

Improving Patient Outcomes through Effective Debriefing and Reflection

Kirk J. Armstrong, EdD, ATC
Department of Health Professions

Provider Disclaimer

Potential Conflict of Interest

- Presenter facilitates the Using Standardized Patients in Healthcare Education Workshop
 - Held at James Madison University, July 18-20, 2019
- The views expressed in these slides and the today's discussion are my own
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Learning Objectives

1. Summarize the need for debriefing to improve patient outcomes
2. Discuss phases of debriefing
3. Discuss common challenges encountered when facilitating debriefing
4. Develop strategies implement debriefing and reflection in clinical practice to improve patient outcomes

Understanding the Audience

Role as an Athletic Trainer

- Preceptor
- Faculty
- Administrator

What is debriefing?

A facilitated planned conversation where individuals analyze their actions, thought processes, and emotions with the goal of improving patient care and outcomes¹⁻⁵



What is debriefing?

Requires two-way communications between the learner and facilitator^{1,3-5}

Deliberately planned questions that fosters insight into of behaviors and decisions

- Participants analyze their actions²⁻⁵
- Reflect on their thought processes⁵
- Ultimately assimilate improved behaviors into clinical practice³

What is Debriefing?



Feedback

Input (from a supervisor or outsider) of a situation on what they feel is most important



Debriefing

Self-reflection of the clinician on their actions during patient care

- The ability for the clinician to adapt and understand their role in patient care

What are you trying to achieve?

Effective debriefing⁶ can result in:

- Metacognition
- Changes in attitude
- Changes in patient care behaviors
- Compliance of student or clinician
- Adherence to clinical practice behaviors
- Improved patient outcomes



General Debrief Questions

1. How did you feel during the encounters?
2. What went well during the encounters?
3. What did not go well during the encounters?
4. What did you expect to happen during the encounter?
5. What did happen during the encounter?
6. What did you find helpful about engaging in this patient encounters?
7. How do you feel now that we had time to process and discuss the encounter further?
8. How will this impact your patient care in the future?



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What debriefing is not

Debriefing is not a comparison of an observed behavior and a performance standard⁶

- Purpose is not for the facilitator to point out what behaviors or actions were correct or incorrect

Debriefing is not provided with the intent to improve performance⁶

- Should foster critical self-reflection

Contexts for debriefing

Educational scenarios⁶

- Simulations
- Mock evaluations
- Laboratory experiences

Critical events^{7,8}

- Initiation of emergency action plan
- Death of a patient
- Severe aggression

Patient care scenarios⁶

- For professional development
- After patient care incident

Why is debriefing needed?

Debriefing after a patient care encounters has been shown to:

- Improve critical thinking⁹⁻¹⁰
- Improve confidence^{10,12-14}
- Improve clinical skills^{10,13-16}
- Improve clinical reasoning skills^{1,17-18}

Facilitating effective debriefing can be challenging^{4,5,17}

What are the challenges?



What are the challenges?

Psychological safety¹⁹

Honest, not judgmental

Pre-Simulation¹⁹ or Pre-Patient Encounter

- Basic assumption – everyone wants to improve
- Clarify objectives
- Roles
- Confidentiality
- Expectations

Setting a Safe Space for Debriefing

- Set ground rules and explain the purpose of the debriefing
 - What it is
 - What it will accomplish
- Express this is a learning environment as important as the encounter itself
- Everyone wants to succeed (everyone in the room shares a common goal) and we will discuss successes and mistakes
 - It's ok, that's why we are here; It is important to learn from mistakes that are made
- We will maintain confidentiality/privacy
 - Anything that happened in the incident and discussed here will not go beyond the group discussion.
- We will always be respectful of each other
 - We will not interrupt one another
 - We acknowledge that sometimes will disagree which is ok

Debriefing for Meaningful Learning

Method of debriefing used in simulation and clinical practice to foster reflective thinking and learning^{17,20}

Teaches practitioners to challenge taken-for-granted assumptions¹⁹

Right Thinking Wrong Action	Right Thinking Right Action
Wrong Thinking Wrong Action	Wrong Thinking Right Action

Phases of Debriefing²¹

Reactions

- How are you feeling?

Description

- Summarize key events, problems

Analysis

- What aspects do you think you managed well?
- What would you want to change?

Summary

- What are take home messages?

Discussion Questions

How do [or can you] use debriefing used in your athletic training practice?

- After patient care encounters?
- After critical incidents or activation of EAP?
- During interprofessional practice?

What training is provided to administrators to facilitate effective debriefing??

