Attendance QR Code







School of Medicine



LSU School of Medicine Faculty Development Committee
Presents

Teaching Tune-Ups

Workshops Designed to Fuel Your Journey
Live Activity



 Accreditation: The Louisiana State University School of Medicine, New Orleans is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

• AMA Credit Designation Statement: The Louisiana State University School of Medicine, New Orleans designates this live activity for a maximum of 1 AMA PRA Category 1 CreditTM. Physicians should claim only the credit commensurate with the extent of their participation in the activity.



Disclosures

LSUSOMNO ensures balance, independence, objectivity, and scientific rigor in all of its educational activities. Faculty, planners or anyone in a position to control content are required to disclose to participants any financial relationships they may have had with ineligible companies/organizations within the last 24 months, including inkind donations. An ineligible entity is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by or used on patients. Disclosure of financial relationships must be made during the planning stages of the activity, and all relationships thus disclosed are communicated to the audience prior to the activity.

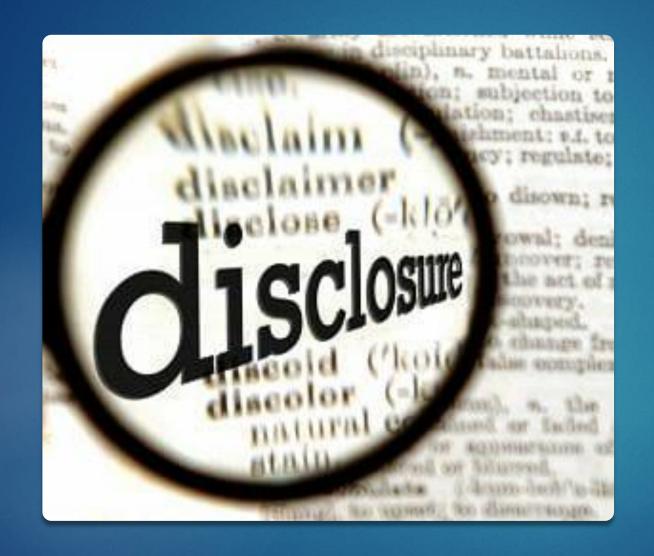
The following presenters, planners and authors of the educational content of this activity have reported they have **no financial relationships** with ineligible entities:

Peter DeBlieux, MD, Rachel Fiore, PhD, Daryl Lofaso, RRT, PhD, Laura J. Bell, Chris Carter, Ashley Walker, Lee Engel, MD, PhD



Debriefing in Clinical Education Not Just for Simulation -Bedside Pearls

DARYL P. LOFASO, PHD, PETER DEBLIEUX, MD, AND RACHEL FIORE, PHD



Disclosures

Learning Objectives

- Describe structured debriefing techniques to enhance reflective learning and performance improvement.
- Reflect on strategies to translate lessons learned into actionable changes for future patient care.
- Engage learners in self-assessment and analysis by identifying personal strengths and areas for improvement during debriefing sessions.
- Practice implementing the modified GAS model utilizing role playing activity.

Debriefing

- Debriefing plays an integral role in medical training.
- Debriefing strategies are based on learner types, objectives, and setting.
- Proper debriefing leads to meaningful learning through reflection.
- Debriefing Duties: Make it Safe, Make it Stick, Make it Last.

GAS Model for Debriefing



- G Gather: Actively listen to the learner's perspective
- A Assess: Obtain feedback and facilitate reflection
- S Summarize: Identify and review lessons learned

"Code Blue"

Pre-Briefing

- Clarifying expectations and ground rules
- Informing participants about the feedback process
- Orienting to the environment
- Discussing the objectives of the video



Video 1: "Code Blue"

"Code Blue"

Review and Comments

- G Gather: Actively listen (Learner's perspective)
- A Assess: Obtain feedback.
 Facilitate participants' reflection.
- S Summarize: Identify and review lessons learned.

