

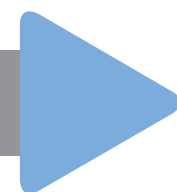


PATIENT
VIDEO
STORIES
TOOLKIT





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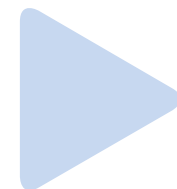


1. Introduction to patient video stories

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SECTION ONE: Introduction



This toolkit has been developed as part of the NHS patient feedback challenge (Institute for Innovation and Improvement 2012).

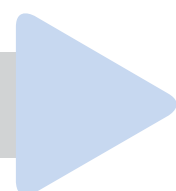
The patient feedback challenge was funded by the Department of Health and managed by the Institute for Innovation & Improvement to develop and share innovative ways of getting feedback from patients and relatives to improve services.

The patient video stories project aims to improve the patient experience by allowing teams of staff to review – and discuss – videos of people talking about their own personal experiences of care and use this to plan improvements and to develop and build on good practice.

Ideally the ideas and lessons learned will not only be shared with colleagues in their own organisations but also lead to wider improvements and change across the NHS.

We hope this toolkit will support you to capture patient stories in your own trust / organisation and gain valuable feedback.

This toolkit was developed across three sites:
South Tees Hospitals NHS Foundation Trust
University Hospital of South Manchester NHS Trust
Kings College Hospital NHS Foundation Trust



Video stories lead to a cycle of improvement:



What are patient video stories?

Patient video stories aim to bring the patient’s voice to the heart of transforming services through recorded interviews.

As a qualitative approach, they provide a rich insight into experiences of care - giving patients or family members the opportunity to directly tell their stories of an illness or condition – which in turn can be used to help improve services.

Interviews are videoed and a short film is made which is then shown to staff. The films are a very powerful way to convey patients’ first-hand experience of services and allow teams to identify areas for improvement, as well as good practice.



Why use patient video stories?

This fresh approach often reveals unexpected areas for improvement in a way that motivates and inspires staff. It tends to shift service improvement discussions away from the usual topics to reveal hidden factors shaping patient experiences. Patient stories, captured during real-time patient interviews, can be used in different ways:

- **Patient stories to inspire:** Listening to a patient telling their story in their own words is a powerful experience. It reminds us of why we do, what we do, in the NHS and has the power to capture both hearts and minds.
- **Patient stories to educate:** The NHS belongs to all of us; we all have the power to shape and change the future and listening to patient stories provides us with the opportunity to do this.
- **Patient stories to help us learn:** Patient stories offer a fantastic opportunity to learn and appreciate what we do. They can help us to understand what it is like to be a patient, what we do and why.
- **Patient stories to engage the media:** It is a modern phenomenon that a small minority of stories with negative connotations attract media headlines and have a powerful influence over public opinion.

(1,000 lives. NHS Wales)

How should patient video stories be carried out?

This toolkit is designed to provide you with all the information, tips, guidance and documents you need if you are thinking about carrying out patient interviews in this way.

Once you have agreed to carry out video stories and have your trust/organisation's approval, you should discuss the next steps with your patient experience team and staff, which include:

- **Selecting Patients** – Suitable patients should be identified and invited to take part (see section 2).
- **Patient experience team / hospital staff / volunteer Interviewers** – A team will carry out a series of open interviews.
- **Interviewing and filming patients** – Interviews will be held by one or two interviewers at a place where the patient feels comfortable (see appendix 2). They usually take between 20 minutes to one hour, depending on the length and detail of the film and what the patient has to say. This toolkit provides you with sample questions and guidance on getting the best out of the interview (tools 2B and 2C).
- **Film editing** – If editing is possible, the filmed interviews will be edited into short videos (ideally no more than ten minutes).
- **Staff evaluation** – Teams working in the area where the patient has received treatment can be asked to complete a pre and post evaluation questionnaire to establish staff perceptions (see section 4).

- **Staff feedback** – A facilitated viewing brings members of the service team together to watch the patient film and discuss its footage. Any issues, concerns and poor and positive experiences expressed by the patients will be picked out by the team and discussed. The team will then develop an agreed working action plan (see section 3) to improve service delivery and future patient experience.
- **Reporting, evaluating and celebrating success** – Evaluating this new approach is vital to assess if the patient video story approach has been effective. The experience will provide the basis for making recommendations for going forward and sharing with partners. Reporting back to patients on what changes have been made is vital, as well as thanking them and the interviewers for their participation.