Discussion Questions

What challenges have you encountered when facilitating debriefing?

What strategies do you employ to overcome challenges when facilitating debriefing?

Overcoming Challenges

1. Creating a safe/comfortable environment¹⁹
 - Participants should feel comfortable expressing their mistakes and learning from them
2. Develop a debrief guide when designing learning objectives¹⁹
 - Debriefing questions should parallel your learning objectives
 - Encourage reflection on actions
3. Use the standardized approach (Debrief Diamond²²)
 - Standardized approach that scaffolds questions to facilitate reflective processes

4 QUADRANT FEEDBACK

CONTINUE....

BEGIN TO DO MORE....

CONSIDER....

DO LESS OR STOP....



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Debrief Diamond²² Underlying Principles

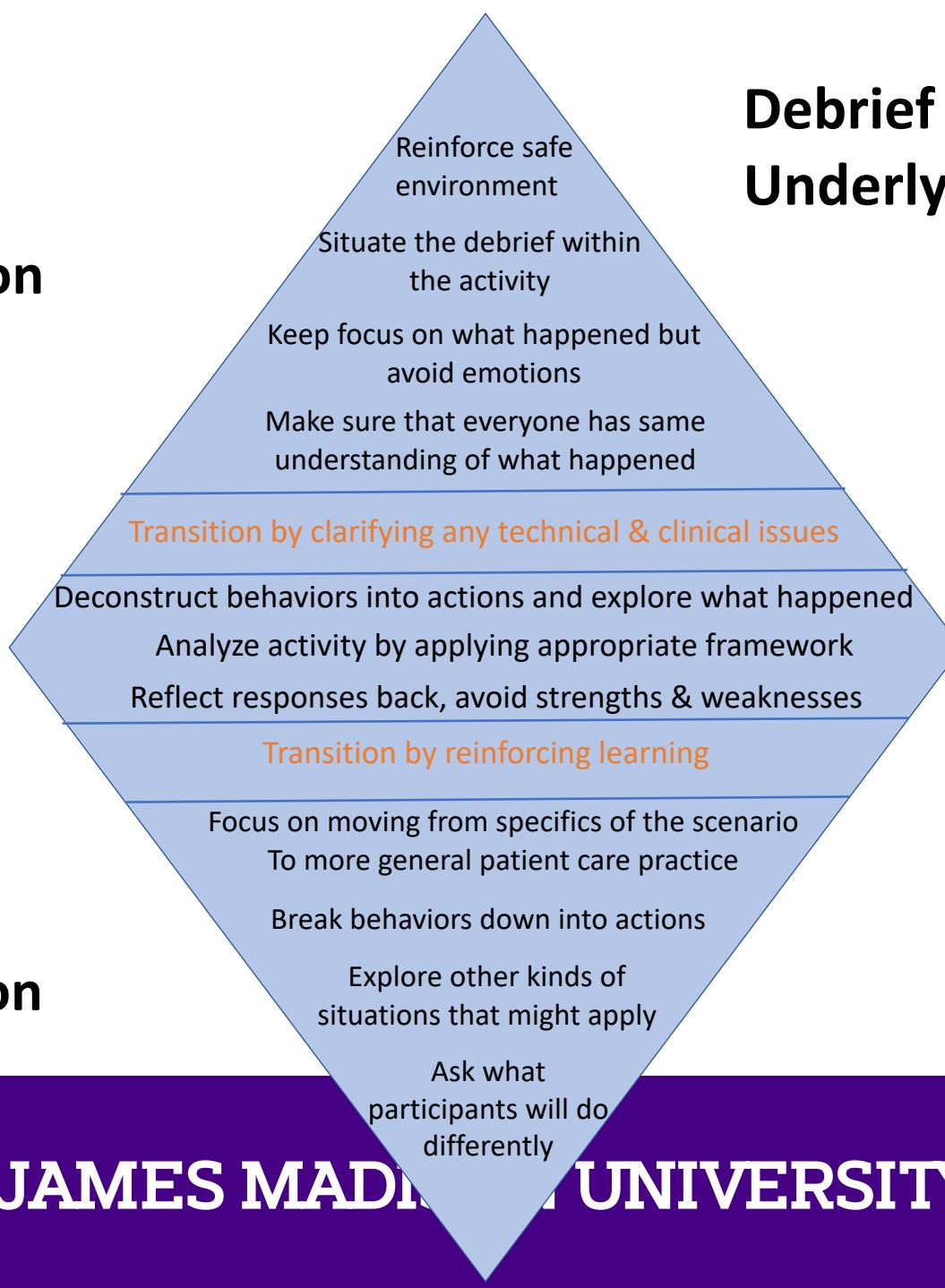
Description



Analysis



Application



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Debrief Diamond²² Phrases to Remember