"Department Meeting"

Pre-briefing

- Clarifying expectations and ground rules
- Informing participants about the feedback process
- Orienting to the environment
- Discussing the objectives of the video



Video 2: "Department Meeting"

"Department Meeting"

Review and Comments

- G Gather: Actively listen (Learner's perspective)
- A Assess: Obtain feedback.
 Facilitate participants' reflection.
- S Summarize: Identify and review lessons learned.

Debriefing

- Clarify what occurred during the event (Lab, Bedside, Sim)
- Facilitates learners' identification of areas of concern / learning gaps
- Present area of study for critical thinking / strategies for improving them
- Offer correct information, missteps, and/or misinterpretations

AHA Center for Health Innovation: https://www.aha.org/center/project-firstline/teamstepps-video-toolkit/debrief

Role of Structured and Supported Debriefing

- Structured
 - Clear expectations delivered
 - ► Goal and objective driven
 - Action-based
 - ► Time bound
 - ► Facilitator guided



Role of Structured and Supported Debriefing

- Supported
 - Evidence-based
 - Protocols/algorithms/skills checklist
 - Qualify the Affective
 - Professionalism
 - **Communication**
 - Interpersonal Support & Trust



Debriefing Phase	Elements	Facilitator Suggestions	Don't
Intro before training and/or beginning of Debriefing	 How training will run Ensure safe environment Review general objectives Set expectations of self-reflection 	 The training will run 15 minutes, then we will debrief for 20 minutes "Not meant to trick or criticize" "Mistakes are helpful for learning – this is a safe setting to make them" 	 Be vague about expectations, purpose, ground rules.
Discussion	 G - Gather How do you feel? How do you think it went? Can you tell me what happened? A - Analyze I noticed Tell me more about Tell me what were you thinking when I understand, can you tell me more about "x" Think - Pair - Share 	 "What went well?" "What could you have done differently?" "I'm curious to find out your thought process when you did/said that" How did the team do? How was team communication? 	 Lecture Tell them what to do before self-reflection Say "What were you thinking?" Show excess criticism or negativism
Closure	 S - Summarize Identification & review of lessons learned Describe two areas that you think you need to work on Safety - How do we take care of the next patient safer? 	 Summary/wrap-up comments This is what you think went well This is what you think needs work What knowledge did you gain? 	 Lecture Target too many learning points Show excess criticism or negativism

Facilitator Suggestions

Pre-Brief

- The training will run 15 minutes, then we will debrief for 20 minutes
- "Not meant to trick or criticize"
- "Mistakes are helpful for learning this is a safe setting to make them"



G – Gather

A – Analyze

- "What went well?"
- "What could you have done differently?"
- "I'm curious to find out your thought process when you did/said that"
- How did the team do?
- How was team communication?

S – Summarize

- Summary/wrap-up comments
- This is what you think went well...
- This is what you think needs work...
- What knowledge did you gain?

Facilitator Do's in Debriefing

- Creating a friendly, safe, and confidential learning environment
- Communicating clear expectations
- Encouraging questions and facilitate reflection and self-appraisal/critique
- Reinforcing principles that are paramount to the experience

Creating an Oasis



Facilitator Do's in Debriefing

- Preparing to emphasize the essential education points to accomplish, learning objectives
- ▶ Balancing positive reinforcement and critique
- Giving specific and timely feedback that promotes learning and engagement
- ▶ Using time wisely in the debriefing discussion

Don'ts



Facilitator Don'ts in Debriefing

- Omitting or providing unclear explanations of the purpose, learning objectives, ground rules.
- Lecturing to learners instead of engaging them in selfreflection and interactive discussion
- Emphasizing closed-ended questions
- Using excessive criticism or negativity regarding performance and knowledge

Facilitator Don'ts in Debriefing

- Not attending to and appreciating learners' emotions/feelings in the experience
- ► Targeting too many "learning points"
- ▶ Being overbearing or moralistic instead of facilitation
- When in learning Focusing on environmental limitations, instead of using the experience as a stimulus or trigger for enhancing learning and real-life application

Cases

- Pre-Briefing
 - Three cases scenarios
 - Pair-sharing with Recorder/Reporter 3 people per Group
 - Debriefing process applying GAS Model

Group Work

Cases



Case Review and Comment

- ▶ Debriefing Report Out:
 - Case Scenario 1
 - Case Scenario 2
 - Case Scenario 3

Case 1: Lab Error

It's Monday at the lab. Over the weekend, the lab technician failed to change the pipette between applications of a reagent, destroying the utility of the cell lines in an ongoing experiment.

