A team arrives at a hospital with video cameras to interview and shadow senior patients and their families throughout their care experience. One team member asks questions about patients’ interactions with their doctors, their understanding of medication instructions, and which resources they most needed. Another team member speaks with caregivers and observes the discharge planning process. The team’s final product is not headed to a theater or documentary film festival. It is part of a comprehensive quality improvement effort that uses a technique called video ethnography to help redesign health care around patient and family member needs.

Policy Context

The Triple Aim is a framework developed by the Institute for Healthcare Improvement to enhance patients’ experience of care, improve population health, and reduce the cost of care. As the population ages and rates of chronic illness rise, health systems will need to make a more concerted effort to understand the experiences and preferences of older patients, many of whom have complex care needs.

The Challenge

At the heart of improving the health care delivery system is a thoughtful understanding of patient experience. Health systems typically gather information on patient and family experience by fielding surveys, conducting focus groups, and inviting patients to serve on advisory committees. These activities, however, may not be sufficient for deepening understanding of certain patients’ experiences. For example, elderly patients and those with chronic illness often cannot take part in these activities. To achieve patient-centeredness, health systems must find new ways to ensure that all patients’ voices are heard.

Kaiser Permanente Solution

For decades, social scientists have used a research method called ethnography to study human experience and culture. The term traditionally referred to a practice in which researchers live within a culture for a long period to study it. Today, ethnography can describe activities where researchers spend less time—days, or even hours—observing and interacting with participants in areas of their everyday lives. Kaiser Permanente uses a video-based form of ethnography to bring patient perspectives into our quality improvement processes. “Video ethnography” combines observations and in-depth interviews of patients, caregivers, and other staff with video recording, qualitative analysis, and quality improvement planning.

Kaiser Permanente uses video ethnography to identify unmet patient and family member needs. “Since we began using video ethnography in 2008, it has made a real impact in helping us see with new eyes, deepening our understanding of the patient and family experience in ways that uniquely complement our other methods for gathering data,” says Estee Neuwirth, PhD, director of evaluation, Kaiser Permanente Care Management Institute.
Video Ethnography in Action

Many of Kaiser Permanente’s projects that use video ethnography focus on the experiences of seniors and those with multiple chronic illnesses. For example, a team in our Northwest region shadowed a woman in her eighties—call her Sarah—for an entire day at a Kaiser Permanente medical center. Sarah came in for a routine check-up with her primary care physician. The team observed that Sarah valued seeing her doctor face to face, but by the end of the day she was exhausted by the journey to the clinic. In addition to the office visit, she waited for lab tests, spent time in waiting rooms, and eventually missed lunch, which was typically provided by her assisted living facility. The team also noticed that Sarah was not prompted to bring a caregiver or family member with her into the exam room. During Sarah’s visit, it became clear that she had some memory loss and didn’t remember that she had a heart attack several months earlier.

As happens with many seniors, Sarah’s visit with her doctor required complex coordination between herself, her assisted living facility, her family, and Kaiser Permanente. These types of insights helped the team identify simple improvements—such as encouraging patients to invite family and/or caregivers to the clinic visit—to transform care.

Other examples of video ethnography projects include:

**Effective Care for Heart Attack Patients:** In our Southern California region, video ethnography was used to increase the use of the evidence-based practice of therapeutic hypothermia (lowering a patient’s body temperature to reduce the risk of brain damage) after a heart attack. Some providers were uncomfortable with the treatment, fearing that it might be painful for patients and that the potential discomfort might outweigh the clinical benefits. Through video ethnography, patients shared that they did not remember undergoing hypothermic treatment, putting providers at ease and enabling the use of this effective therapy.

**Improving Palliative Care:** Our Colorado region used video ethnography to transform care for patients with serious illness. Video interviews with palliative care patients clarified the nature of patients’ fear and uncertainty. The tool helped support the need for social workers in the care process.

**Focusing on Social Supports:** Our Northern California Performance Excellence group uses video ethnography to study social care in the medical setting. The group hopes to understand patient needs such as transportation and community support, enabling them to build a structure to provide high-needs patients with necessary non-medical services.

**Practical Implications and Transferability**

Kaiser Permanente’s Care Management Institute has developed an in-depth toolkit to help teams apply video ethnography, keeping overhead low by using inexpensive video equipment and simplified qualitative analytic techniques. To spread knowledge and expertise across our system, we disseminate this toolkit and conduct “train the trainer” sessions. By making video ethnography a routine part of quality improvement activities, health systems can use the voices of patients, families, and staff more fully to transform care.

To learn more about our approach to video ethnography, visit [http://kpcmi.org/ethnography/video-ethnography-tool-kit.pdf](http://kpcmi.org/ethnography/video-ethnography-tool-kit.pdf) and [http://www.youtu.be/D0cHAk2rpOg](http://www.youtu.be/D0cHAk2rpOg).

*For more information, please visit:* Kaiser Permanente Institute for Health Policy at [http://www.kp.org/ihp](http://www.kp.org/ihp)