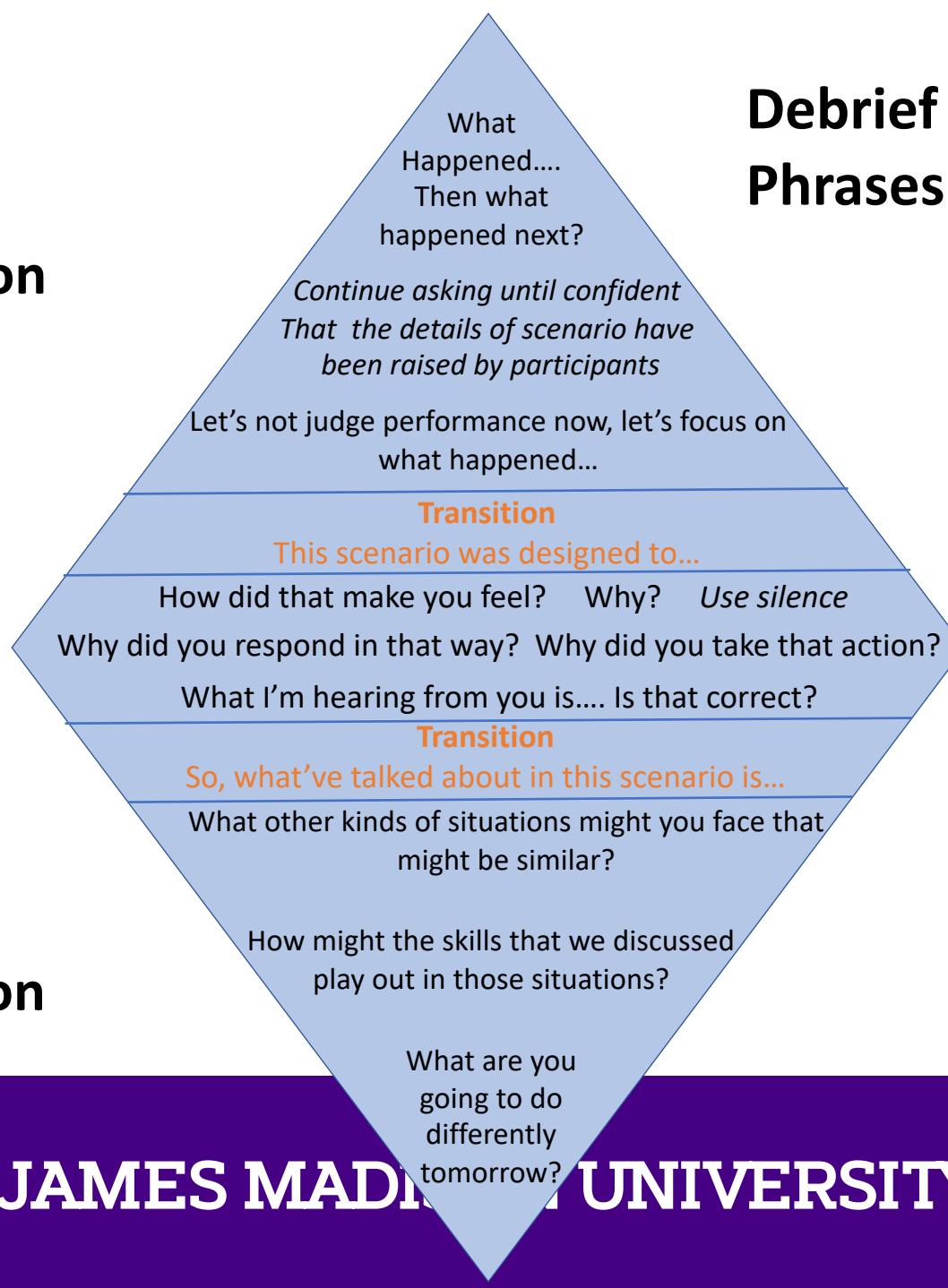
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Analysis



Application



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Overcoming Challenges

4. Attend professional development

- University of Illinois College of Medicine
 - Training SPs to Debrief and Give Feedback
- James Madison University
 - *Using Standardized Patients in Healthcare Education* Workshop
 - July 18-20, 2019
 - Professional journals
 - Society for Simulation and Healthcare
 - Academic Medicine

Clinical Bottom Line

Athletic trainers should facilitate debriefing with staff and students on a regular basis

