Storycatching for Improvement

Adam Thompson, MPH

Patient & Practice Facilitator

To Err is Human
Building a Safer Health System (1999)

One of the report's main conclusions is that the majority of medical errors do not result from individual recklessness or the actions of a particular group - **this is not a "bad apple" problem**.

More commonly, **errors are caused by faulty systems, processes, and conditions** that lead people to make mistakes or fail to prevent them.

Kohn, L. T., Corrigan, J., & Donaldson, M. S. (2000). To err is human: Building a safer health system. Washington, D.C: National Academy Press.

Crossing the Quality Chasm
A New Health System for the 21st Century (2001)

The committee is confident that <u>Americans can have a health care system of the quality they need, want, and deserve</u>. But we are also confident that this higher level of quality cannot be achieved by further stressing current systems of care.

The current care systems cannot do the job.

Trying harder will not work.

Changing systems of care <u>will</u>.

Committee on Quality Health Care in America Institute of Medicine. Crossing the Quality Chasm. Washington , DC : National Academy Press, 2001

Crossing the Quality Chasm
A New Health System for the 21st Century (2001)

Safe

Timely

Effective

Efficient

Equitable

Patient-centered

A health care system that achieved major gains in these six dimensions would be far better at meeting patient needs.

Patients would experience care that was **safer**, more **reliable**, more **responsive**, more **integrated**, and more **available**.

Committee on Quality Health Care in America Institute of Medicine. Crossing the Quality Chasm. Washington , DC : National Academy Press, 2001

The Quadruple Aim

The **Quadruple Aim** was introduced as a compass to guide improvement efforts through four aims:

- **Enhance Patient Experience**
- Improve Population Health
- Reduce Costs
- **Improve the Work Life of Providers**

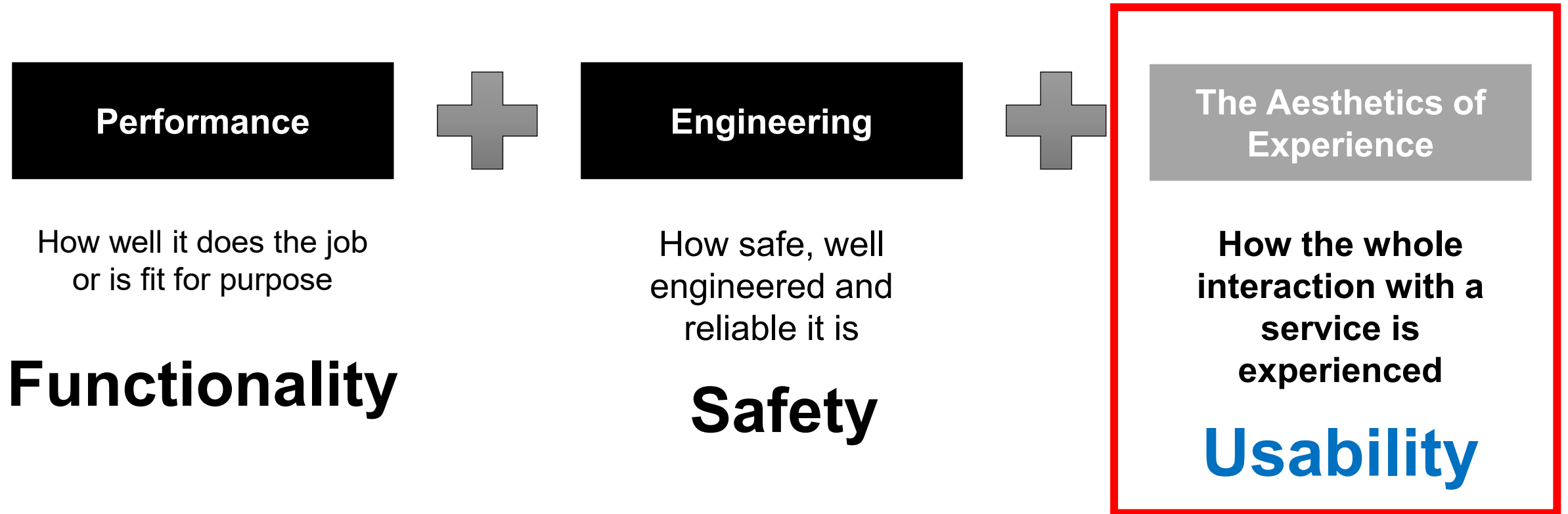|	
Enhance Patient Experience	Improve Population Health
Reduce Costs	**Improve the Work Life of Providers**

Experience & Work Life Status Report

Exhausted

Confused

Unhappy

Over It

The Components of Good Design

Performance

How well it does the job or is fit for purpose

Functionality

Engineering

How safe, well engineered and reliable it is

Safety

The Aesthetics of Experience

How the whole interaction with a service is experienced

Usability

Bate, P., & Robert, G. (2006). Experience-based design: from redesigning the system around the patient to co-designing services with the patient. Quality & safety in health care, 15(5), 307–310. https://doi.org/10.1136/qshc.2005.016527

Storycatching

The Secrets of the Universe

The Whole Story

Satisfaction surveys ask, "How did we do?"

Experience surveys ask, "What happened?"

Satisfaction surveys ask, "Did your doctor spend enough time with you?"