For more information please contact:

The patient experience coordinator at South Tees Hospitals - 01642 854500

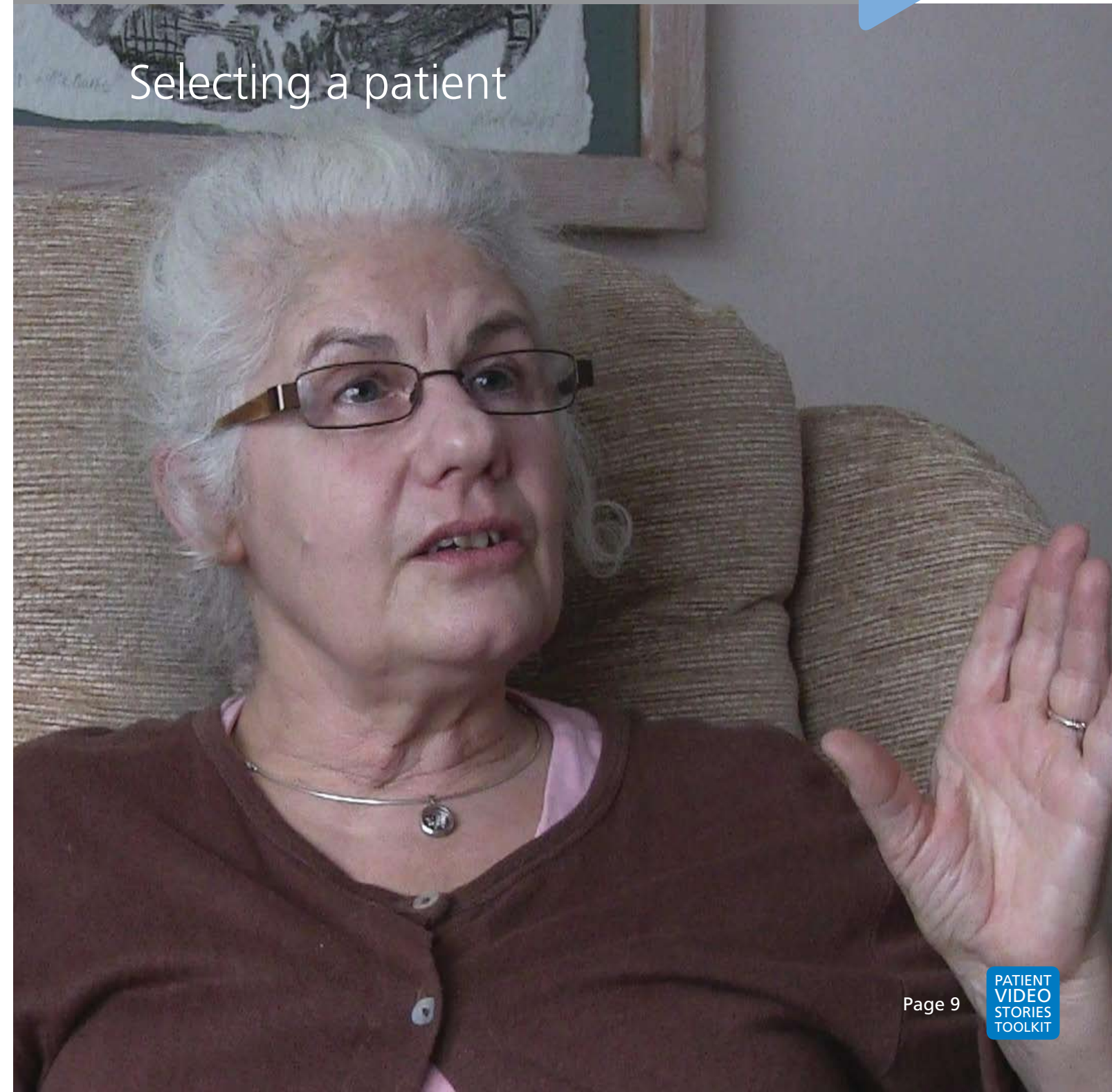
The patient experience team at South Manchester Hospitals - 0161 291 5600

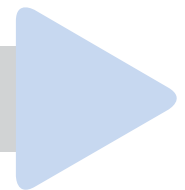
The patient and public involvement team at Kings College Hospital - 020 3299 4618

The appendices and tools are available electronically for you to adapt for your own use. Please ask for details.

SECTION TWO:

Selecting a patient





Selecting a patient for interview

We want to hear from as wide a range of patients as possible about their good and bad experiences. We may discover things that we didn't know and might not have thought of. Liaising with matrons, ward managers, patient experience teams, complaints teams and appropriate staff, will help you find appropriate patients for interview. Talk to external agencies or community matrons should you wish to speak to patients in the community.

Selection Guidance:

There are different ways to select patients to gather stories from.

Selecting the patient	Action	Follow through	Documents	Advantages
The patient is in hospital	Approach the patient on the ward or in the clinic	Check with the clinical manager in charge a convenient time and place for the interview.	Patient brief Patient consent Thank you letter	Care and treatment fresh in the patient's mind. Convenient for the patient and the interviewer
The patient is not in hospital?	Contact by telephone and/or send the invitation to interview letter and patient brief	Send the confirmation of interview letter	Invitation letter Confirmation letter Patient brief Patient consent Thank you letter	Patient can reflect on the whole care experience and may be more comfortable doing this at home.

Three approaches were used while developing this toolkit.

Approach 1: Patients invited for interview when no longer an inpatient

Patients discharged from hospital can be selected, perhaps because there is a specific issue to explore or to gain a retrospective view of their overall care. Patients are usually adults (although younger patients can be interviewed with adult consent) and from a range of backgrounds and ages with recent experience of services.

