CLINICAL EVENT DEBRIEFING GUIDE

Intention: Tool to support post clinical event debriefing. Goals: group learning, team building, and system improvement.

Timing: 5 - 10 minutes.

Where: Anywhere you can gather without impeding patient care.

Who: All interdisciplinary team members involved in the event are welcome; participation is <u>voluntary</u>.

Clarify roles at the start.

What it's not: Focus is on team and system, <u>not individual performance.</u> This does not replace critical incident stress debriefings, individual feedback, or PSLS reporting.

Suggested Preamble:

"Thank you for joining this debrief. My name is ____ and I will facilitate this discussion. For those who were involved, I encourage you to share your thoughts and insights. Before we get started, does everyone know each other?

Our goal is to both learn from this case and celebrate successes. We'll aim to keep this to 5-10 minutes, so we may not be able to cover everything. Our focus is on team and system improvement, not on anyone's personal performance.

Our aim is to create a **safe** space so we can learn and grow as a team, improve patient safety, and check in on everyone's overall wellbeing. Participation is voluntary and you are free to leave at any time. We will follow the STOP format for this debrief."



Summarize the case.

Keep brief.



Things that went well.

Proud of? Want to repeat?



Opportunities to improve.

Might do different?



Points of action. Action items.

Who will do? When? How?

Sample Closing Statement:

"Thank you for taking the time to debrief. Let's remember to share both our successes as well as any ideas for improving systems or teamwork. Here are the action items I've noted - anything to add?

Reminder: healthcare can be tough, emotions can run high, and we all respond differently. If you would like more support, we can chat, and I can connect you with free resources through our health authority."

TIPS FOR FACILITATORS:

Navigating Dominating Voices:

Eg: "Thank you for your insights on this topic. With five minutes left, I'd like to ensure everyone has a chance to speak."

Redirecting from Personal Performance to System Thinking:

Eg: "Can we pause for a moment? I'm concerned we are losing sight of our larger focus. Let's shift back to the broader team and systems issues."

Navigating Unexpected Highly Emotional Reactions or Cases:

Eg: "Thank you all for wanting to debrief today, however this appears to be an impactful case. I believe this would be better suited for a critical incident stress debrief. I will ask to have that arranged. EFAP is also available. So let's just take this time to pause and check in on one another making sure everyone has the supports they need before returning to work."

Normalizing and Validating:

Response after someone admits to feeling overwhelmed with a new skill.

Eg: "That's very understandable for anybody performing a skill for the first time. It can be incredibly overwhelming. That is a normal response. Thank you for being honest and sharing that."

When Running Overtime:

Eg: "Hey team, we're at time and need to wrap up. If anything was missed or you want to discuss more, please reach out afterward."



PAUSE:

If the CED involved a patient death, consider offering a brief pause to honor both the patient and the team's efforts.

Capturing Action Items:

 Please document and assign your action items within 24 hours

Follow-up May Occur Via:

- Team huddles
- PSLS or quality review
- Resuscitation committee
- Workplace health and safety

Additional Resources:

