

Clinical debriefing

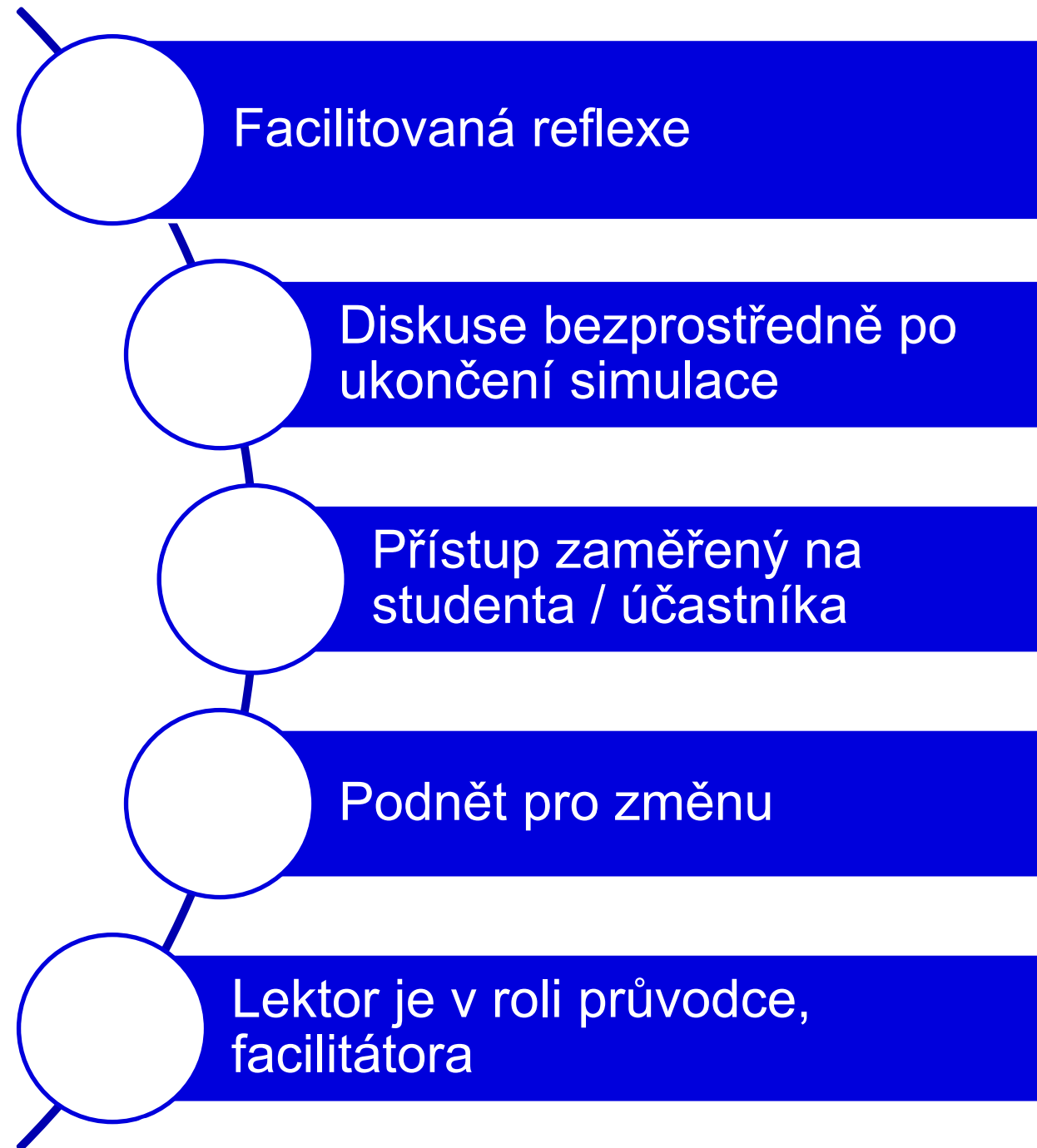
Co to je? Proč bychom to měli zkusit?

