1. Introduction

Patient safety is a fundamental area in healthcare education and yet few medical schools have a formal patient safety curriculum. We aim to address this by introducing a patient safety learning resource based on video stories by patients and their relatives. These powerful and informative accounts by PATIENTSTORIES® represent potential to learn from mistakes and spark debate about safety issues. Examples of learning opportunities include:

- Identifying errors and dealing with the aftermath
- Care and compassion
- Human factors and non-technical skills
- Quality improvement

The purpose of this project is to identify the key issues students take from the films and their opinion on the use of such videos in training. This will guide the creation of an evidence based learning resource with a guide for facilitators.

3. Intervention

PATIENTSTORIES®, a non-profit social enterprise group, create short videos based on the real life experiences of patients across the country. There are currently 8 videos available covering a wide range of topics such as end-of-life care, serious medication errors and hospital acquired infection. Beth’s Story was chosen for this project and is an example of a surgical error which had catastrophic results. The videos are recognised as powerful and emotive resources and need to be well facilitated in a safe learning environment.

With an emphasis on viewing issues from the patient’s perspective and recognising the consequences of clinicians actions, these accessible resource’s offer students a valuable learning opportunity. These resources echo the importance of patient involvement in safety:

“Place the quality and safety of patient care above all other aims for the NHS. Engage, empower, and hear patients and carers throughout the entire system, and at all times.”

Don Berwick – Improving the safety of patient in England

Examples of the stories available from PATIENTSTORIES®: Gibbon’s, Beth’s, Paul’s and Alexandra’s story.

5. Preliminary results

27 students have been enrolled. Thematic analysis of the transcripts will reveal common reactions and issues among the student groups as well as any differences between the first and final year medical students. This, alongside analysis of the questionnaires, will help guide the creation of an evidence based learning resource and facilitators pack. The opinions of teaching fellows and students will also allow consideration of when best to introduce this into the undergraduate curriculum.

“The video really expressed the human element of healthcare which I think can sometimes be missed in a busy system”

Medical student, Nottingham

“...thought provoking experience. In terms of making us think about patient safety it seems to be the best resource I have come across so far”

Medical student, Nottingham

References


2. Background

Recent reports have highlighted awareness of the need for systemic and cultural change throughout the NHS. Although medical teaching alone cannot change the culture of a healthcare system, patient safety teaching is increasingly recognised as an opportunity to promote a culture of safety by teaching appropriate values and behaviours to medical students. However, a recognised issue is that current teaching often focuses on safety from a provider’s perspective, not the patients. A recent study looked into the teaching of patient safety to foundation doctors using patient narrative. Many trainees commented that the patient experience was “invaluable” and they had realised the importance of listening to patients.

“Formally embedding the patient perspective into health-care education is key to patient safety, sustainable culture change and health care improvement.”

Mrs Margaret Murphy – WHO Patient safety curriculum guide

4. Methods

Semi structured interviews using focus groups of medical students at the University of Nottingham Medical School in either their first or final year of study were undertaken:

Pre study questionnaire to establish base line levels of patient safety awareness.

Shown the 15 minute video called “Beth’s Story” and asked to record immediate thoughts after the film.

Discussion about the issues and themes raised by the participants.

Guided by semi-structured questions from the facilitator.

Shown a 5 minute follow up film discussing error and blame.

Discussion about the use of resources in the medical curriculum.

Post study questionnaire to look at changed levels of safety awareness.

A further focus group was undertaken using a cohort of teaching fellows involved in medical education. Their responses were collected to guide the creation of an evidence based facilitators support pack to run alongside the learning resource.

6. Future directions

These videos have great potential for the following:

- Covering a range of safety and improvement related topics
- Stimulating and encouraging inter-professional learning
- Being used beyond medical school to postgraduate education

“I would have thought this is a fabulous tool to use for the postgraduates... I’m pretty sure it would make a massive difference to a lot of their practice.”

Teaching fellow, NHT

Acknowledgements

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