# What can TA learn from stories

Using narrative methodology to asses the functioning of the hospital

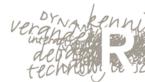






## Hospital – a complex socio-technical system





## Hospital – political-administrative context

- Regulated competition in health care
- Quality and safety on the political agenda
  - Incidents
  - Information and transparency of quality and safety
  - Reducing costs (practice variation, centralisation, wastage)
- Changing position of the patient: patient centred care



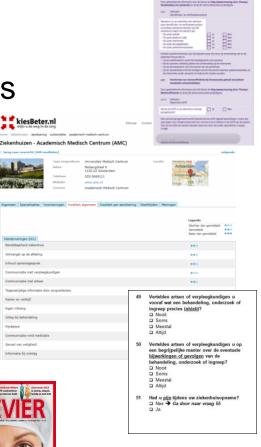
## Hospital – the position of the patient

- Patients rights safeguarded in Dutch law
  - Informed consent
  - Official complaint procedure
  - Client councils
  - Laws that regulate clients' rights in health care
- Patient as important actor in guarding quality and safety
  - Guideline development
  - Client councils
  - Informed choice of care-providers



## Hospital – mapping quality and safety

- Performance indicators
- Consumer quality indexes
- Rankings in the media
- Quality labels
- Consumer evaluations











#### Limitations

- Limited usefulness of quality information to patients
- Limited voice of individual patients
- Quantitate, fragmented and general information
- Delay in availability of results
- Presumes active, informed, critical, autonomous patient
- Lack of support for patients to exercise new role



## Narrative methodology – aim

- Using stories to gain
  - access to experiences in hospitals as techno-social systems
- in order to gain insight in
  - Patient perspectives on positive & problematic situations
- Insight into quality & safety from a patients perspectives
- Insight into the feasibility of the new role of patients
- Can technology support patients in this new role?
- Development of new methodology for TA



## Narrative methodology – method

- Website to collect patients narratives with hospital care
- Storyline analysis
- Thematic analysis
- Interviews with stakeholders
- Workshops with professionals and policymakers



#### Core idea

- Stories give acces to personal experiences
- Stories are situated and contextual
- Stories connect events into a meaningful whole
- Stories structure experiences via the narrative logic
- Narrative logic contextualizes
- Narrative logic helps to explicate the implicit
- Narrative logic gives sense to events (or not)
- Stories help to gain insight in the reflected experience

## Collecting stories—engaging patients











denvija van Amelon steet". Hij publiceer









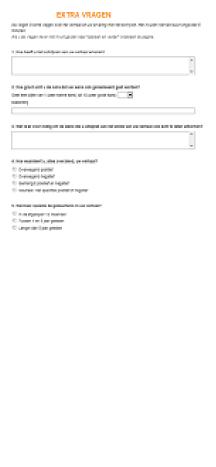




## Collecting stories – setting up website



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## Storyline analysis - Method

- Story → Exnovate → Storyline → Plot (pattern)
- Storyline:

Burke's dramatic pentad:

- Setting
- Characters
- 3. Acts/events
- 4. Means/helpers
- Goals/results

-> Trouble

(Burke 1959; Bruner, 1990, 1986; Sools, 2010)



## Storyline analysis - Plot types

- 9 types of patient centred care:
  - The patient who wants to be involved as co-professional
  - The patient as obliged guard of good care
  - The 'but I feel something is wrong' patient
  - The patient who expects something extra of care
  - The medically clueless patient who wants to be informed
  - The patient experiences despair and existential insecurity as a consequence of disease and wants help and support
  - The patient who prepared for the worse
  - The patient becomes a victim of care
  - The patient as informer on cost efficiency



## Thematic analysis - Method

- Based on 50 stories
- Iterative process
- Intercoder reliability
- Saturation



## Thematic analysis – Preliminary results

Right after breakfast they came to draw my blood. 'Weren't you told to fast?', they asked me. Nobody told me. So I had to stay an extra day at the hospital. Next morning a nurse came to give me my medications. I said: 'I cannot take them because I have to fast for blood testing'. 'You shouldn't be so stubborn', she told me. I asked her to take it up with her supervisor, which she did and it turned out I was right.

Quality and safety	Professional quality & expertise	Communication & contact	Accessibility	Information	System (ea collaboration, efficiency, setting)
Patient centred care	Characterization and behaviour of patient	Characterization and behaviour of healthcare professional	Organisation of care	Aspects of the situation	



## Results - Preliminary

- 'Patient stories gives insight into experiences
- Systematic listening provides:
  - useful 'soft signals' on quality and safety
  - useful 'soft signals' on information & communication
- Patient stories confirm:
  - Plurality in patient perspectives
  - Don't build a socio-technical system' for 'the' autonomous reasonable well educated patient



#### Continuation

- Wrapping up analysis
- Developing recommendations
- Interviews stakeholders
- Workshops
- Policy brief & rapport
- Manifest & media coverage
- Method development



#### Reflection on narrative methodology

- Useful for collecting 'soft signals'
- Limited insight into use of technology for supporting patient role
- Needs to be developed further





UNIVERSITEIT TWENTE. Levensverhalen LAB.

Dr. Stans van Egmond

Drs. Marjolijn Heerings

Dr. Anneke Sools

Dr. Stans Drossaert

Drs. Lisa van Duijvenbooden