Experience surveys ask, "How often did you get help when you wanted it?"

**We can measure satisfaction and experience, but we must seek to understand story.**

The Power of Story

Story is the narrative thread of our own experience – **not literally what happens, but what we make out of what happens, what we tell each other and what we remember**.

People become real when we put interaction into words: **story is the foundation of relationship.**

Baldwin, C. (2007). Storycatcher: Making sense of our lives through the power and practice of story. New World Library.

Storycatching

Storycatching is the **act of careful listening** and **holding sacred space for others to tell their stories.**
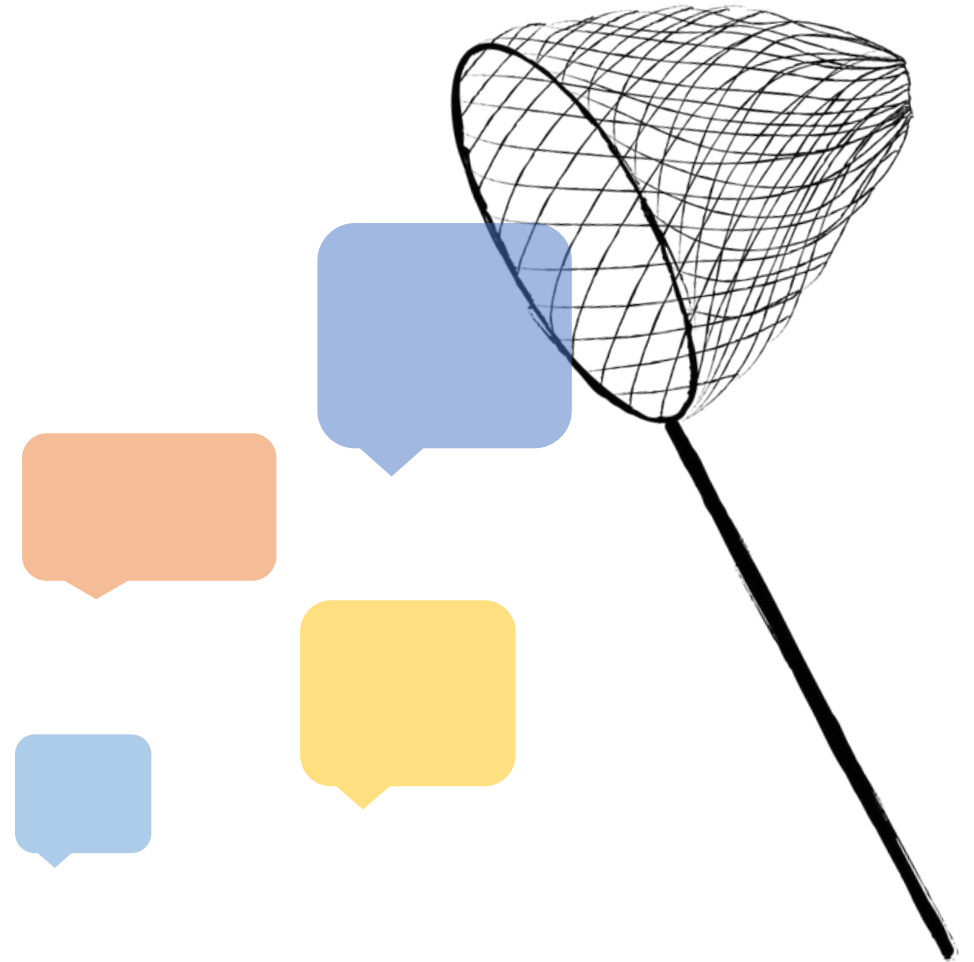
Person-Centered Narrative Intervention

Use of a Person-Centered Narrative Intervention in an Outpatient Palliative Care Setting: A Feasibility Study

Heather Coats, PhD, APRN-BC[1] (iD), Nadia Shive, BA, CCRC[1],
C Robert Bennett, PhD, CPNP-AC, PPCNP-BC, CCRN[2],
Bonnie Adrian, PhD, RN-BC[3], Andrew D Boyd, MD[4,5],
Ardith Z Doorenbos, PhD, RN, FAAN[6,7], and Sarah J Schmiege, PhD[8]

Coats, H., Shive, N., Bennett, C. R., Adrian, B., Boyd, A. D., Doorenbos, A. Z., & Schmiege, S. J. (2023). Use of a Person-Centered Narrative Intervention in an Outpatient Palliative Care Setting: A Feasibility Study. Journal of Patient Experience, 10, 23743735231202729.

The Power of Story

With words alone we can **create connection, establish community**.

With words alone we can **recognize ourselves in each other's lives**.

Baldwin, C. (2007). Storycatcher: Making sense of our lives through the power and practice of story. New World Library.

"Catching Story"

To better catch story in health care, we need to make better use of improvement methods and tools that seek to improve experiences through story.

