

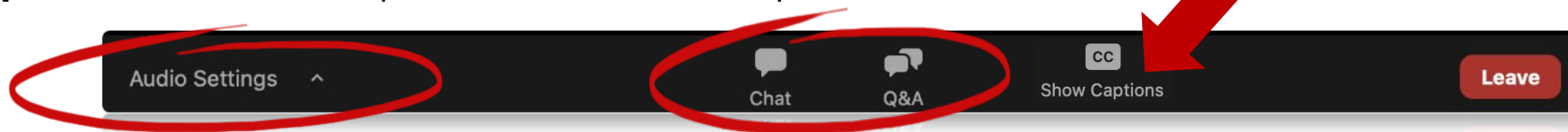
Co-Creating Change Using Storytelling

January 14, 2025



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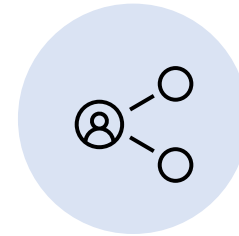
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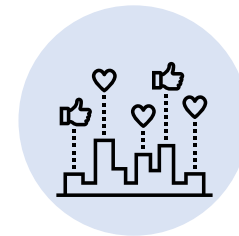
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Our Speakers



Rosie Bartel

Patient Partner
Global Patient and Family Advisory Board,
The Beryl Institute



Tanya Lord, PhD, MPH

Patient Partner
Global Patient and Family Advisory Board,
The Beryl Institute

Co-Creating Change Using Storytelling

Coffee and Stories with:

Rosie Bartel MA

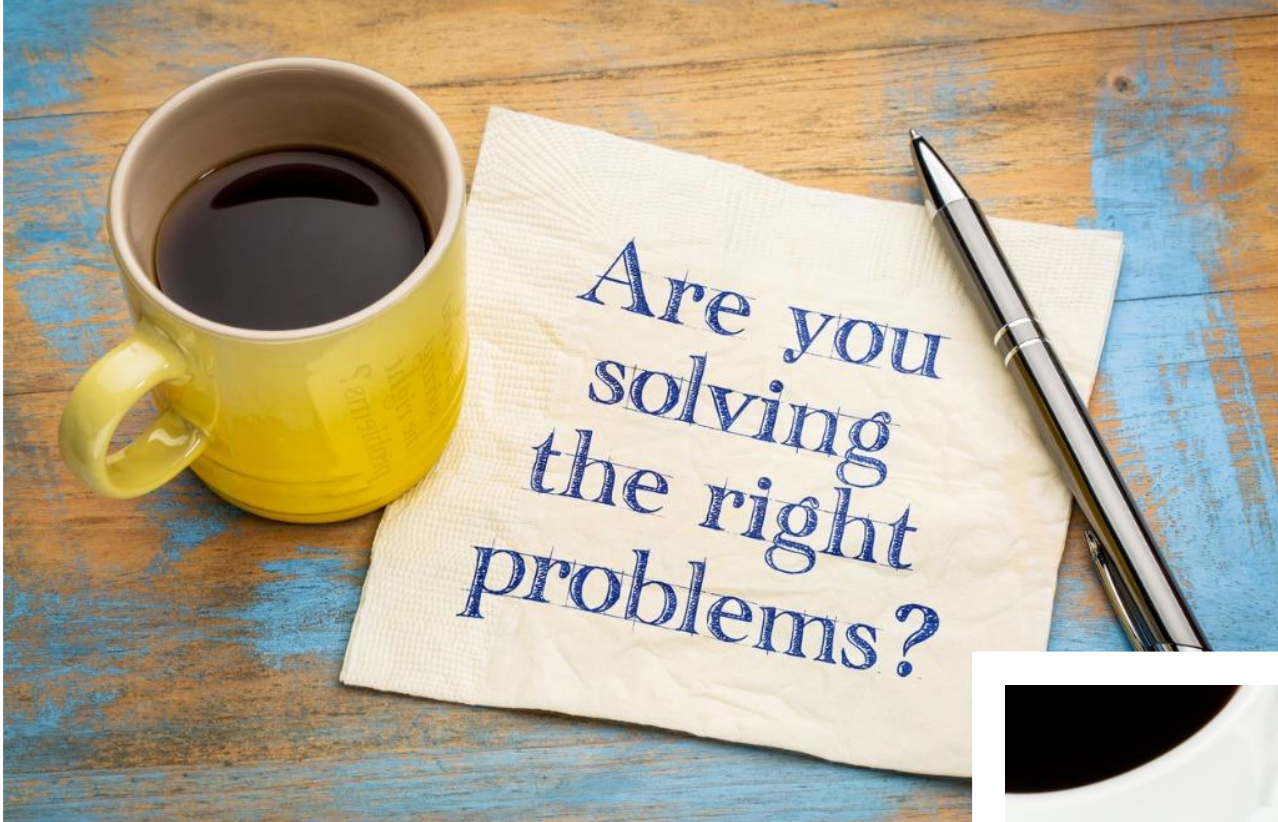
Tanya Lord PhD, MPH



What do we Mean by Co-Creating?

- Engaging Patients and Families
- Co-production
- Co-design
- Co-creating
- Human Centered Design
- Lived Experience Integration

Co-Creation: A collaborative process where all patients, their experiences, and stories are integral to identifying problems and shaping the delivery, design, and evaluation of equitable, patient-centered healthcare





Listen to the Stories



Why Tell Stories?

Facts bring us to
knowledge, but stories
bring us to wisdom.

Rachel Naomi Remen, M.D.

