MDHHS Faculty Grant Training
INASCL Best Practices in Debriefing
Summer 2021

Faculty Training Objectives

- Identify simulation best practices from the International Association for Clinical Simulation and Learning (INACSL) on debriefing

- Apply INACSL best practices of debriefing in Virtual Reality (VR) scenarios.

INASCL Best Practices: Debriefing

1. Facilitator is competent in debriefing.

2. Environment is conducive to learning with confidentiality, trust, open communication, self-analysis, feedback and reflection.

3. Facilitator gives concentrated attention to the simulation in order to effectively debrief.

4. Debrief is structured, purposeful and based upon theory.

5. Debrief aligns with objectives and outcomes of the simulation.

(INASCL Standards of Best Practice : Simulation Debriefing, 2016)

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Criterion 1

The debrief is facilitated by a person(s) competent in the process of debriefing.

Criterion 2

The debrief is conducted in an environment that is conducive to learning and supports confidentiality, trust, open communication, self-analysis, feedback, and reflection.

Criterion 3

The debrief is facilitated by a person(s) who can devote enough concentrated attention during the simulation to effectively debrief the simulation-based experience.

Criterion 4

The debrief is based on a theoretical framework for debriefing that is structured in a purposeful way.

Debriefing Frameworks

GAS: Gather, Analyze, Summarize

Debriefing with Good Judgement

Debriefing for Meaningful Learning

3D Model of Debriefing

OPT Model of Clinical Reasoning

Plus Delta

PEARLS

MDHHS Grant Debriefing Framework

Debriefing Framework Tool

Debriefing Phases[1]	Yes/No	Notes
• Create a **safe** and respectful environment • All participants understand confidentiality		
Reaction Phase **(Experience and Impact)**		
Participants are given time to **vent** Encourage to share experiences and views • What were your impressions of the simulation experience?		
Acknowledge, support and encourage discussion of **emotions** • How did you feel? • How did you feel about the team's performance?		
Analysis Phase **(Recollection)**		
Major events are **deconstructed**: • What happened? • What was done well? • What could have been better? Discuss - roles - equipment - identification of problem - communication (timing, information)		
Promote **reflection** by: • Use of video playback been used to prompt discussion and reflection • Foster self-reflection		
Consolidation Phase **(Integration and Closure)**		
Application of learning • Relevance • What has been learned • Transfer to clinical settings • What if anything would you change / do differently? (own practice/work environment) • Revisit emotions • Lessons learnt • New goals		

- **Scripted tool for facilitators to use in debriefing**
- **Three phases exploring the simulation experience with participants**

Gum, L., Greenhill, J. & Dix, K. (2012)

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Criterion 5

The debrief is congruent with the objectives and outcomes of the simulation-based experience.

References

- Gum, L., Greenhill, J., & Dix, K. (2011). Sim TRACT™: A reflective conceptual framework for simulation debriefing. *Journal of Transformative Education 9*(1). 21-41.

- INACSL Standards Committee (2016, December). INACSL standards of best practice: SimulationSM debriefing. *Clinical Simulation in Nursing, 12*(S), S21-S25.http://dx.doi.org/10.1016/j.ecns.2016.09.008.

- Kidd, M. (2018). *Implementation of a scripted debriefing tool in simulation-based nursing.* (DNP scholarly project). https://commons.nmu.edu/cgi/viewcontent.cgi?article=1015&context=dnp.

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