Method

Experience-based co-design

Tools

Empathy Map

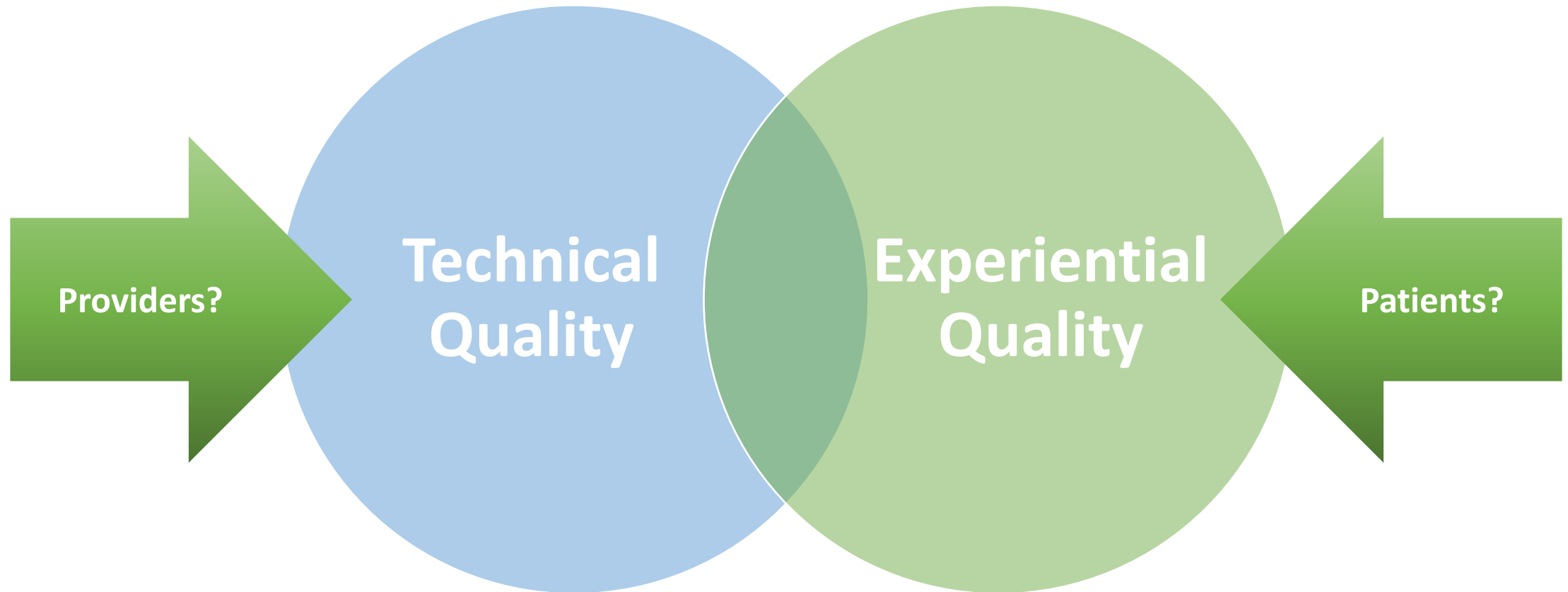Photovoice

Gemba Walk

Experience-Based Co-Design

Experience-based Co-Design is a user-focused design process with the goal of making user experience accessible to the designers, to allow them to conceive of **designing experiences rather than designing services**.

Bate, P., & Robert, G. (2006). Experience-based design: from redesigning the system around the patient to co-designing services with the patient. Quality & safety in health care, 15(5), 307–310. https://doi.org/10.1136/qshc.2005.016527

Experience-based Co-design Toolkit

1. Setting Up

2. Engaging Staff and Gathering Experiences

3. Engaging Patients/Caregivers and Gathering Experiences

4. Bringing Patients and Staff Together to Share Experiences and Begin Co-Design

5. Detailed Co-Design Activities

6. Coming Back Together – Celebration and Review

EBCD: Experience-based co-design toolkit. The Point of Care Foundation.
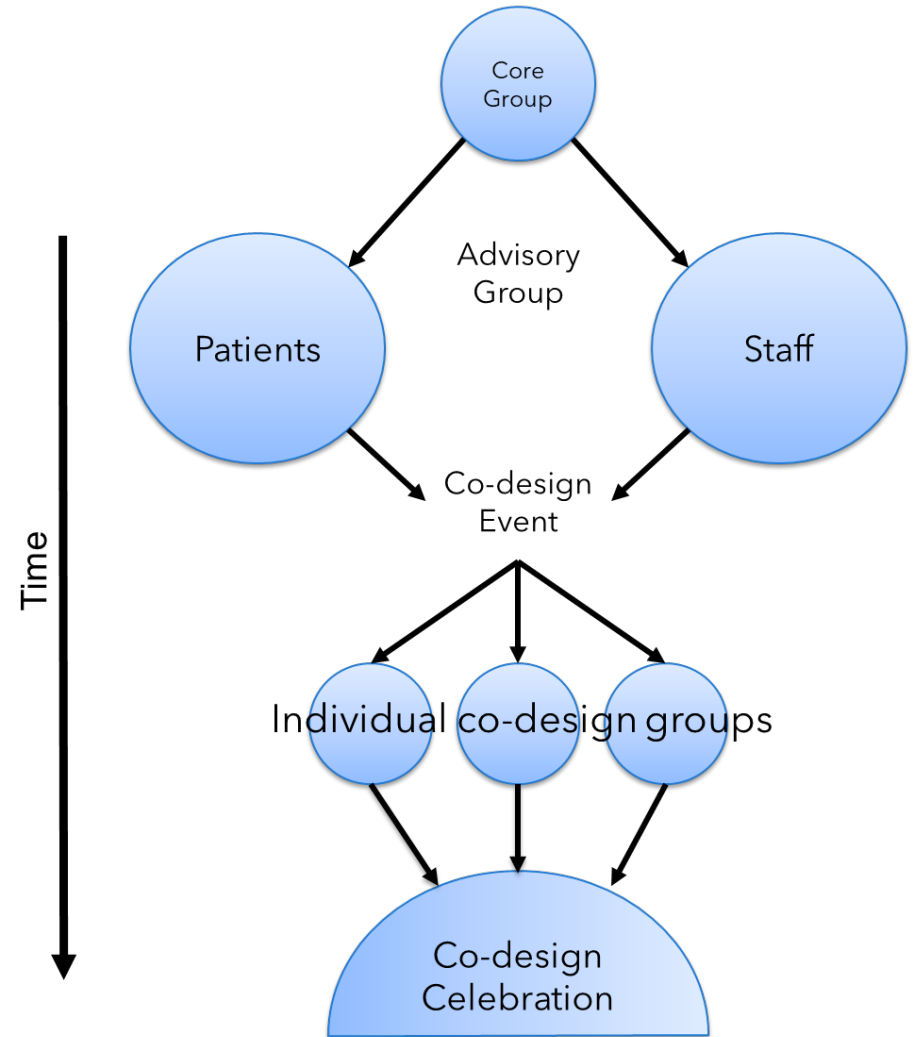
Disrupting a Sometimes-Problematic Binary