MUDr. Tereza Vafková

Ústav simulační medicíny LF MU

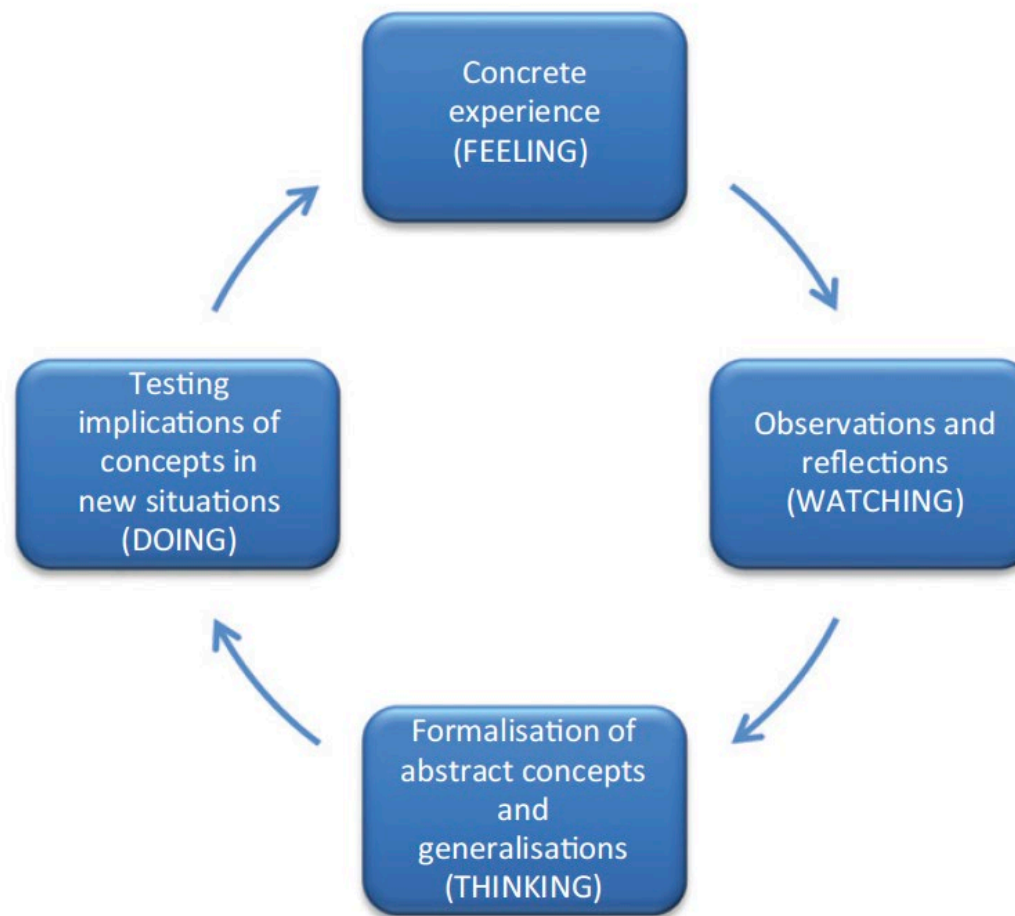
Klinika komplexní onkologické péče, Masarykův onkologický ústav

Co je to debriefing?



**Potřebujeme ale simulaci, abychom mohli
dělat debriefing?**

Z teorie výuky dospělých ...



Zmínky o klinickém debriefingu

Part 16: Education, Implementation, and Teams : 2010 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care
Farhan Bhanji, Mary E. Mancini, Elizabeth Sinz, David L. Rodgers, Mary Ann McNeil, Theresa A. Hoadley, Reylon A. Meeks, Melinda Fiedor Hamilton, Peter A. Meaney, Elizabeth A. Hunt, Vinay M. Nadkarni and Mary Fran Hazinski

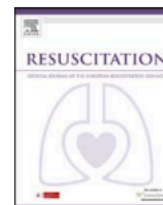
“Innovative concepts to reduce the decay of skills and knowledge may include continuous maintenance of competency programs that employ frequent short-duration interactions with content and skills after an initial course, or they may include **guided debriefings after real-life events that focus on response improvement.**”



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European Resuscitation Council Guidelines for Resuscitation 2010 Section 9. Principles of education in resuscitation

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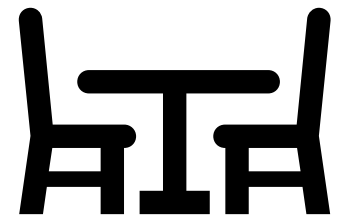
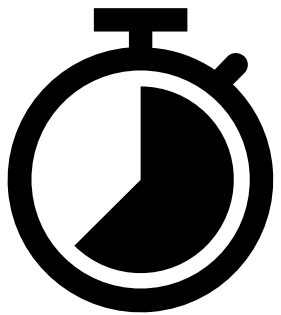
Team briefings and debriefings

Briefings and debriefings should be used during both learning and actual clinical activities.