Role 1: Lab technician

Role 2: Lead investigator

Role 3: Recorder/reporter

Case 2: Bad News

We're in an oncology residency program. A patient just had a conversation with their primary care doctor (resident), wherein the resident did a poor job of telling the patient about their grim prognosis. The oncologist was in the doorway and witnessed the conversation.

Role 1: Oncologist

Role 2: Primary Care MD/Resident Role 3: Recorder/reporter

Case 3: Department Meeting

The department meeting in the university just ended and faculty are returning to their sections. The department sections have been experiencing some difficulties getting on the same page recently, and tensions were high during the meeting.

Role 1: Section chief

Role 2: Faculty member

Role 3: Recorder/reporter

Follow Up:

- Recognition of Safe
 - **Patient**
 - Provider
 - Employee
- Professionalism



Summary - Debriefing

- Debriefing plays an integral role in medical training.
- Debriefing strategies are based on learner types, objectives, and setting.
- Proper debriefing leads to meaningful learning through reflection.
- > Debriefing Duties: Make it Safe, Make it Stick, Make it Last.

Questions?







Learning Center Debriefing Tool

Pre-Briefing Checklist

Focus on identifying and discussing key insights, or lessons learned during the simulation session. Facilitators guide learners through a structured discussion aimed at:

- Clarifying expectations (Treat simulation as a real patient) and ground rules (Safe learning space using near real-time patient interaction).
- Reviewing learning objectives and pre-work.
- · Informing participants about the evaluation process.
- Orienting to the environment: space, equipment/supplies, simulator, patient simulator, and environmental limitations.
- Discussing the level of detail, goal, and/or objectives of the simulation.
- Outlining available resources. (Technology, booklet, pocket guide, etc.)
- Assigning participant roles.

GAS Debriefing Method Overview

 G – Gather: Actively listen to participants to understand what they think and how they feel about the session – "self-reflection."

Learner perspective

- How do you feel?
- How do you think it went?
- Can you tell me what happened? —
- A Analyze: Provide feedback on performance. Facilitate participants reflection on, and analysis of their actions. Investigate basis for perceptions and performance gaps.
 - I noticed
 - · Tell me more about.....
 - · Tell me what were you thinking when.....
 - · I understand, can you tell me more about "x".....
 - · Think Pair Share (Think individually, collaborate, & present their ideas)
- S Summarize Facilitate identification and review of lessons learned and tie back to objectives. Identify positive aspects of session. Discuss behaviors that require change. Summarize session.
 - List two actions that you felt were effective or went well
 - . Describe two areas that you think you need to work on (Need to Know)
 - · Safety How do we take care of the next patient safer?

"Take away" - List one or more thing you plan to implement in future patient encounters?

References:

- AHA Center for Health Innovation: https://www.aha.org/center/project-firstline/teamsteppsvideo-toolkit/debrief
- Wilson, L. and Wittmann, R. (2023). Certified Healthcare Simulation Educator (CHSE®) Review: Comprehensive Review, PLUS More Than 350 Questions Based on the Latest Exam Blueprint. Springer Publishing.
- Cheng, A., Grant, V., Dieckmann, P., Arora, S., Robinson, T., & Eppich, W. (2015). Faculty development for simulation programs: five issues for the future of debriefing training. Simulation in Healthcare, 10(4), 217-222.
- Abulebda, K., Auerbach, M., & Limaiem, F. (2019). Debriefing techniques utilized in medical simulation.

Evaluation QR Code