In this case, patients will be sent an introductory letter and a patient brief inviting them to take part in a filmed interview. Those who wish to take part will then be sent a confirmation letter, setting out the date and time of the interview, and a patient consent form. The tools required are:

- Introductory letter (tool 1A)
- Confirmation letter of planned interview date, time, venue (tool 1B)
- Patient brief (tool 1C)
- Patient consent form (tool 1D)

Samples of these tools are available in appendix 1. It is essential the patient consent form (tool 1D) is properly set out and completed as this ensures the video stories can be used effectively. Trusts/organisations should think carefully about how they would like to use the stories in the future and get approval from the patient for as many uses as they are comfortable with.

The consent form should be approved by management and/or information governance in the trust /organisation before their use.



Approach 2: Inpatients who have been specifically identified for interviewing

Before interviewing any patient, you need to check with the clinical manager in charge of the service that they are able to be filmed and there is an appropriate place to carry it out. If helpful, service areas (such as wards and clinics) can be paired so that staff interview patients on each other's wards. Patients should be asked if they would prefer to be interviewed by staff directly involved in their care or, if this would prevent them from speaking freely, alternative staff.

Approach 3: Patients randomly interviewed while in hospital

Alternatively, patients could be randomly selected from service areas and approached by staff to see if they would like to share their story. This way the method can be used to gather routine feedback and hear general stories from everyday care.

This accommodates hearing from a cross-section of patients and is efficient in terms of staff time, but is not targeted on the patients with the most impactful stories. If helpful, service areas (such as wards and clinics) can be paired so that staff interview patients on each other's wards.

If there are circumstances where the patient cannot be filmed as arranged, please make a note of the reason for your records (for example - too unwell; did not want to be filmed; language barriers/communication issues etc).



SECTION THREE:

Next steps: using the stories

Viewing of stories – guidance notes for facilitators

Preparing to view the patient story

As the facilitator, you should take the opportunity to view the patient video story before showing it to the team. This will allow you to make your own helpful notes on key issues that you think should be picked up by the teams during the viewing/workshop and included in action plans.

You may also want to watch the completed story with the manager of the area involved before showing it to their team. Any final editing could also be done at this point.

Before viewing, relevant themes from recent surveys around the patient experience could be identified to add to discussions.

Who should see it?

Think carefully about the groups/individuals that need to view the completed patient story (from ward teams to Board level). The viewings should bring together people of different professions and roles to improve the patient experience and allow joint learning. Video stories can be used to show how different parts of the system fit together, inter-relate and have equal importance.

Ahead of the viewing/workshop, it's important to understand the group who will be watching the film. Some key questions to consider:

- How large the group will be?
- What their relationship to each other is?
- Who are the opinion leaders and key stakeholders and will they be there?
- How will interested people not present on the day be identified and engaged?
- Who will take ownership of the action plan?

Facilitating the viewing / workshop

There are various styles you can adopt when facilitating the viewing/workshop, ranging from doing nothing to directing a group. It is important to strike a balance between these different styles as too much direction can lead to a loss of group ‘ownership’ of the process and too little direction can lead to confusion and frustration.

To be a successful facilitator you need to ensure the group talk to each other and come up with their own ideas for changes that could lead to improvements (these will then be noted on the action plan, tool 4C, appendix 4). Give everyone in the room the opportunity to talk.

Steps to follow:

1. **Organise viewings at appropriate times and venues**
Make sure the story plays correctly on the equipment provided well before the viewing.
2. **If possible, provide staff with pre-viewing questionnaires to complete before viewing the story and repeat the questionnaire after viewing (tool 5A, appendix 5)**
This allows you to see if staff perceptions have changed around the patient experience. If staff cannot complete a questionnaire before the viewing, at least ensure it is completed afterwards.
3. **Provide a viewing attendance sheet** – ensure it is completed by all present (tool 4B, appendix 4).
4. **Introduce the film** – who the patient is, their condition, and when filming took place.
5. **Explain the film’s purpose** – for staff to listen to the patient’s experience of the service and their care and, where necessary, to identify actions to improve patient experience.
6. **Explain what the film is not.** The film is not a representative sample of how all patients experience the service – it is just one patient telling their own personal experience.
7. **Show the patient story.** Encourage viewers to make their own notes if they so wish, for discussion at the end.
8. **Once the viewing is complete, ask the team to identify the key points to be addressed and encourage honest discussion about the patient story.**
These are the issues which should be put into the action plan (see guidance below).
9. **Use any quantitative/survey data alongside the story** – does this add to the story or give it another perspective?
10. **Ask staff what else they’d like to have known from this patient** – what should we focus on asking next time we do an interview?
11. **Arrange for proper completion of the action plan within a set timescale (tool 4C, appendix 4)** – ensure time scales and responsible persons are identified on the Plan.

Action plans

Action plans are extremely important in formally identifying any key themes and issues coming out of patient stories (tool 4C, appendix 4). These should be produced with clear objectives and measures so you can monitor the changes required, how they are to be addressed and in what timescale? They are designed to allow us to measure if the improvements or changes required have been achieved.