Providers? → **Technical Quality** ⬭ **Experiential Quality** ← Patients?
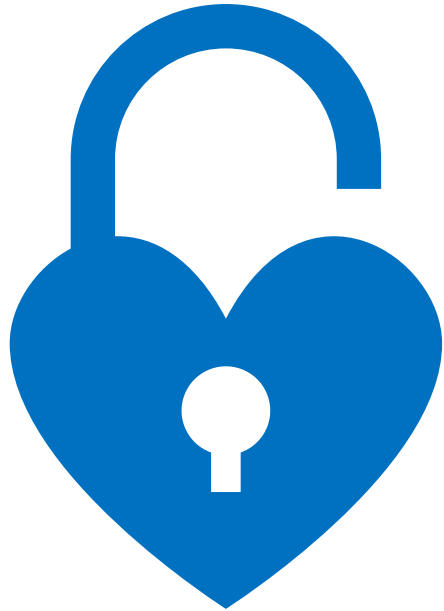
Disrupting a Sometimes-Unintended Consequence

Problems are found in processes not people.

Solutions are found … in the process by people?

Improvement Tools for Storycatching

Empathy Maps

Photo Elicitation
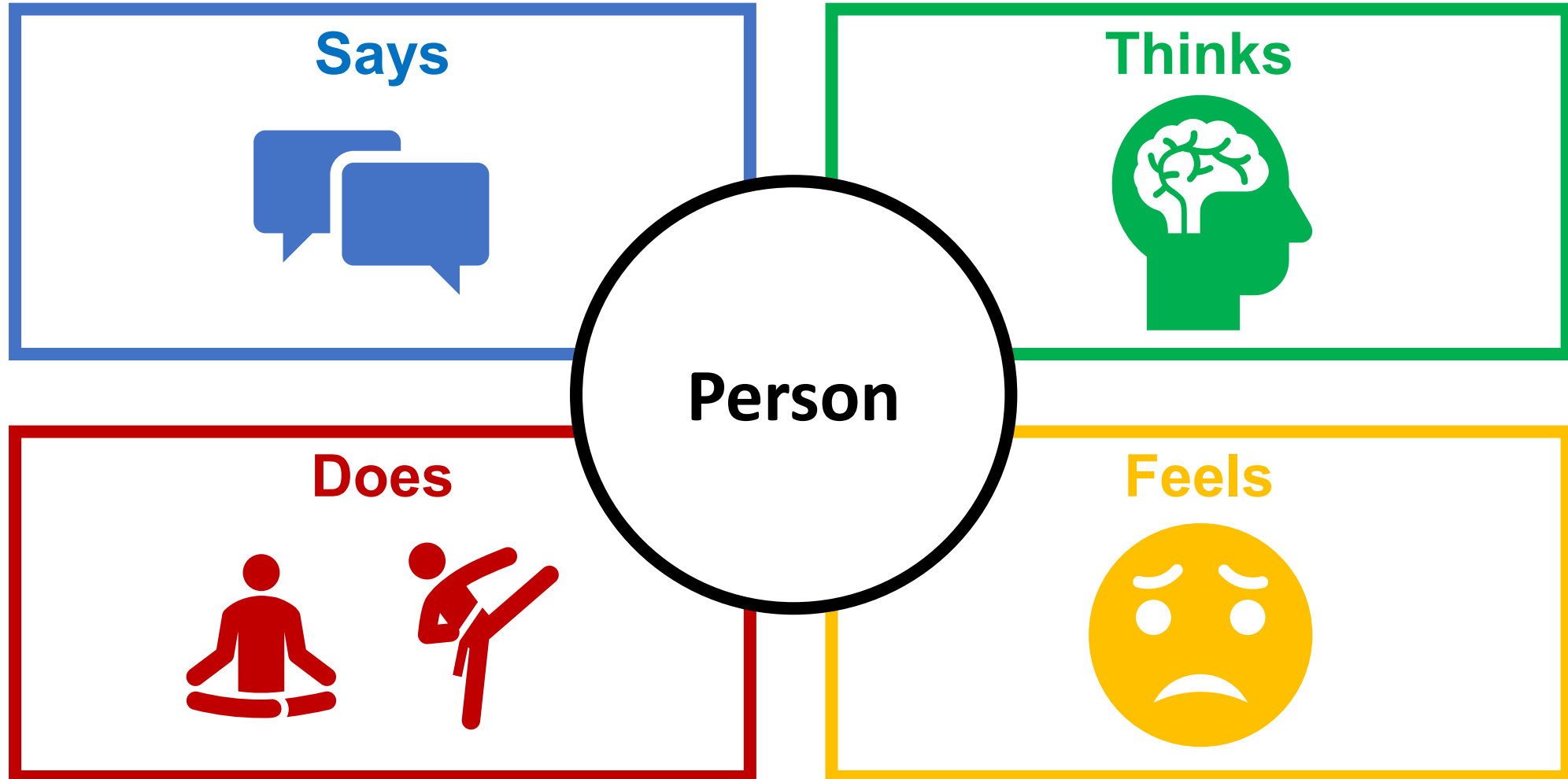
Gemba Walk

Empathy Mapping

Empathy Mapping

