College of Surgeons of Scotland triennial conference What Patients Say conference (Chicago) What Works in Children's Care conference Medical Schools Council King's Fund quality improvement conference NHS Providers' Quality Conference

The Point of Care Foundation 3rd Floor, CAN Mezzanine 7-14 Great Dover Street London SE1 4YR

+44 20 3096 7843 info@pointofcarefoundation.org.uk

pointofcarefoundation.org.uk

Registered charity number 1151628