The action plan might include changing things to do more of something good, improve something weak, or perhaps show better consideration of how patients might be feeling. Try asking staff:

- a. What are the key issues?
- b. What do we learn about how patients feel?
- c. What do we learn about what we do well?
- d. What do we learn about what we need to improve?

Alongside completing the action plan, you might wish to capture these issues and insights:

1. Where are we now?
2. Where do we want to get to?
3. What do we need to do to get to where we want to be?
4. Who is responsible for achieving the action identified?
5. What is the target date?
6. If possible, evaluate the success of the changes made after an appropriate length of time (see evaluation form, tool 4D, appendix 4).



SECTION FOUR:

Staff perceptions

The importance of staff questionnaires

The aim of patient video stories is to deliver powerful and effective messages to managers and staff involved in patient care. If changes or improvements are needed, it is essential to get the support and input of staff directly involved, so they feel part of making positive changes and understand the impact of those changes.

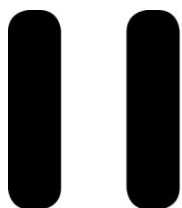
Because of this, it is important to evaluate the effectiveness of showing patient video stories to staff. We suggest using a short staff survey to baseline staff attitudes towards the patient experience before introducing patient video stories and then repeat this afterwards (tool 5A, appendix 5). This will establish whether there has been a change in staff perceptions around the care provided and will help in producing the action plans required.

Alternatively, just using the questionnaire once after viewing a patient story is also valuable as it establishes staff views on the care provided in their teams after seeing their service from a patient's perspective.

TOOLKIT APPENDICES:



APPENDIX 1



THE PATIENT



TOOL 1A

Date:

Dear *(Name)*

PATIENT VIDEO STORIES

WOULD YOU LIKE TO TAKE PART IN A FILM ABOUT YOUR HEALTHCARE EXPERIENCE?

The *(name of hospital/organisation)* wants to interview people who would like to share their story of their healthcare experience . We also want to know what it is like for your carers, friends and family. We want to use what you tell us to improve how we treat, help and support people in the future.

WHAT WOULD I HAVE TO DO?

You would be interviewed by people independent to the hospital team that you are receiving care under, or by a member of the team providing your care if that is what you would prefer. They will ask you about your recent experiences. If you like, you can ask someone to be with you during the interview. We will ask you if we can film or tape our interview so that we can watch or listen to it again. A short copy of the film will be shown to our staff to discuss the points you raise and help improve our services.

Taking part is completely voluntary and not taking part will not have an effect on your future treatments.

HOW DO I TAKE PART AND FIND OUT MORE?

We can take your details and contact you again to see if you would like to take part. We can provide you with a Patient Briefing sheet and would be happy to answer any questions you might have. If you think you would definitely like to participate you can contact the Ward or Department or the Patient Experience Team on *(telephone number of Patient Experience Team)*.

Yours sincerely

TOOL 1B

Date:

Dear (Name)

PATIENT VIDEO STORIES : Confirmation of your interview

Many thanks for agreeing to take part in an interview to share your healthcare experience. Your feedback will be used to evaluate our service, and make improvements where required.

Please find enclosed a Patient Brief explaining more about the interviews.

The interviews will be conducted and videoed by employees of the NHS but not the hospital team directly involved in your care, unless that is what you would prefer.

Your location for Interview:-----

Your interview date and time:-----

Your interviewer's names:-----

If you have any questions or concerns about the interview please contact:

The Patient Experience Team on (telephone number)

If you decide that you no longer want to take part in the interview, you can let us know at any time and withdrawing will not affect the services you receive from us.

Many Thanks for your participation.

Yours sincerely

TOOL 1C

PATIENT VIDEO STORIES

PATIENT BRIEF

Tell us your story. Help us to improve care

We are always working to improve the services we offer to patients. That starts with listening to what your experience of care has been like to understand what we do well and what we could do differently.

Alongside our surveys, audits and other sources of data, we want to get a detailed and human perspective on the services we provide. Because of that, we gather patients' accounts of their experiences here on video and review them as a team in order to improve what we do. You'll be reassured to know this doesn't cost the earth. This isn't about expensive, high-tech, glossy films, we will use a small digital camera and microphone. It is a simple, effective way to get your voice across.

We'd like to invite you to answer some questions about your care here and we'd like to video your answers. You can choose whether you would like to be speaking to someone who is or isn't directly involved in your care. That video would then be watched by the team who did care for you, and they would discuss it to see what they can learn about your experience and what they could do differently. With your permission, we may also want to use the film for wider training purposes and possibly on our website.

We would propose to film you on just one occasion if you agree and we may then approach you again, to capture your follow-up experiences. The filming should take about 20 – 40 minutes of your time depending on what you would like to tell us. Whether or not you're happy to do this with us, it won't affect the care you're given, now or in the future.

What this is for

- Improving the care we give to patients
- Telling us things we do well
- Telling us things we do badly – we want to know these because they help us improve
- Making suggestions about what we might do differently
- To share with others – to spread improvement.