Empathy mapping is a quick and easy visual tool to help **understand a person's experience and communicate that experience to others**.

An Empathy Map is a **collaborative visualization** used to articulate what we know about a particular person.
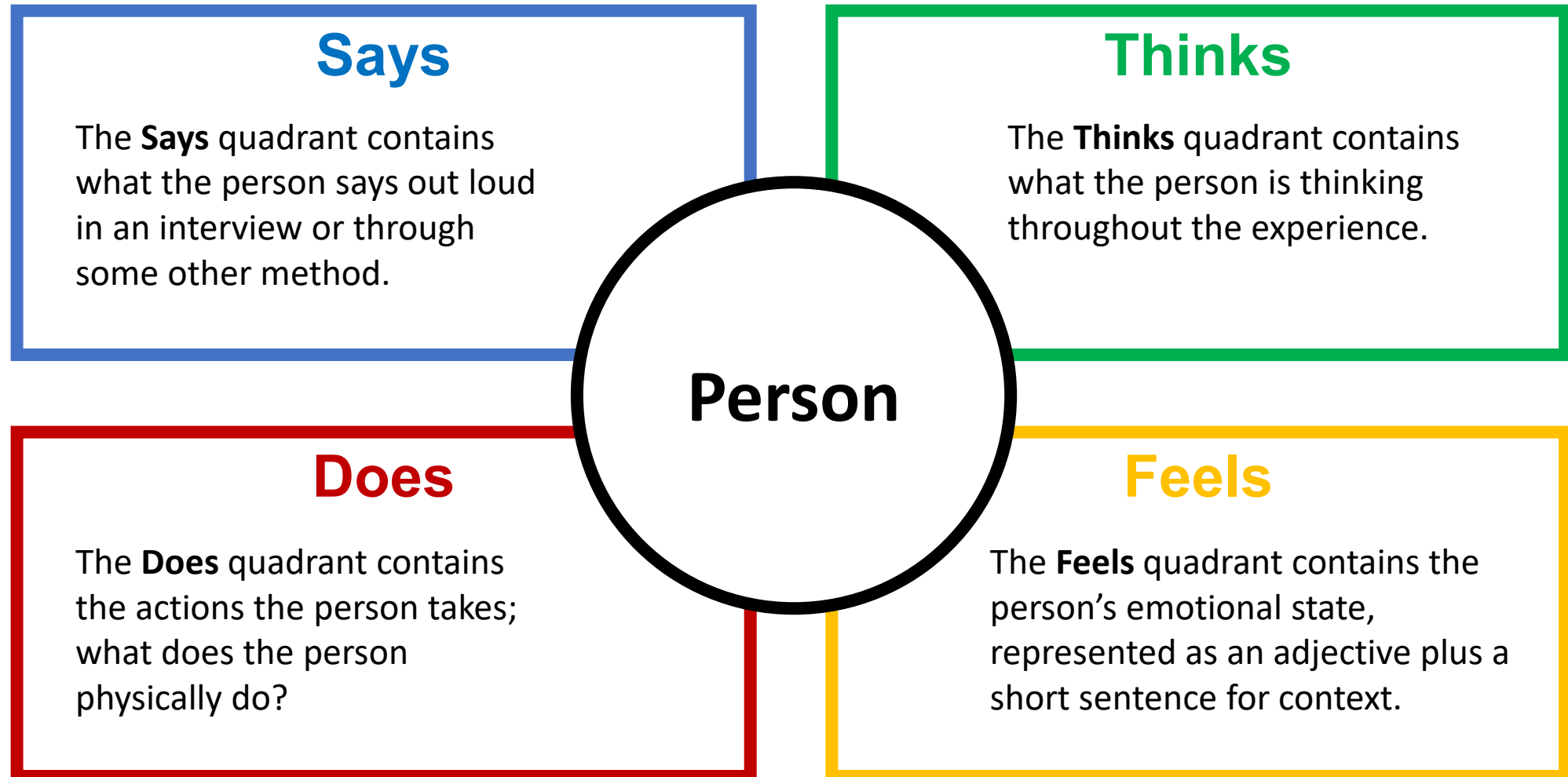
It externalizes knowledge about a person to:
- Create a shared understanding of person's needs
- Aid in decision making