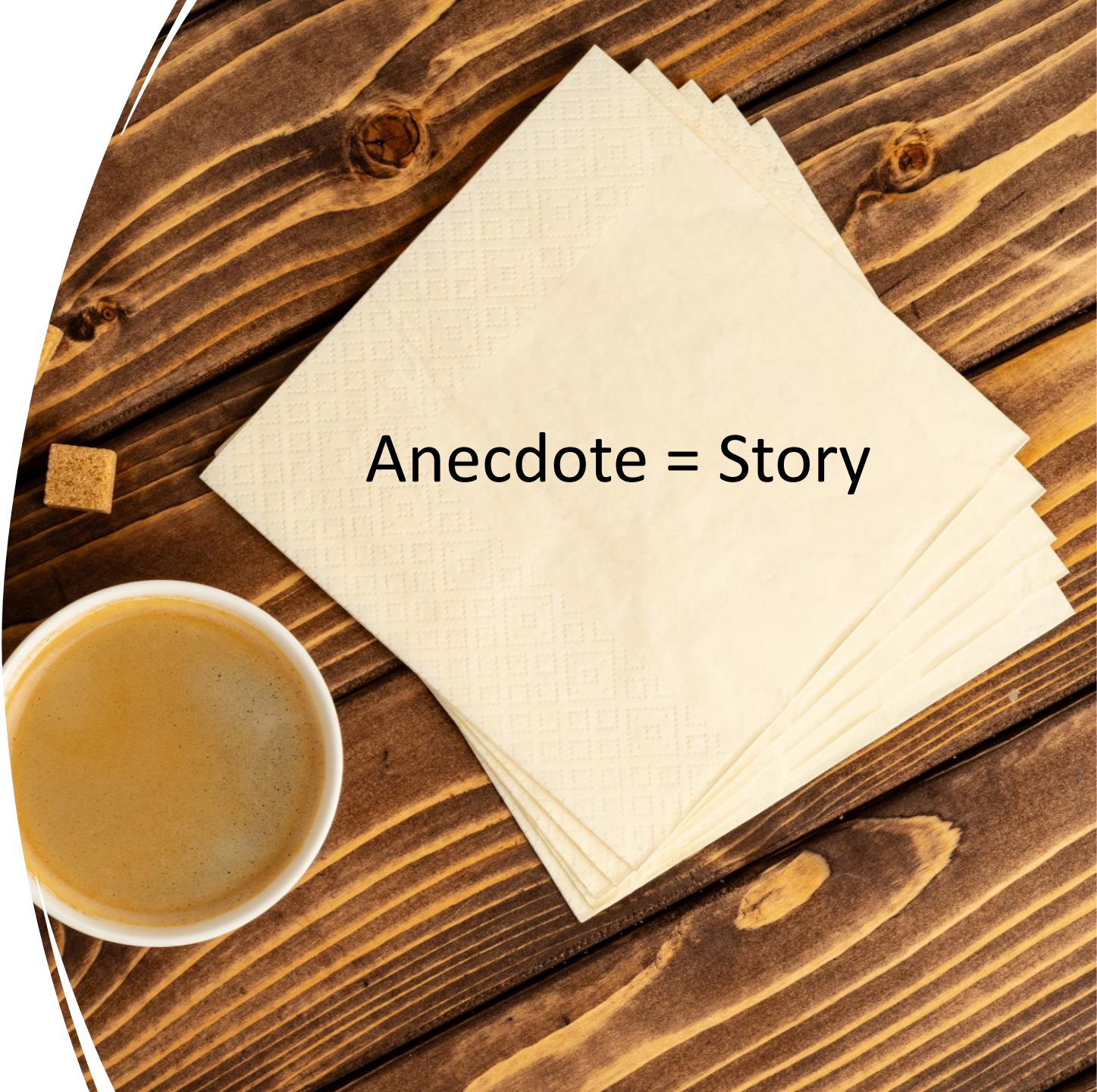
Kitchen Table Wisdom



Story Telling is Part
of the Human
Experience

The plural of
anecdote is data.


Raymond Wolfinger, 1969



Anecdote = Story

The plural of
anecdote is data.

Raymond Wolfinger, 1969



Stories = Data



Processes, rules, guidelines, measures

- Are all based in stories.
- Stories change healthcare for the better.

Storytelling Guide



[tps://theberylinstitute.org/wp-content/uploads/2024/10/TBI_Storytelling_Guidebook.pdf](https://theberylinstitute.org/wp-content/uploads/2024/10/TBI_Storytelling_Guidebook.pdf)

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Introduction: Storytelling Guide

Purpose

- Amplify voices to drive meaningful change.
- Humanize healthcare experiences through authentic narratives.

Key Benefits:

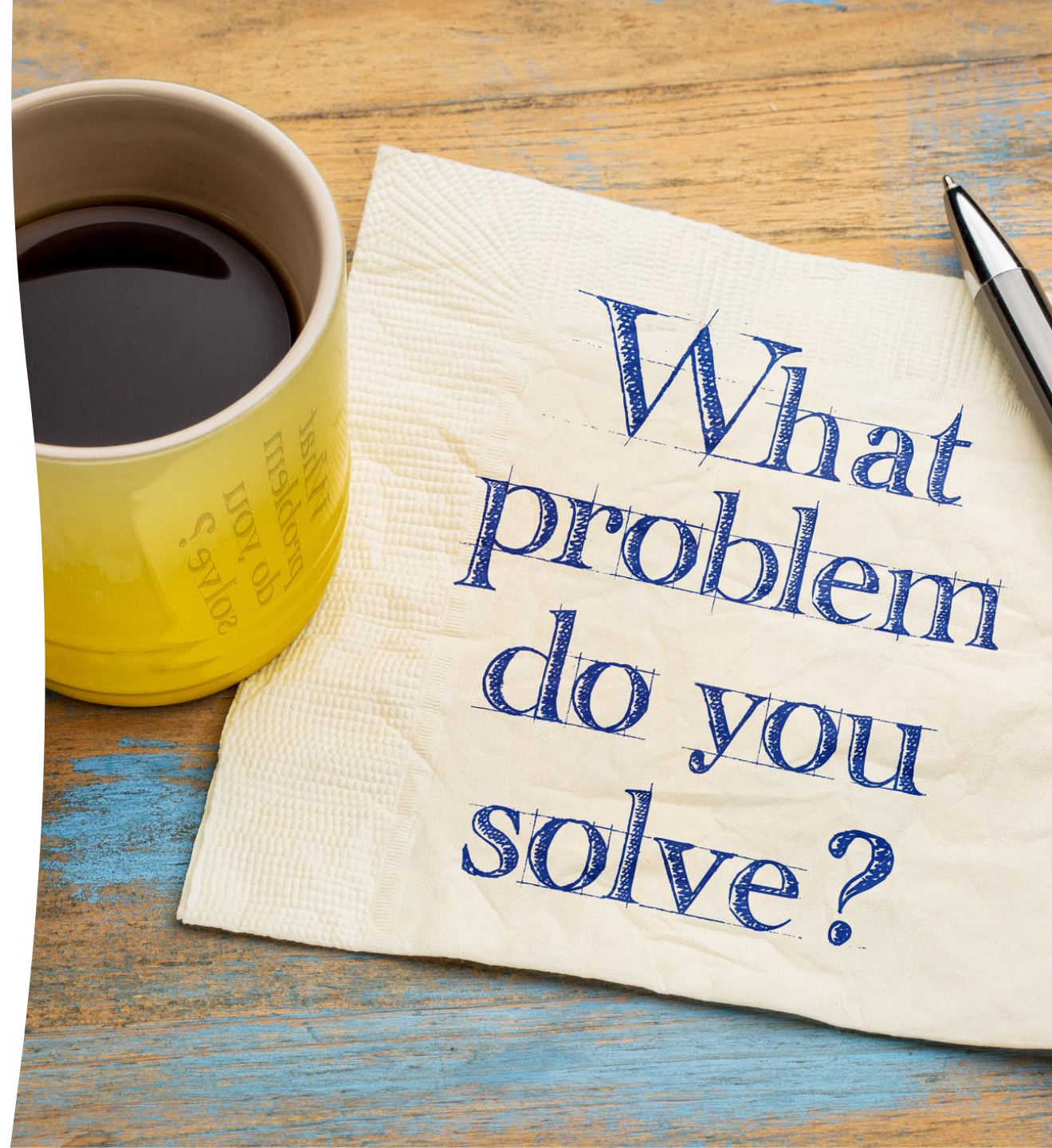
- Strengthen connection to the work.
- Enhance empathy among healthcare audiences.
- Provide actionable insights for systemic improvements.