What this isn't for

- Making a formal complaint – by all means tell us things we could do better, but this video won't count as making a complaint – if you want to do that, we can help you to do so properly

- Identifying individual members of staff, whether using their name or another detail that makes it clear who they are – if you want to give feedback on an individual, you can let us know and we'll pass it on to the relevant person: it just isn't appropriate to do this on the video.

TOOL 1D

Patient Video Stories – **PATIENT CONSENT FORM**

First and last name of participant: _____

D.O.B _____

Address _____

Tel no: _____ Email: _____

- | | |
|---|--------------------------|
| 1. I confirm that I have read and understood the Patient Brief provided and have had the opportunity to ask questions. | <input type="checkbox"/> |
| 2. I agree to take part in the above project and be filmed or taped. | <input type="checkbox"/> |
| 3. I understand that my participation in this video shoot is voluntary and I am free to withdraw at any time. | <input type="checkbox"/> |
| 4. I understand that the video may be used for training purposes and in Team meetings throughout the National Health Service. | <input type="checkbox"/> |
| 5. I understand that my comments (or part of them) may be used in different formats such as video, paper and/or electronic to share with others the benefits of designing services that are based on patient experience. This will include staff in health and other related industries both within and outside the UK. | <input type="checkbox"/> |
| 6. I understand that any of my comments used may be edited and may appear anonymously in written form. | <input type="checkbox"/> |
| 7. I understand that the organisation does not have to use my comments in any form. | <input type="checkbox"/> |
| 8. I understand that confidentiality will only be broken if issues around safeguarding arise from the information I provide. | <input type="checkbox"/> |
| 9. I understand that my comments/video may be used on social media websites (such as Facebook) and I understand that the Trust cannot control or retract material once it is within circulation on social media sites. | <input type="checkbox"/> |
| 10. I understand that the Trust may share my comments/video with other appropriate agencies and that such agencies will follow the Trust confidentiality policies. | <input type="checkbox"/> |

The photographs and filming images will form part of the Trust's photographic library which may be used for the Annual Report, staff magazine, Trust newsletters, patient leaflets, and other promotional literature, now and in the future. Images may also be used for other purposes including the Trust's website, social media, Facebook page and issuing to the media. All images remain the property of the Trust, and we will seek your permission for using them for any other purpose.

To give your consent, please complete the following:

NAME OF PARTICIPANT

DATE

SIGNATURE

or, _____
Signature of parent, guardian or representative if the person being filmed or photographed is aged under 16 or is unable to provide consent for themselves

NAME OF INTERVIEWER

DATE

SIGNATURE

NAME OF CAMERA OPERATOR

DATE

SIGNATURE

Number Allocated to Film for Storage

Stored Location

Removed from Camera

If any copies are made of this film once placed on the shared drive then these copies need to be tracked by completing a tracking sheet and stored as trust policy (Data Protection/Caldecott Principles).

TOOL 1E

Date.....

Dear *(name of patient)*

Patient Video Stories : THANK YOU

Thank you for recently taking part in a filmed interview to share your experience of care with us whilst you were a patient within *(name of ward/Hospital)*. Your feedback has helped us to understand how patients experience our services.

Your video story will be played back to the relevant clinical teams, managers and other senior staff who will discuss all the issues raised within the video, both positive and negative. We will then produce an action plan to help us tackle any areas that may need improvement. We really appreciate your honesty and support in helping us to understand how patients experience our services and how we can make improvements to the care we provide.

You gave us your permission for the filmed interview to be used : *(delete as applicable)*:

- within the Trust for training and development
- within the Trust's photographic library which may be used for the Annual Report, staff magazine, Trust newsletters, patient leaflets, and other promotional literature, now and in the future
- Other purposes including the Trust's website, social media, Facebook page and issuing to the media.

All images remain the property of the Trust, and we will seek your permission for using them for any other purpose

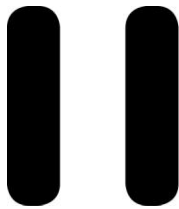
If you have any questions or concerns about the interview or would like to discuss further how we are acting upon the information you have provided us with please contact:

Patient Experience Team
(contact details)

We would like to thank you once again for your participation.

Yours sincerely

APPENDIX 2



PATIENT INTERVIEW TOOLS

PATIENT VIDEO STORIES

INTERVIEW CHECKLIST

The following is a checklist to guide you through the process of undertaking Patient Video Stories interviews with patients. You should also refer to Tools 2B, 2C and 2D.