Gibbons, S. Empathy Mapping: The First Step in the Design Thinking. Norman Nielson Group. January 14, 2018. Accessed from https://www.nngroup.com/articles/empathy-mapping/

Empathy Map

Says

Thinks

Person

Does

Feels

Empathy Map

Says

The **Says** quadrant contains what the person says out loud in an interview or through some other method.

Thinks

The **Thinks** quadrant contains what the person is thinking throughout the experience.

Person

Does

The **Does** quadrant contains the actions the person takes; what does the person physically do?

Feels

The **Feels** quadrant contains the person's emotional state, represented as an adjective plus a short sentence for context.

Steps in Empathy Mapping

Establish Focus and Goals

Who is the person for the map?

What is the purpose of the mapping?
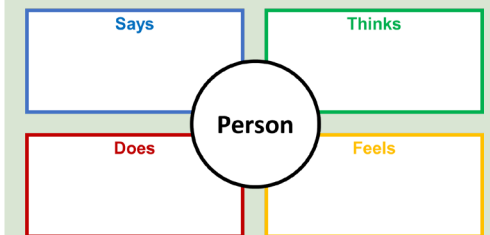
Capture the Outside World

What are they **saying**?

What are they **doing**?

Explore the Inside Mind

What might they be **thinking**?

What might they be **feeling**?

Summarize and Share

Value of Empathy Mapping

When based on **real data** empathy maps can:
- Remove bias from our designs and align the team on a single, shared understanding of a person
- Discover weaknesses in our quality improvement projects
- Uncover needs that people themselves may not be aware of
- Understand what drives a person's behaviors
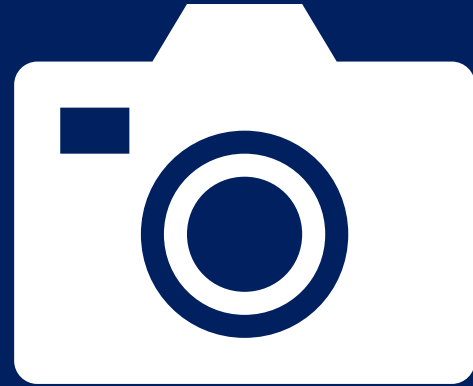- Guide us towards meaningful innovation

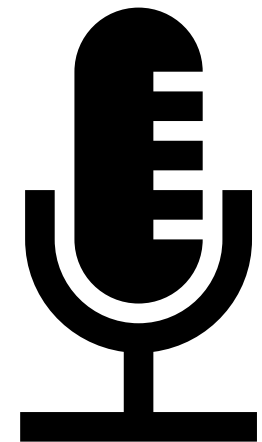# Photo Elicitation

Visual Storytelling

If I could tell the story in words,
I wouldn't need to lug a camera.

– Social Documentary Photographer Lewis Hine

Photovoice

Photovoice is a process by which people can identify, represent, and enhance their community through a specific photographic technique.

Photovoice puts cameras in the hands of people to act as recorders and catalysts for change.

Wang C, Burris MA. Photovoice: Concept, Methodology, and Use for Participatory Needs Assessment. Health Education & Behavior. 1997;24(3):369-387. doi:10.1177/109019819702400309

Goals of Photovoice

1

To help those who are **often unheard** gain a voice.

Thereby enabling them to record and reflect on their experiences and their communities' conditions, both positive and negative.

Community Tool Box. (n.d.). Chapter 3 Section 20 Implementing PhotoVoice in Your Community. Retrieved on October 16, 2023, from https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/photovoice/main

To encourage **critical consciousness**.

Through choosing, discussing, and reflecting on the subjects of their photographs, the photographers can come to a clearer understanding of their circumstances and the economic, social, psychological, and political forces that shape them.

Community Tool Box. (n.d.). Chapter 3 Section 20 Implementing PhotoVoice in Your Community. Retrieved on October 16, 2023, from https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/photovoice/main

Goals of Photovoice

3

To **bring about change** that will improve conditions and enhance lives by reaching and influencing policy makers.

Community Tool Box. (n.d.). Chapter 3 Section 20 Implementing PhotoVoice in Your Community. Retrieved on October 16, 2023, from https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/photovoice/main

The Photovoice Question

In photovoice, the **question aims to find something out about the person**.

This focus on the person derives from the view that photovoice is a tool to help people be heard.

The question is always defined in a reflective way and asks for the **person's meaning, experience, change, view or opinion**.

