



When shall we three meet again?

A three-way partnership results in a truly patient-centred educational resource

Authenticity to Action Conference

Grange-over-Sands

November 2007

Jean Bailey-Dering, NRAS; Joanne Mangnall, RCN;
and Pip Hardy, Patient Voices



The three witches



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Introducing Jean



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Background

- Part of a project related to improving continence care
- Intended to illustrate how different conditions can affect continence
- This story was intended to give the perspective of someone with rheumatoid arthritis.
- Digital stories would encourage reflection on practice.



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Preparations

- A storyteller was recruited from NRAS.
- Briefing notes were sent, with links to the Patient Voices stories.
- Unbeknownst to us, other instructions were also given....



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What did we expect?

- Joanne, the 'commissioner' of the stories
- Pip, the 'storycatcher'
- Jean, the storyteller
- The 'other' person (RA expert/consultant)



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Joanne is uncertain

- Initial ideas focused on the production of an 'educational video'
- No prior experience of 'stories'
- First story viewed caused confusion
- Personal difficulties in understanding how stories could be used within my specific project
- I was expecting to 'tell' how it should be done.



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Pip is frustrated

- Initial response to collection of continence stories: an inward groan
- Frustrated by apparent inability to explain differences between training video and digital stories
- Recognition of possibilities for dealing with profound issues of trust, respect, dignity
- Feeling like the 'go between' trying to bridge mis-understandings



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- Apparently hadn't seen the Patient Voices website
- Clear expectation of a training video
- Very clinical, functional approach
- Prepared a storyboard and 'script' for Jean
- Anticipated being present to supervise



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What actually happened?

- Joanne, the 'commissioner' of the stories
- Pip, the 'storycatcher'
- Jean, the storyteller
- The 'other' person



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Joanne has an 'aha' moment



- Clarity occurred after I saw '60 seconds'
- A 'light bulb' moment!
- The resource should be developed around the issues important to the patient
- A change of emphasis
- I would need to 'frame' the stories
- I wanted the viewers to care about the storytellers.




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60 seconds




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Pip is relieved

- Relief!
- Shared understanding of how the stories could be used
- Pleasant anticipation and preparation; exchanging drafts with Jean
- Travel to Wales
- Delighted to be working with Jean



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The expert consultant bows out gracefully

- As it became clear that expert clinical input wasn't required to create the story, she decided to let us get on with it, especially in view of the fact that it was January and Saundersfoot is a long train journey from London!
- The patient becomes the central focus – phew!



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Jean prepares a script



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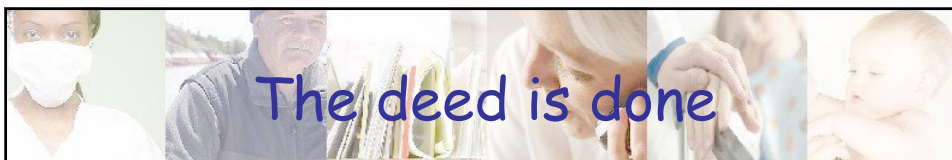


What actually happened

- Pip went to Wales and spent the weekend with Jean.
- We discovered a shared love of pinot grigio and good food.
- Joanne was waylaid by bad weather.
- We worked hard refining the story, taking pictures and recording the voiceover.
- We became firm friends.



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The deed is done



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What was the result?

- Joanne, the 'commissioner' of the stories
- Pip, the 'storycatcher'
- Jean, the storyteller
- The 'other' person



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Joanne hears the story

- I hear the story for the first time
- I begin to have ideas about how to frame it.
- Unexpectedly, the story generated lots of potential for raising issues relating to functional incontinence. Hurrah!



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Pip gets down to work

- Jean trawls through her photo albums and send pictures for me to scan.
- She also tells me what music she wanted – a favourite of mine too, as it happens!
- I start building the video with the images and sound, always uncertain at the start as to how to do justice to the story and the storyteller.



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Reflections

- Joanne, the 'commissioner' of the stories
- Pip, the 'storycatcher'
- Jean, the storyteller
- The 'other' person



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Jean reflects



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Joanne reflects

- Despite working in continence care for 20 years, seeing the completed story for the first time produced a huge wave of emotion.
- As project lead I was proud of what **we** had achieved, but as a clinician I realised I needed to change the way in which I worked.
- I ended up with exactly what I wanted, even though I hadn't known that was what I wanted at the start.



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Pip is happy...

- I'm pretty pleased that everybody else was happy.
- As always, I am humbled and honoured to work with people who are so willing to share their stories.



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And the 'other' person?


- We learn that the story has been shown at a national conference, and she took all the credit!
- Why?



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Jean's story




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Bringing the story up to date

- I have used Jean's story extensively during a range of training sessions.
- Feedback from viewers is always emotional and there is genuine concern regarding the well-being of the story teller.
- The stories stimulate valuable debate and can capture the interest of the viewer in a manner that would be impossible for me to do.
- The stories ensure the patient is the key focus of the session and of the learning.



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Thank you

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