CARRYING OUT THE INTERVIEW	Completed Yes / No
CONSENT	
Check that the patient or carer understands what they have agreed to do and that they still want to participate.	
Ensure they have fully read, understood and completed the consent form	
If you are travelling off site: HINTS AND TIPS	
If you are travelling off site alone, be familiar with your organisation's Lone Worker Policy or equivalent and ensure that you adhere to it	
Check the route to the place where you are meeting the patient/carer in advance of the session	
Allow enough time to get the venue and if you know or think you may be late ring the patient/carer to let them know	
Don't forget to introduce yourself, remind the patient/carer why you are there and how long the interview will take	
Remind them that you are not there to comment on their story or tell them what to talk about	
Do remember to thank them at the end of the interview and remind them about their decision in relation to their recording, ie it will be safely stored and it may be used for learning and shared as explained in the consent form	
If any points of concern were highlighted in the session in relation to the patient's ongoing health ask the patient if they will give permission for you to pass this information on to the appropriate clinician	
If a "complaint" crops up during the interview give them your organisation's complaint information so that they can pursue it if they wish	
If the session prompts you to be concerned about their current health discuss it after the interview and agree an action plan	
GENERAL HINTS and TIPS	
Allow the patient to tell you what they want to, and not necessarily what you expect or want to hear	
Remember that the skill of the Interviewer is in extracting as much information as possible about each significant patient-professional contact throughout the patient's journey, without influencing what the patient says	
Establish what happened to them	
What they understood those experiences to be	
How it has affected them both at the time and after the events (including how they felt about things)	
How they measured their experiences (in terms of positive or negatives)	

PATIENT VIDEO STORIES

HOW TO CONDUCT A VIDEO INTERVIEW - TIPS

A television interviewer can make it look easy; however, getting honest and reliable feedback from the patient you are interviewing on camera can be much more difficult than it looks. The patient is often nervous about facing a camera lens, so it's the interviewer's job to make them feel at ease.

- Be prepared – Find out as much as you can about your interviewee and the department concerned in advance
- Always introduce yourself and explain what the interview will be used for
- Start by asking a few general questions to put your interviewee at ease – you will get better responses if they are relaxed
- Find out a bit about the interviewee to build up a picture of who they are for the viewer, eg full name (check spelling for use in captions), age, where they live, career, family, hobbies etc and a summary of how they came to use your service
- Ask open ended questions that will require a descriptive answer - something the interviewee cannot just answer yes or no to! For example, “Tell us about...”, “How did you feel when...”, “What did you think of...”, “How can we improve....”.
- Use the Interview Outline Questions provided in this Toolkit as a guide (Tool 2C).
- Have a list of questions prepared and don't be afraid to ask the same question again if it is not answered properly. Ask the interviewee to include the question in their answer eg. “My name is... Areas I think could be improved are...”
- Listen to the answers that are given carefully as these may prompt further questions
- Do not speak over the interviewee as this will cause difficulties when editing. If you want to encourage them to keep speaking nod enthusiastically instead!
- If the interviewee goes off on a tangent try to guide them back to the subject with another question
- Leave any difficult questions until the end of the interview
- Always finish by asking the interviewee if there is anything else they would like to add
- Don't forget to thank them for their time and contribution.

TOOL 2C

PATIENT VIDEO STORIES

INTERVIEWEE OUTLINE QUESTIONS

- Can you tell us your full name, age and where you are from?
- Tell us a little bit about yourself – family/hobbies/career?
- Can you tell us a bit about why you came to use this service?
- What were your first impressions?
- How were you treated by our staff?
- What did you think of the environment?
- What were you impressed with?
- What were you disappointed with?
- What could be improved?
- What would you like to see staff doing differently?
- Outside of this service what is your overall experience of this hospital?
- What could we do to make life easier for our patients?
- Is there anything else you would like to say about this service?

Additional Questions Requested:

PATIENT VIDEO STORIES

VIDEO FILMING TIPS

QUICK & EASY GUIDE:

- Before you start the interview make sure your camera battery is charged and you have enough memory space to record your interview.
- Remember that when you press the record button for the actual interview you should wait 5 or 10 seconds before starting the dialogue to allow your camera to get up to speed.
- Always use a tripod to avoid camera shake.
- Position your interviewee to the left or right of the frame. If you sit them in a chair it will encourage them to stay still!
- Frame your interviewee so you can see their head and shoulders in the camera.
- Position yourself next to the camera on the opposite side to the interviewee and ask the interviewee to talk to you not to the camera.
- Get close to the interviewee – don't just zoom in – this gives you a nicer looking shot and better sound quality.
- Ask your interviewee to remove any bracelets or jewellery that could clank together and disturb the audio recording and make sure they are not holding anything that will clank or rustle.
- Think about having something interesting in the background of your shot – eg a hospital ward, medical equipment, not a blank wall/noticeboard/fire exit sign/desk!
- Ensure there are no confidential documents or patients who have not given consent to appear in the story in the background
- Once you have picked your location, close your eyes and listen. Check for any background noise that is going to distract viewers from the interview and either remove it or find another suitable location. If you are not using external microphones then place the camcorder close to the patient to ensure the sound is picked up clearly.
- Check the frame closely to ensure there are no background objects poking out from behind your subject's head.
- As soon as your interview is complete, stop the camcorder and look at several sections to make sure the quality is consistent and the audio is good.

