

## ***Death and Dogs, By David Gaunt and Becky Platt***

This is not going well. I sit across from Mary and Sam, thinking, she's going to kill me! Becky has worked so hard to get this exceptional story to the Rounds, and here I am, completely messing up the prep. There's supposed to be four panellists, four nurses from the ward, to tell their story about a lovely lady who they looked after in the last few weeks of her life. And yet, there's only two. I go and grab Tina, tell her to just come and sit with us. She can listen to the other two; maybe I'll be able to persuade her to be a panellist.

"So," I say, "what can you remember about this lady?" "Oh, she was lovely," they all say. I try to get them to open up, to tell me what made her so special. They just look at each other, saying nothing. I try all the tricks in the book, teasing out a little story about how they put pillows on the floor by her chair, so that when she fell she didn't hurt herself. Not bad, but hardly enough for a whole Round. Asking about how they felt when she died, they tell me they felt "a little sad". I look at the three of them, wondering what it was that made Becky think this would work. This Round is going to be a little flat, if that's all my prep has achieved. I manage to persuade Tina to at least be present at the Round, but she's decided she's not saying a word. I suggest to them that, instead of the standard panellist setup, the three of them could just chat together, each chipping in with anecdotes – except they just don't seem to have any!! I tell them all they are going to be wonderful, and I slink off, not looking forward to this Round at all, and looking forward to telling Becky about the Prep session even less.

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I'm nervous. This feels risky. Underprepared. Twenty minutes before the round David and I are closeted in a cupboard with our three panellists giving them a pep talk, telling them they'll be fine. This isn't public speaking in the way they're worrying it will be. They will feel support from the room and people will love their story. We start. Our first panellist dries up at 1 minute. She's nervous but I know the story is inside her and the audience would love it. But she can't get it out. Our second panellist haltingly tells us how she arranged for her dying patient's dog to come onto the ward so they could say goodbye to each other. The nurse broke the rules and let an animal into the ward. Suddenly the whole panel are alive in the memory. They're animated, feeding from each other, a group of colleagues reminiscing about an important patient and how they made the end right for her by recognising what mattered to her most.

This isn't the standard way to run a Round, but it's just working. Now I understand what David knew they could achieve, what they needed. Freedom to express themselves in a way they were comfortable with. They're chatting amongst themselves but in a way that feels so inclusive of the audience. The emotion in the room is palpable. The audience are willing the panel on as we hear how the staff were moved when the dog climbed on the bed and snuggled down beside her much loved mistress. The audience are overwhelmed by the dedication of this team who granted a patient's dying wish. I feel a momentary rush of relief that my chief nurse isn't in the room hearing about dogs on beds. And then it's my turn to speak. To give the audience their chance to reflect.

"This was a story about death and dogs", I say, and there is laughter. A release of emotion. I invite reflections and I barely have to wait a few seconds. "Well. That was a four-tissue event" says one of our Schwartz regulars, dabbing her eyes. She thanks the team for not thinking about rules at a time when rules didn't matter. We reflect on what really counts for our patients in their last days, our desire to get this right for them and how it feels when we do. David and I exchange a glance now. In our practiced way, we tell each other without words that this is working. Now we can just enjoy the journey of the audience's reflection, wherever it takes us.

We talk about the breaking of rules when rules get in the way of what is right. We reflect on the fulfilment of a job done well. This is not about medical treatment, box-ticking or targets. This is about knowing what is important to the people we are here for. It's about understanding about humanity in healthcare. Just as our patients are individuals, so are our staff. This panel wouldn't be confined by rules when their patient needed a wish granted. Nor could they be confined by the normal structure of the Round. In both situations risks were taken, and in both situations the risks paid off. This is how it is in our world. Sometimes you have to take a leap of faith.