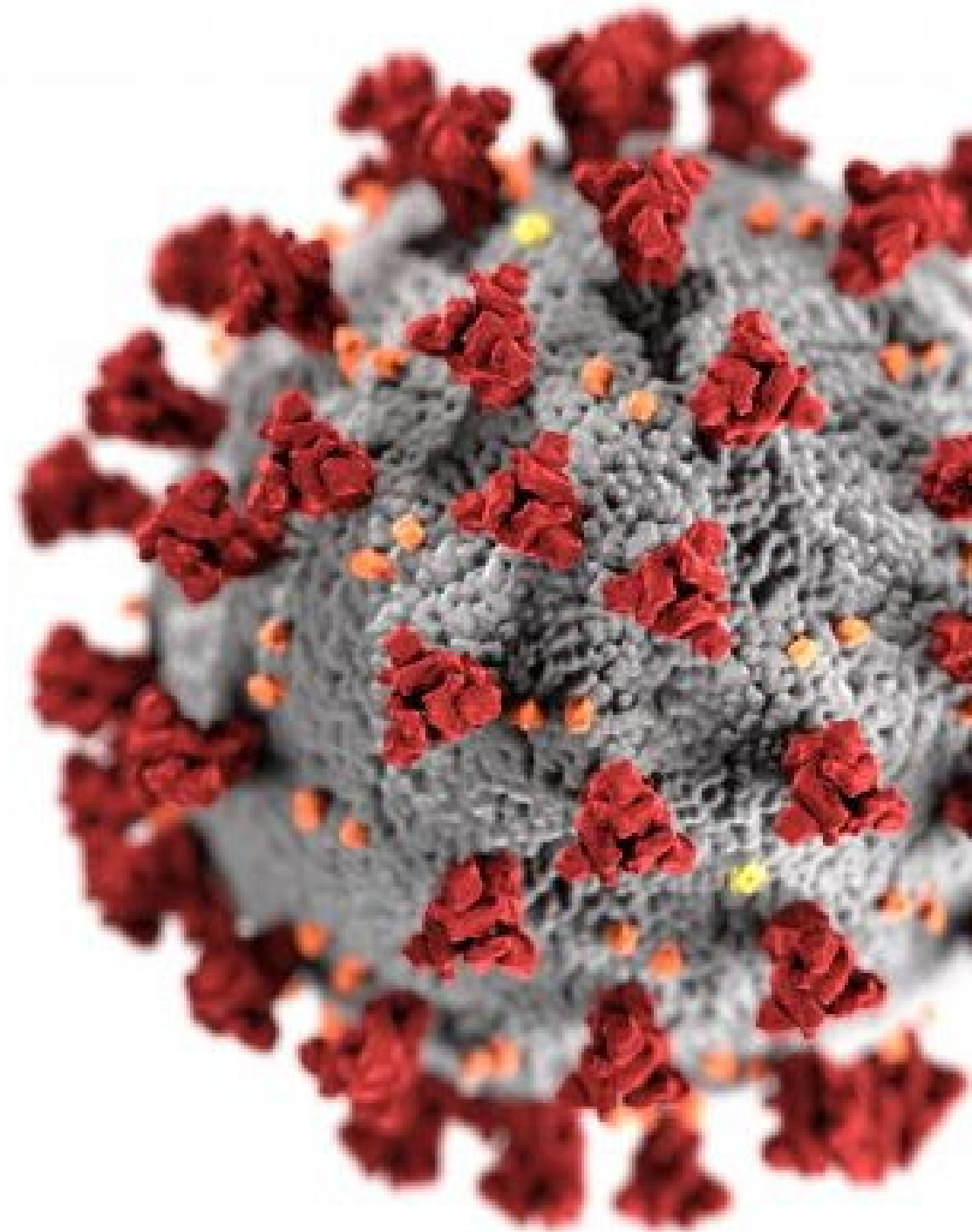
Successful teams such as sports teams meet before and after events. Surveys in the UK^{193,194} and Canada⁹⁰ show that resuscitation teams rarely have formal briefings and debriefings. Debriefings and feedback are two separate but related entities in that various forms of feedback are components of debriefing. Debriefing tends to be face-to-face and involves both parties engaging in discussion. Feedback tends to provide information about prior events and can use several methods (video recordings, defibrillator downloads or trained observer feedback). Debriefing appears to be an effective method for improving resuscitation performance and, potentially, patient outcomes as long as objective data forms the basis for the discussion.^{87,89,127,129,149,187,195–205} The ideal format for debriefing remains to be determined.