- It is a good idea to have a practice run if you have not used the equipment before.
- When editing only make a cut where you really need to.
- Keep videos short for maximum impact.
- Use a plug-in microphone to ensure the best sound quality. The built in microphone in the camera will pick up a lot of background noise. But always make sure this is not in shot!
- Film at the same height as your subject – if they are standing you need to stand and if they are sitting you need to sit so you are at the same eye level – this gives a much more natural look.
- Ask the interviewee a few questions about themselves first to put them at ease and check your sound levels/focus etc.
- Avoid sitting your interviewee in front of a window or with a light source behind them as they will appear dark. You want the light to be shining on the subject rather than on the camera lens.

ADVANCED VIDEOING TIPS

- Do not sit people directly in front of a plain wall. If this is all you have to work with move them slightly away from the wall towards the camera to create depth.
- After your interview film some illustration shots – eg the interviewee walking down the corridor, exterior shots of the hospital, shots of the area/service the interviewee is talking about. These can be used as cutaways to add variation, break up shots and to disguise any edits. This will also make your film more interesting to watch.
- Film surroundings in separate static shots – hold each one for around 10 seconds. Avoid the temptation to sway the camera from one object to another as this can look unprofessional and be difficult to edit.
- Avoid zooming in and out while filming. Zoom in first and then start filming.
- Film more cutaways than you think you will need – so you have plenty of editing options.
- Ask your interviewee to bring along any photos or video clips of themselves or their family member to add a personal touch to the video story, making it more powerful to the viewer.

EDITING

You will need a basic editing package to enable you to put together the best of your footage to create your patient video. You may have received some basic software with your video camera or you can download a package online to suit your needs/budget.

Editing tips:

- Keep videos short for maximum impact.
- Make sure you are happy with the audio/narrative before adding any extra images/special features
- Only make a cut where you really need to.
- Use photos/cutaways to disguise any edits

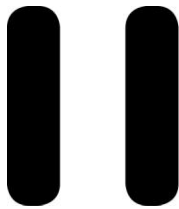
THE VIDEO CAMERA

You can make video stories with a very simple, basic camera. But – if you can get more for your money then do so. This section tells you the key things to look out for. Some features and accessories will give you greater control over the footage that you shoot and improve your videoing capabilities.

- **Focus** : Ideally you should look for a camera that gives you full manual control, but also the option to switch to “auto mode”.
- **HD** : To provide High Definition images, or, **3CCD** : These are chips inside your camera that translate the real world into a digital film image. 3-chip camcorders record higher quality video with better crispness and colour saturation, and they are the standard for professional-quality video cameras.
- **Audio Inputs** : The microphones built into camcorders can sometimes be of low quality and, if you are aiming for high quality videos, you may want to be able to use a separate, external microphone to really maximise the quality of the audio you record. Make sure your camera can accommodate this.
- **Camera Stability** : It is recommended that you mount your camera on a suitable tripod to prevent unnecessary shake and give the film stability.
- **Video compatibility** : It is also important to ensure that the film you are shooting is going to be compatible with the IT set up at your facility. It is therefore recommended that you explore playback, editing and storage with your local experts in this field.
- **Memory**: using a camera with an SD card will allow you to extend the memory bank.

There are many advice guides published on the internet that you may find useful to read prior to purchasing your video camera. Remember the key element is that your device is transportable, easy to use and fit for purpose.

APPENDIX 3



VIDEO STORY SHARING TOOLS

TOOL 3A

PATIENT VIDEO STORIES

Consent form for sharing Patient Video Stories with other agencies/Trusts

Films may be shared with other agencies as described in the consent form. If films are to be shared, sharing must comply with Trust policies.

(NAME OF TRUST/ORGANISATION)

STORY Reference Number

NAME

TOPIC

Name of Agency/organisation wanting to use the Patient Video Story

Name of Contact and Contact Details

PLEASE
INITIAL

1. We confirm that we have read and understood the information sheet for the above project and have discussed its aims with our contacts within the Trust (*name of Trust/organisation*). ☐
2. We understand that the participation of the patient within the video story was voluntary and they are free to withdraw their consent at any time in which case we will withdraw their patient story from our programme. ☐
3. We understand that we may edit any of the comments made but they must appear anonymously if used in written form. ☐
4. We agree that the DVD/USB remains the property of the Trust and we will take responsibility for the DVD/USB ensuring it is stored and used appropriately and that our governance of the DVD/USB will adhere to The Data Protection Act (1998) and Caldecott principles. ☐
5. We understand that we are able to use the comments (or part of them) in different formats such as video, paper and/or electronic to benefit service designs that are based on the patient experience – all in accordance with the Consent Form completed by the patient involved in the video story. ☐

NAMED individual for Trust

DATE

SIGNATURE

NAMED individual for Agency

DATE

SIGNATURE

TOOL 3B

PATIENT VIDEO STORIES

INTERNAL TRACKING FORM

for the Release of Patient Video Stories information from its secure storage system within the Trust/organisation (eg locked files / secure shared pc folders)

.....
Reference Number Allocated to Story/Film

If any copies are made of this film once placed on the shared drive then the copies need to be tracked by completing this tracking sheet and stored as trust policy (data protection)