Jongeling, S., Bakker, M., van Zorge, R., van Kakebeeke, K. Photovoice Facilitator's Guide (Rutgers University). Zwaan Printmedia. April 2016.
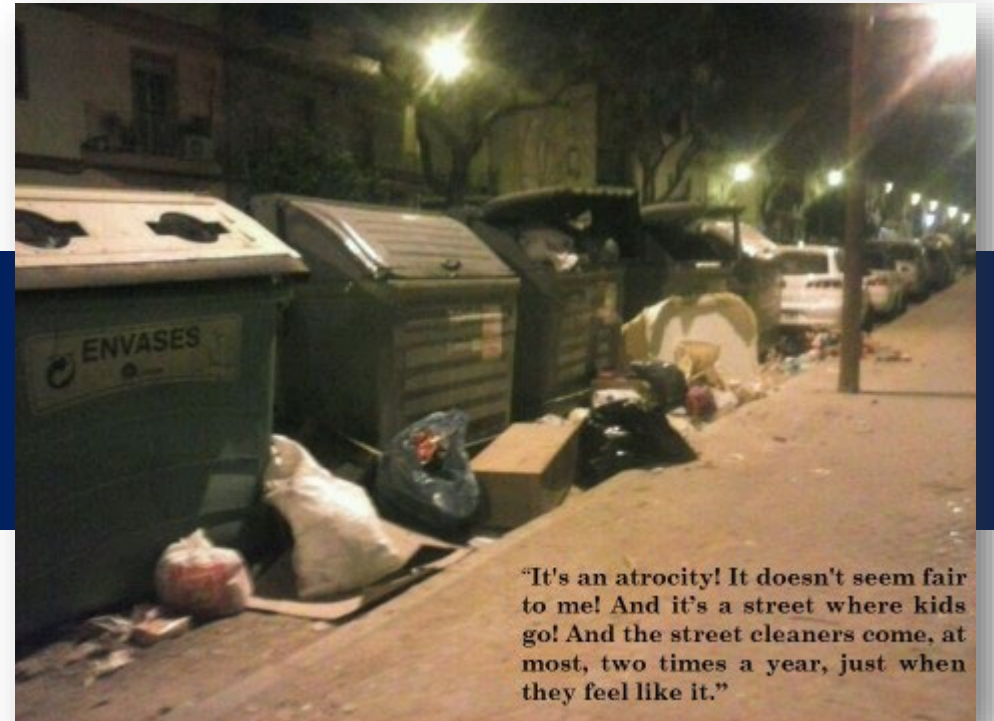
The Photovoice Question

A photovoice question:

- is **personal** (it includes the word "you" in the question)
- is **'open'** (cannot be answered with just 'yes' or 'no')
- is **clear and specific**, not open to misinterpretation
- is **directly related to the lives of the participants**
- results in **answers that can be conveyed through picture**

Jongeling, S., Bakker, M., van Zorge, R., van Kakebeeke, K. Photovoice Facilitator's Guide (Rutgers University). Zwaan Printmedia. April 2016.

This is a photograph of a rock or pebble. One small little thing like this is often kicked around, or ignored. We are all one small thing that people kick around but, we should all be treated with respect and kindness.

It is important to treat everything with respect, no matter how big or how small.

"It's an atrocity! It doesn't seem fair to me! And it's a street where kids go! And the street cleaners come, at most, two times a year, just when they feel like it."

"It's an atrocity! It doesn't seem fair to me! And it's a street where kids go! And the street cleaners come, at most, two times a year, just when they feel like it."

Guariso, G., Paloma, V., Arias Sánchez, S., Garrido Muñoz de Arenillas, R., & García Ramírez, M. (2016). Photovoice as a research-intervention tool for youth neighborhood activism in societally vulnerable contexts. Global Journal of Community Psychology Practice (GJCCP), 7 (3), 1-18./
First, J., Mills-Sandoval, T., First, N.L., Houston, J.B. (2016). Picturing Resilience Intervention: Using Photovoice for Youth Resilience. Columbia: Disaster and Community Crisis Center at the University of Missouri

Planning for Photovoice

1. What is the **purpose or intention** of the Photovoice project?
2. Who are the **participants**?
3. Who has a stake in the project and **how will they be involved in planning**?
4. What is the **question that participants will answer** through their photos?
5. How **long** will the whole Photovoice project take?
6. How many and where will **meetings and training** happen?

SHOWED Technique

S: What do you **see**?

H: What **happened** or is happening in the picture?

O: How does this relate to **our lives**?

W: **Why** does this happen?

E: How could this image **educate** others?

D: What can we **do** about it?

Photovoice Implementation Resource

The **Community Tool Box** is a free, online resource for those working to build healthier communities and bring about social change. It offers thousands of pages of tips and tools for taking action in communities.

Chapter 3: **Assessing Community Needs and Resources**

Section 20: **Implementing PhotoVoice in your Community**

Community Tool Box. (n.d.). Chapter 3 Section 20 Implementing PhotoVoice in Your Community. Retrieved on October 16, 2023, from https://ctb.ku.edu/en/table-of-contents/assessment/assessing-community-needs-and-resources/photovoice/main

Gemba Walk

Fujio Cho
Honorary Chairman of Toyota Motor Corporation

Go see.
Ask why?
Show respect.

The Real Place

The Japanese term **gemba** is translated as, **the real place**.

The gemba or "real place" is **where the work happens**.

A **Gemba Walk** is a technique which uses observation of "*the real place*" and reflection to identify opportunities for improvement.

