The Ward Round

“I started to hate the ward round more and more. These were feelings I felt every day at the hospital. It’s kind of a fake, one-way communication. The doctors and the nurses should stand behind a glass door so you didn’t have to see them”
Why Qualitative research?

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Qualitative Method

1. Interviews
2. General impression
3. Coding
4. Condensation
5. Summary
6. Result
**Result**

- Effective Communication with the doctor
  - Equality
    - Body language
    - Position in the room
    - Relationship with the other professions
    - Language
  - Understanding of routines
    - Understanding
    - The Routines
  - Ample time
    - Time for questions
    - Preparations before the ward round
  - Integrity
    - Bad news
    - Roommate
    - The staff

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“I am talking about the high expectations that the ward round means for the patient. What do the patient get in exchange? In general? Nothing, just a big disappointment that makes you tired and sad. It feels humiliating and insulting ... You lie there in hope of communicating with the doctor.”
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“If you lie in your bed and someone stands beside you, you feel depressed”

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“The way the ward round works is that you make yourself ready in the morning and begin to wait. But if the ward round came when you were in the bathroom, you missed it for that day and will be forgotten by the doctors.”
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“They can be stressed sometimes when they come ... and then you don’t have time to ask questions, and I don’t remember either. And then I become stressed too.”

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“When they talk about your serious illness in front of the whole room, maybe five or six people, it just doesn’t feel very good.”
“The way the ward round works? The ward round enters the room: ‘Well, how do you feel today,’ says the doctor. You answer what is expected of you. He looks in his papers. Then they communicate in a coded language with each other right in front of you. They take some notes, and then they sweep out”

Discussion - understanding the results

Social Responsivitet
Foucaults maktbegrepp
Den nya patientlagen
Förbättringsarbete
Understanding the reaction

Social responsivity as the natural state - According to Johan Asplund

Things that interrupt the spontaneous sociality - things that interrupt communication.

- Time
- Formalisation of sociality
- Trust and integrity
- Power Imbalance

The hospital as a modernistic stronghold

A new patient law in Sweden

“This new law means that you as a patient is an equal partner and has some kind of power”
The new patient law

I den nya patientlagens 3:e kapitel, § 1 till 2 står att patienten har rätt till information om sitt hälsotillstånd och de undersökningar, vård och behandling som finns att tillgå.

I 5:e kapitlet framgår även att patienten ska vara delaktig i planeringen av sin egen vård.

Det framgår dessutom av 7:e kapitlet att patienten har möjlighet att själv besluta kring de handlingsalternativ som finns. De frågor och åsikter som patienten har om sitt sjukdomstillstånd och behandlingsalternativ som vanligtvis uppkommer under ronden måste alltså sjukvården, enligt lag, besvara och handla utefter.

Improvement work

A model of change that are formed like a spiral rather than a circle because the learning lifts the improvement for each lap.
My suggestions for improving the ward round

Increase the patients knowledge and power through education and information
Increase the time for questions from the patients
Make routines more equal - think language and body signals
Increase integrity by changing room.