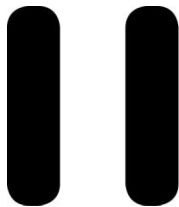
Stored Location of copy provided

Patient name/reference : _____

Topic _____

Date	Number of copies	Reason for requesting copy of Video Story	Secure Device Used	Consent signed

APPENDIX 4



NEXT STEPS – USING THE STORIES

PATIENT VIDEO STORIES

VIEWING OF VIDEOS: TIPS FOR FACILITATORS

Steps to follow :

1. Ensure as Facilitator you have viewed the story yourself prior to showing it to the team so you can make your own notes on the issues that should be picked up by the team and within the Action Plan.
2. You may wish to watch the story with the manager involved before showing it to their team.
3. Think carefully about who needs to see the video and when.
4. Organise viewings at appropriate times and venues and ensure that the story plays correctly on the equipment provided before the viewing.
5. Provide staff with pre-viewing questionnaires to complete before viewing the story and repeat the questionnaire after viewing. This will allow you to establish if their perceptions have changed around the patient experience. (Staff Perception Questionnaire is provided in this Toolkit).
6. Provide a Viewing Attendance Sheet and ensure it is completed by all present (provided in this Toolkit).
7. Introduce the film: who the patient is, their condition, and when filming took place.
8. Explain the purpose of the film : The film is for staff to listen to how patients experience the service, to hear the patients' story of care and reflect on areas raised by the patient that could be improved.
9. Explain what the film is not : The film is not a representative sample of how all patients experience the service – it is just one patient telling is their own personal experience.
10. Show the Patient Story and encourage viewers to make their own notes if they so wish, for discussion at the end.
11. Once the viewing is complete, ask the team to identify the key points to be addressed and encourage honest discussion about the patient story – these are the issues which should be put into the Action Plan.
12. Arrange for completion of the Action Plan within a set timescale (see Action Plan in this Toolkit) and ensure time scales and responsible persons are identified on the Plan.

TOOL 4B

PATIENT VIDEO STORIES

VIEWING OF VIDEO : ATTENDANCE SHEET

Video Title : _____

Video number / reference : _____

Clinical Team viewing video : _____

Date : _____

Facilitator : _____

The viewing of this Video from the Patient Video Stories project is an essential part of the process and aims to share effectively the views of the patient to the clinical teams involved in their care. To help us keep a record of all staff who have viewed this video, all attendees should add their name below and return this form to the Facilitator.

NAME	POSITION

TOOL 4C

Patient Video Stories: ACTION PLANNING SHEET

Video Topic : *Ref No:*

Following review of the video interview(s), what actions have to be taken to achieve best practice?

<i>Key issue identified from the story</i>	<i>Action to be taken</i>	<i>By whom</i>	<i>By when</i>	<i>How will we measure the improvement</i>

Review Date :

TOOL 4D

Patient Video Stories : EVALUATION OF ACTION PLAN

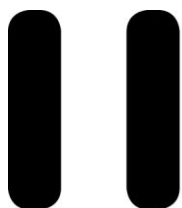
Video Topic : *Ref No:*

Factor identified for change	Person responsible	Progress report	Improvements	Problem	Unexpected Outcome

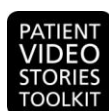
Further comments :

If further evaluation of progress required agree next evaluation date :.....

APPENDIX 5



STAFF PERCEPTIONS



PATIENT VIDEO STORIES**STAFF QUESTIONNAIRE**

Video Topic:..... Ref No:.....

This questionnaire has been developed to ascertain staff perceptions around the patient experience in their clinical areas as “Patient Video Stories” are introduced as one method for collecting patient feedback data.

All replies are anonymous but it would be helpful for us if you could complete the following :

Clinical Area.....**Type of role :**.....
(eg nurse, medical, AHP, manager, admin)**Date:**

Please indicate below by circling if this questionnaire is pre/post viewing of the Patient Video Stories in your clinical area.

PRE QUESTIONNAIRE

POST QUESTIONNAIRE

Thank you for taking the time to complete this questionnaire

PATIENT VIDEO STORIES : STAFF PERCEPTION QUESTIONNAIRE**TOOL 5A** - Page 2 of 3

Staff Perception around the patient experience in their clinical area	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree	Not applicable to me	Comments
The Patient's/Service user's experience is a priority for this organisation							
The Patient's/Service user's experience is a priority for this particular clinical area							
Staff involve patients/service users in decisions about their care and treatment							
It is important to ask patients about their expectations whilst in your care							
Patients/Service users feel able to ask staff about their care and treatment if they have concerns or queries							
It is important that staff collect patient feedback on the care they have received							
Staff know how their patients rate the care they receive in their area							

							TOOL 5A - Page 3 of 3
	Strongly Disagree	Disagree	Neither Disagree nor Agree	Agree	Strongly Agree	Not applicable to me	Comments
Staff are actively involved in evaluating the patient experience							
Staff are involved in leading changes in the clinical area based on patient feedback							
There is more we can do to improve the patient experience within our clinical area							
	YES	NO					
Are you aware of the Patient Experience Team/Steering Group within the Trust							