- Specifically, debriefing sessions should follow activation of the emergency action plan, difficult patient situations, and even simulation-based encounters

Facilitated debriefing has been shown to increase the confidence, clinical reasoning, critical thinking abilities, and patient outcomes

Facilitated debriefing sessions have a profound effect on the healthcare community and should be incorporated when the opportunity is available

Questions



References

1. Dreifuerst KT. Using Debriefing for meaningful learning to foster development of clinical reasoning in simulation. *J Nurs Ed.* 2012;51 (6): 326-333.
2. Fanning RM, Gaba DM. The role of debriefing in simulation-based learning. *Sim Healthc.* 2007;2(2):115-125.
3. Kessler DO, Cheng A, Mullan PC. Debriefing in the emergency department after clinical events: a practical guide. *Ann Emerg Med.* 2015;65(6):690-698.
4. Roh YS, Kelly M, Ha EH. Comparison of instructor-led versus peer-led debriefing in nursing students. *Nurs Health Sci.* 2016;18:238-245.
5. Palaganas JC, Fey M, Simon R. Structured debriefing in simulation-based education. *AACN Adv Crit Care.* 2016;27(1):78-85.



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References

6. International Conference on Residency Education. Debriefing: from simulation to the clinical setting. Available at: http://www.royalcollege.ca/portal/page/portal/rc/common/documents/events/icre/2014proceedings/slides/Faculty_Development/Debriefing_From_simulation_to_clinical_setting.pdf. Accessed June 7, 2016.
7. Healy S, Tyrrell M. Importance of debriefing following critical incidents. *Emerg Nurse*. 2013;20(10):32-7.
8. Kessler DO, Cheng A, Mullan PC. Debriefing in the emergency department after clinical events: a practical guide. *Er Ann Emerg Med*. 2015;65(6):690-8.
9. Morrison AM, Catanzaro AM. High-fidelity simulation and emergency preparedness. *Pub Health Nurs*. 2010;27(2):164-173.
10. Zapko KA, Ferranto ML, Brady C, Corbisello A, Hill D, Mullen R, DeFiore-Golden PJ, Martin L. Interdisciplinary disaster drill simulation: laying the groundwork. *Nurs Educ Perspect*. 2015;36(6):379-382.

References

11. Frawley S. Enhancing patient safety: a novel approach to teaching key principles of safe hospital discharge. *Nurs Res.* 2016;65(2):e84-e85.
12. Fisher JM, Rudd MP, Walker RW, Stewart J. Training tomorrow's doctors to safeguard the patients of today: using medical simulation training to explore barriers to recognition of elder abuse. *J Am Geriatr Soc.* 2016;64(1):168-173.
13. DeCaporale-Ryan LN, Dadiz R, Peyre SE. Simulation-based learning: from theory to practice. *Fam, Syst, Health: J Collab Fam Healthcare.* 2016;34(2):159-162.
14. Mould J, White H, Gallagher R. Evaluation of a critical care simulation series for undergraduate nursing students. *Contemp Nurse: J Austr Nurs Prof.* 2011;38:180-190.
15. Abelsson A, Rystedt I, Suserud B, Lindwall L. Learning by simulation in prehospital emergency care- an integrative literature review. *Scand J Caring Sci.* 2016;30(2):234-240.
16. McLeod R, Mires G, Ker J. Direct observed procedural skills assessment in an undergraduate setting. *Clin Teach.* 2012;9(4):228-232.



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References

17. Forneris S, Neal DO, Tiffany J, Kuehn MB, Meyer HM, Blazovich LM, Holland AE, Smerillo M. Enhancing clinical reasoning through simulation debriefing: a multisite study. *Nurs Educ Perspect*. 2015;35(5):304-310.
18. Driefuerst KT. The essentials of debriefing in simulation learning: a concept analysis. *Nurs Educ Perspect*. 2009;30(2):109-114.
19. Rudolph JW, Raemer DB, Simon R. Establishing a safe container for learning in simulation: The role of the presimulation debriefing. *Simul Healthc*. 2014;9(6):339-49
20. Driefuerst KT. Getting started with debriefing for meaningful learning. *Clin Sim Nurs*. 2015;11:268-275.
21. Eppich W, Cheng A. Promoting excellence and reflective learning in simulation (PEARLS): Development and rationale for a blended approach to health care simulation debriefing. *Simul Healthc*. 2014;9(6):339-49
22. Jaye P, Yhomas L, Reedy G. 'The Diamond': a structure for simulation debrief. *Clin Teach*. 2015;12:171-175.



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