Máme na to doporučení, co tomu tedy brání?

*My to tady takhle děláme
odjakživa a na tohle
nemáme...*



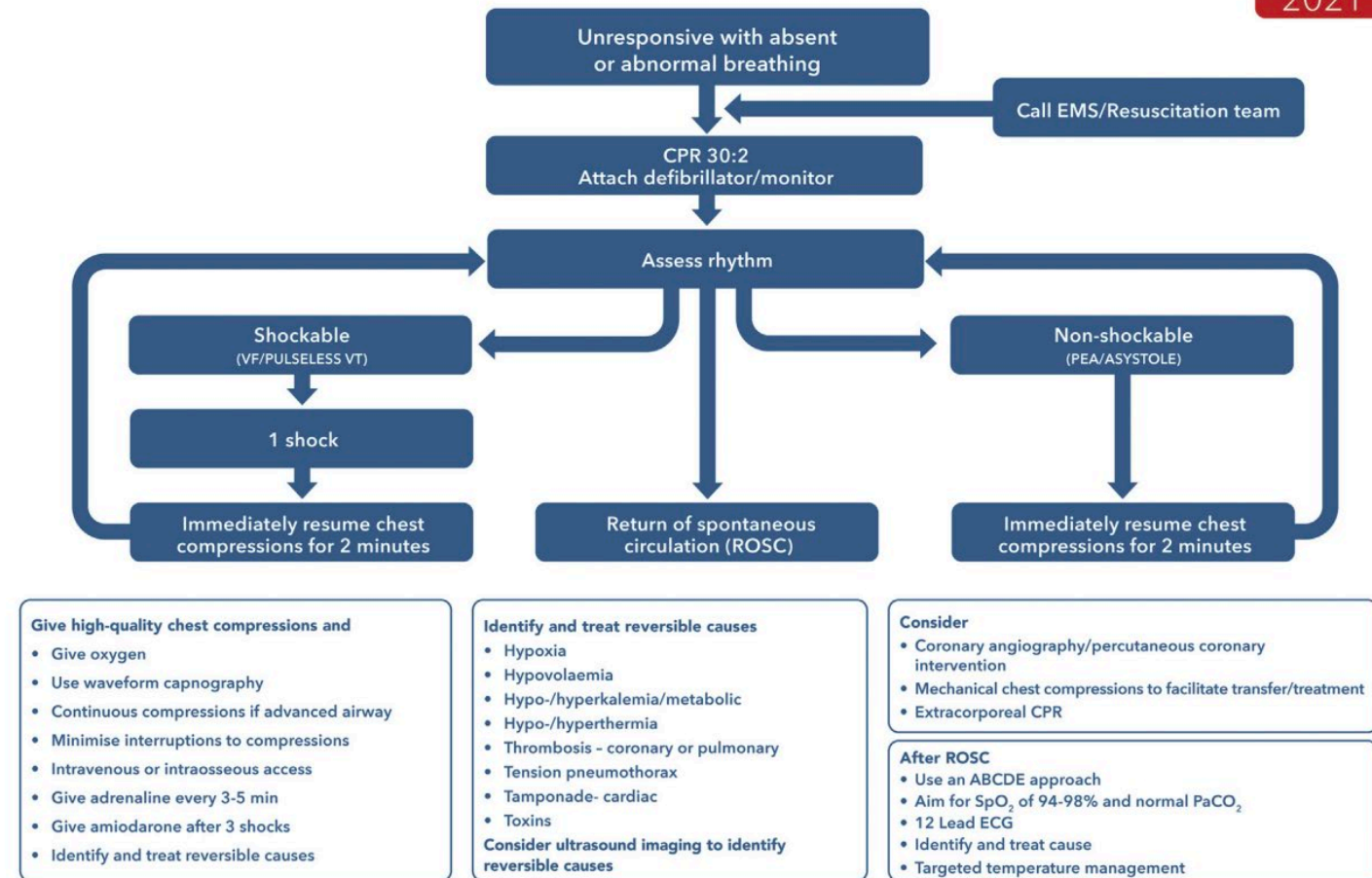
Co významně přispělo k rozvoji klinického debriefingu?



Klinický debriefing

Work as done
vs.
work as imagined

ADVANCED LIFE SUPPORT



Co může být triggerem?