Mann. (2017). CREATING A LEAN CULTURETOOLS TO SUSTAIN LEAN CONVERSIONS, THIRD EDITION (3rd ed.). PRODUCTIVITY PRESS. https://doi.org/10.1201/b17563

Gemba Walk Steps

1 Prepare for the Gemba Walk

2 Conduct the Gemba Walk

3 Reflect, Learn, Identify Improvements

Gemba Walk

1 **Prepare for the Gemba Walk**

- Select a process
- Develop a high-level map
- Select a theme
- **Create a checklist or guide**
- Prepare the team

2 **Conduct the Gemba Walk**

- Go to the place
- Observe the process
- **Talk with the people**

Gemba Walk

2 **Talk with the People**

- Can you show me how you perform this task or activity?
- Is it always done this way?
- What problems or challenges do you encounter?
- What challenges can you fix?
- What challenges can you not fix?
- What would you change about this if you could?
- Who do you reach out when you have a challenge?

Gemba Walk

③ Reflect, Learn, and Identify Improvements

Following the Gemba Walk, a team reviews notes taken during the walk and reflects on opportunities for improvement identified through the **time spent in the "real place" interacting with staff**.

Once analyzed, the information from the Gemba Walk can be used to help plan or implement a new or existing improvement project.

Benefits of a Gemba Walk

- Develops process management skills
- Supports identification of improvements
- Enhances transparency
- **Engages staff**
- **Reduces bias**
- **Creates empathy**

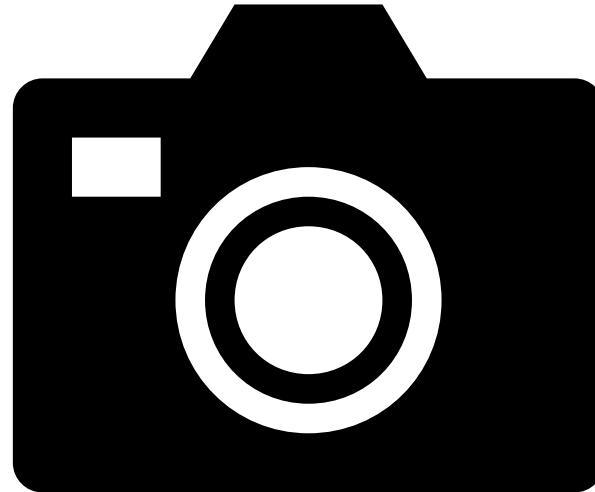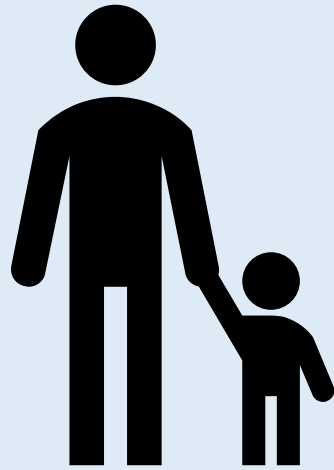# Improvement Tools for Storycatching
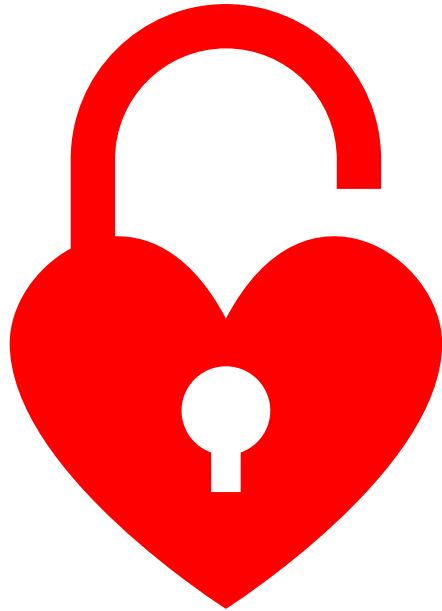
Empathy Maps

Photo Elicitation

Gemba Walk

Joshie's Story

Losing Joshie

In 2012, Chris Hurn described the **story of his son losing his beloved stuffed giraffe Joshie** while vacationing at a hotel on Amelia Island in Florida.

Staff at the hotel found Joshie in the laundry and handed him over to the Loss Prevention Team.

The team contacted the Hurn family to let them know they had found Joshie and would be promptly returning him.

When Joshie arrived, contained in the box was also a binder …

Joshie's Stay

Losing Joshie (again)

On another trip, his son (again) lost Joshie, only this time, the hotel could not find him.

They bought their son a new giraffe, which was named Tucker.

Then, while staying at the original hotel, **staff became aware that Joshie had been lost**.

The staff found a new giraffe which they delivered with a note saying **this is Jeffie**, Joshie's cousin.

Experiences

A company that thinks so thoughtfully about the experience of a child losing their stuffed animal is a company that **deeply understands children**.

Storytellers & Storycatchers

Healthcare can better understand the experiences by using strategies that **seek to better understand human experiences through story** instead of operational process points.

Every story has a teller and a listener – **we all play a role in improving the quality of care by holding space for story**; for telling our own stories and for catching the stories of others.

Questions

Contact Information

Adam Thompson, MPH

Patient & Practice Facilitator

Adam@cqii.org