

Debriefing: Tell it like it is?

Debriefing a term that faculty and coaches use to describe a technique in guiding the student to the correct way of completing a task in the care of a patient. In looking for other definitions to further describe debriefing, the word can be found in the Merriam Webster dictionary as “to officially question (someone) about a job that has been done or about an experience. (Merriam Webster, n.d.). In Standards of Best Practices: Simulation Standard IV: The Debriefing Process, Decker et al. (2013) stated, “Debriefing promotes understanding and supports transfer of knowledge, skills, and attitudes with a focus on best practices to promote safe, quality patient care.” (p. S27).

The accelerated students are placed with coaches to mentor and observe them in the clinical setting. This gives the coach excellent opportunity to work with the student one on one. After observation of a task the coach is able to pull the student aside and discuss the completed task. The coach or faculty further supports the student in discussing some of the good things or correct techniques that were observed and provide a follow up on some tips on how to do certain tasks or technique better. For example, the coach may describe the task providing proper, easier, and safer methods for the patient. Debriefing at times can seem cumbersome with the frustration of the procedure and other elements playing a part of the learning environment, including patient demands, peer demands or staying on task/schedule. Therefore, simply blurting out the failed items in front of others can cause hard feelings. This manner of debriefing will eventually break down the team atmosphere, delaying a chance for the student to build on the skill or technique recently completed. Debriefing should occur right after the completion of a procedure,

outside of the patient’s room with just the coach and student discussing the procedure. This should occur in a timely manner, with feedback from each participant being able to speak, sharing their experience, opportunity to ask questions and give answers.


Reflection is considered part of debriefing, allowing the student to reflect on their technique or skill in the debriefing process. The student will at times during reflection state that they missed a step or wish they knew how to complete the skill/technique in a better way. This further opens the door in communication allowing the Coach or Faculty to debrief the student in the skill or technique, giving supporting information or further education as to evidenced base practice or the reasoning in why the skill and/or technique is performed in a certain way. Reflection during debriefing also allows the student to further assess and determine the reasons for their actions. Students allowed time to reflect and discuss the experience learn from their mistakes as well as mistakes of others, enhances the learning process. By identifying such mistakes, faculty and coaches may provide further support the student’s clinical reasoning and education of the skill or technique.

Coaches that practice debriefing or reflection experience a student that will flourish in the clinical setting, seeking opportunities to learn more and providing well educated clinicians.

References:

Decker, S., Fey, M., Sideras, S., Caballero, S., Rockstraw, L. (R.), Boese, T., Franklin, A. E., ...& Borum, J.C., (2013). Standards of Best Practice: Simulation Standard VI: The Debriefing Process. *Clinical Simulation in Nursing* 9 (6), S26 – S29. DOI: <http://dx.doi.org/10.1016/j.ecns.2013.04.008>

Merriam Webster Dictionary (n.d.) Definition of Debriefing Retrieved from <https://www.merriam-webster.com/dictionary/debrief>.




COACH TO COACH


"Coaching and adding tidbits of information, provides the student cues in which direction to go and to improve in their clinical experiences. I enjoy discussing tasks with the students."

-Terri Smith, RN
BSA Emergency Room Amarillo, TX

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SECOND SEMESTER COURSE INFORMATION & CLINICAL FOCUS




Summer Semester Course Timeline:

Summer 2017-18 credits 5/23-8/11	5/21	5/28	6/4	6/11	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6
3385 (5/23-8/7) Chronic Care												
3520 (5/23-8/11) Chronic Care Clinical												
4411 (5/23-7/1) Mental Health						ATI Exam						
4207** (6/4-7/29) Pharmacology II										ATI Exam		
3407 (7/2-8/11) Perinatal Nursing												ATI Exam

Holiday: Independence Day – 7/4

Mark Your Calendar:

- May 5th- Final evaluation due, clinical checklist completed, & minimum of 225 clinical hours complete
- May 23rd- First clinical day of the summer semester
- June 30th- Mid-Term evaluation, ½ of clinical checklist, and 100 clinical hours due
- July 4th- Holiday
- August 11th- Final evaluation, clinical checklist, and a minimum of 225 clinical hours due



Current Clinical focus:

- Building on the foundational concepts from Spring Semester
 - Safety
 - Medication administration
 - Communication
 - Assessment
 - Professionalism
- Chronic disease pathophysiology
 - Integumentary
 - Respiratory
 - Hematologic
 - Cardiovascular
- Management of the chronic disease processes
- Health promotion
- Incorporation of laboratory and diagnostic tests into patient care
- Interprofessional Teamwork
- Increasing efficiency in patient care as load increases
- Prioritization of care

THANK YOU FOR YOUR CONTINUED SUPPORT AND DEDICATION TO OUR PROGRAM AND PROFESSION