- zástava oběhu
- dysfunkční interpersonální vztahy
- komunikačně náročný pacient, např. agresivní
- neočekávané úmrtí
- medická chyba

Změna na individuální, týmové nebo systémové úrovni, která povede k tomu, že až se příště objeví pacient se stejnými problémy, zvládneme situaci vyřešit lépe.

Kde začít?



- **Global aim** – Co chceme zlepšit?
 - Zlepšení CPR patient outcomes
- **SMART aims** – Jak konkrétně?
 - Zvýšit procento podání adrenalinu do 5 min u pacientů s IHCA s defibrilovatelným rytmem > 80 % do června 2023
- **Drivers** – Co obecně může přispět k dosažení daných cílů?
 - Brzké rozpoznání zástavy, týmová práce, leadership, včasné podání léků
- **Intervention** – Checklist možných konkrétních řešení
 - Přenastavení alarmů na monitoru (upozornění při bradykardii TF pod 60), měsíční in-situ simulační trénink zaměřený na aplikace IHCA checklistu, jasné označení teamleadera atd.

8 otázek, které bychom si měli zodpovědět

1. Co bude tzv. trigger event pro klinický debriefing?
2. Kdo ho bude facilitovat?
3. Kdo se ho bude účastnit?
4. Kdy proběhne?
5. Kde bude probíhat?
6. Co je naším cílem?
7. Jak to bude probíhat?
8. Jak budeme dokumentovat výsledky?

DO NOT PUT THIS SHEET INTO THE PATIENT'S CHART

Debriefing In Situ Conversation in Emergency Room Now (DISCERN) Form

INSTRUCTIONS for Debriefing Nurse to facilitate debriefing:

1. Fill out Pre-Debriefing questions #1 - #7 while waiting for other team members to arrive.
2. Once ready to start, state: "Debriefing is for quality improvement, educational, and emotional processing purposes. It is not a blaming session. Everyone is encouraged to participate. Anything you say here is legally protected from discoverability and will not be used to evaluate your performance. The team leader will start by reviewing our primary objective in this patient's care & then we as a team can answer some questions together."

PRE-DEBRIEFING

1. Place patient sticker (preferred)
or
MRN #: _____
or
LastName, FirstName: _____, _____
2. Today's date: _____
3. Members present ("x" if present):

<input type="checkbox"/> Charge Nurse (Unit)	<input type="checkbox"/> Doctor: Physician team leader
<input type="checkbox"/> Charge Nurse (Code)	<input type="checkbox"/> 2nd Doctor (Name): _____
<input type="checkbox"/> Nurse: Left	<input type="checkbox"/> ED Tech
<input type="checkbox"/> Nurse: Medication	<input type="checkbox"/> Social Worker
<input type="checkbox"/> Nurse: Right	<input type="checkbox"/> Other:
<input type="checkbox"/> Resident	<input type="checkbox"/> Other:
<input type="checkbox"/> Resp Therapist	<input type="checkbox"/> Other:
4. Patient type: Med-alert Med Alert-PICU (invite ICU:8038)
5. Our team performed: Intubation CPR No CPR & No intubation
6. MD Lead Last Name: _____ (Role: Facilitate debrief)
Debriefing RN Last Name: _____ (Role: Lead & document debrief)
7. Debriefing Location: Code Bay / Crisis Room (preferred location)
 Other --> _____

DEBRIEFING

1. Start Time: _____
"Will the team leader please state our primary objective for this patient's care?"
2. What went well to help us achieve our objective for this patient's care?

3. Were we able to establish vascular access in the 1st 2 minutes? NO YES IV/IV-Already-placed
4. How could we have decreased the time to establish access? (Skip if "IV/IO already placed" above)

5. Did the patient have CPR, SEIZURE, and/or INTUBATION in the ED?
YES? --> Proceed to #6 questions on **back** side of this form before proceeding to #7 below
NO? --> Proceed to #7 below
6. Was the patient summary verbalized in the first 5 minutes of care? NO YES
7. Was the patient summary verbalized at least once more after the 1st 5 minutes of care? NO YES
8. Were there any medication or equipment delays? NO YES--> _____
9. How could we have done anything else better in this patient's care?

10. If anyone would like to talk more about today's event, please contact the chaplain or social worker
11. End Time: _____ Do not put sheet into patient's chart, instead:
SZ --> "Completed Debriefing Forms" box between code bays. **UMC** --> box outside Paris' office

Take home message

- Jakákoliv situace v klinické praxi se může stát learning opportunity.
- Klinický debriefing může přispět ke zlepšení patient safety, quality improvement a well-beingu zdravotníků.
- Start small.

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