How to Use the Storytelling Guide

What does an Audience Need?

- Make me love you
- Tell me something I don't know
- Give me something I can take with me when I leave

Adapted from Tiffany Christensen



Ways to Use Stories

- Section on “Ways to Stories in Healthcare” under the Mentoring PFAs and Organizations in Storytelling
- Specific Action: Using stories for quality improvement, research, and measurement work.
- Example: When working in both research and measurement, patient stories must relate to the specific research or measure being worked on. The patient needs to be able to share the part of their story that will drive change in how researchers and members of measurement technical expert panels (TEPs) look at their research or how they will measure patient outcomes.

Identify Opportunities for Storytelling



Refer to the guide's section on "Ways to Use Stories in Healthcare".



Specific Action: Identify areas of the patient experience where stories can highlight gaps, such as during admissions, waiting times, or discharge planning.



Example: Use patient stories to co-create processes for clearer communication during hospital discharge.

Non-Clinical Areas for Storytelling

- Refer Storytelling with a Purpose – Power of Co-Designing Stories
- Specific Action: Working with storytelling from exam rooms to facilities to environmental services to IT to research to measurement
- Example: Using a patient story about how a room is cleaned could lead to a healthcare acquired infection (HAI). That not all HAIs come from a medical error on the part of the clinical providers but sometimes they are caused by inappropriate cleaning of environmental areas. Why do non-clinical staff do their work? Story helps them understand the “Why” behind their work.



Readiness Assessment for Patient Experience Stories

- Refer to the guide's "Readiness" section to evaluate emotional and practical preparedness.
- Specific Action: Host a readiness workshop where patient advisors reflect on their experience using questions from the guide: "Is it too soon to share this story?" "What am I comfortable sharing?"
- Example: A patient might decide to share only parts of their surgical experience that focus on successful communication improvements while omitting unresolved issues.





Who can tell
a Story?

- Patients and Families
- Staff
- Clinicians
- Facilities
- Dietary
- **Everyone**



IT'S
NEVER
TOO LATE
TO BEGIN

BEGIN
TO BEGIN
TO BEGIN



Questions





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Upcoming Events & Programs

WEBINARS

- January 16 | Building Trust in Healthcare: Insights from UAB Medicine's Humanistic Care Study
- January 21 | What Healthcare Providers Need to Know About Newcomer Health Equity
- January 28 | Nonviolent Communication to Improve the Human Experience
- February 4 | Compassion Rounds: Connecting with Patients and Families Beyond a Diagnosis

CONNECTION CALLS/CHATS

- January 15 | WMTY.world Monthly Meeting
- January 22 | Book Club – Return on Human Experience: Eight Guiding Principles to Inspire Excellence in Healthcare
- February 5 | PX Chat on PFA/PFACS: New/Getting Started



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LAS VEGAS, NV

March 31- April 2, 2025

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The Global Patient Experience Event

Thank You

