

Supplemental Information

Medical Behavioral Unit Event Debriefing

Guide for Hot Clinical Event Debriefing¹

CHOP Post-Event Care Review

This information is privileged and confidential; peer review work product

Advice for team debriefing:

1. Try to find a quiet, isolated place. Anyone present during the event may lead the debriefing. Debriefing leader should start by thanking team members for being present.
2. State "The purpose of debriefing is to improve the quality of medical care by unit providers; it is not a blaming session. Everyone's participation is welcome and encouraged."
3. State "We will briefly review the patient's summary and then we can discuss what went well and what could have gone better. Please feel free to ask any questions."
4. State "All information discussed during the debriefing is confidential."
5. Please limit debriefing to 10 minutes.

Fill out this section PRIOR to the debriefing	Fill out this section DURING the debriefing (best if different person than person leading the debriefing)																
<p>Patient medical record number _____ Date of event: _____ Date of debriefing: _____ Staff leading debriefing: _____ Staff recording debriefing: _____ If debriefing did not occur please indicate why:</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Time constraints</td> <td><input type="checkbox"/> Other patient care issue</td> </tr> <tr> <td><input type="checkbox"/> Team declined</td> <td><input type="checkbox"/> Team dispersed</td> </tr> <tr> <td><input type="checkbox"/> Team changed</td> <td><input type="checkbox"/> Other: _____</td> </tr> </table> <p>Event type (circle all that apply): Medical Behavioral Physical hold Restraint</p> <p>Brief description of event(s) (include unsafe behavior): _____</p> <p>Did multiple disciplines respond to the event? Yes No</p> <p>Was security needed to respond to the event? Yes No</p> <p>Did anyone get injured in the event? Yes No (If yes, charge nurse to complete tier 1 survey after debrief)</p>	<input type="checkbox"/> Time constraints	<input type="checkbox"/> Other patient care issue	<input type="checkbox"/> Team declined	<input type="checkbox"/> Team dispersed	<input type="checkbox"/> Team changed	<input type="checkbox"/> Other: _____	<p>1. Debriefing start time: _____</p> <p>2. What went well during our care for the patient? Why? <i>Please select all that apply and add comments as necessary.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Medical care</td></tr> <tr><td>Team work</td></tr> <tr><td>Communication</td></tr> <tr><td>Leadership</td></tr> <tr><td>Other (please specify):</td></tr> </table> <p>3. What could have improved during our care for the patient? What are potential solutions? <i>Please select all that apply and add comments as necessary.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Medical care</td></tr> <tr><td>Team work</td></tr> <tr><td>Communication</td></tr> <tr><td>Leadership</td></tr> <tr><td>Other (please specify):</td></tr> </table> <p>4. Was there a clear team leader and 1 voice? Yes No</p> <p>5. What emotions/ reactions are people experiencing after this event?</p> <p>6. Debriefing end time: _____</p> <p>Confidential document pursuant to the MCare Act and the Pennsylvania Peer Review Protection Act, 63 P.S. 425.1 et.seq. and HCQI Act, 1986. If anyone requests referral for free counseling, please provide EAP information: Support Linc 1-800-749-6327</p>	Medical care	Team work	Communication	Leadership	Other (please specify):	Medical care	Team work	Communication	Leadership	Other (please specify):
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Take Aways/ Action Steps:

Summary of debriefing to be emailed to [unit email list]²

¹ This guide was adapted from Mullan's published DISCERN tool (Mullan et al, 2013; Ref. 2).
² Email summaries sent with language stating that contained information is protected by MCare Act cited above. This process was developed in partnership with Risk Management.

SUPPLEMENTAL FIGURE 1 Facilitative guides for CED in the MBU guide for hot CED. This guide was adapted with permission from Mullan PC, Wuestner E, Kerr TD, Christopher DP, Patel B. Implementation of an in situ qualitative debriefing tool for resuscitations. Resuscitation. 2013;84(7):946–951. Summary of debriefing to be e-mailed to unit e-mail list. E-mail summaries sent with language stating that contained information is protected by the MCare Act cited above. This process was developed in partnership with risk management. EAP, employee assistance program.

Guide for Cold Clinical Event Debriefing (*Weekly unit team meeting*)

<p>Objective: Provide a forum for discussion and education surrounding patients residing in the Medical Behavioral Unit for >1 month with minimal acute inpatient goals. Develop long-term goals to meet the needs of these patients that are realistic for this setting. Create a forum for healthy discussion around expectations for these patients, noting their BH needs, while in the acute setting.</p>	<p>DATE:</p>		<p>Leader: Minutes: Attendees:</p>	
<p>Individual Patient Discussion</p>	<p>NOTES Regarding current plan, progress, plan changes, long-term concerns.</p>			
<p>Questions to Prompt Discussion</p>				
<p><i>What is the overall goal of admission?</i></p>				
<p><i>What is working well? Not as well?</i></p>				
<p><i>How does the patient's primary diagnosis impact the treatment plan/behavior plan?</i></p>				
<p><i>What would this patient's ideal treatment look like, and what can we feasibly do?</i></p>				
<p><i>To what end...? Do we have realistic treatment goals?</i></p>				
<p><i>What interpersonal feelings do we have that may be impacting ideal care?</i></p>				
<p><i>What does the team need to care for this patient?</i></p>				
<p><i>Are we following our team and unit best practices?</i></p>				
<p><i>Are we supporting one another in caring for this patient?</i></p>				

SUPPLEMENTAL FIGURE 2 Guide for CED (weekly unit team meeting). BH, behavioral health.

INTERVIEW GUIDE

1. To begin, could you please describe for me what the debriefing was about?
 - a. Probe: please walk me through how the debriefing unfolded. What happened first? Next? Next?
2. What aspects of the debriefing did you find helpful?
 3. What aspects of the debriefing did you not find helpful?
 4. Were there things left unsaid in the debriefing that you would have liked to discuss? Please describe them.
 5. What changes do you anticipate making in your own behavior as a result of the debriefing?
 - a. What might affect your ability to make those changes?
 6. What changes do you anticipate will occur in the unit and/or hospital as a result of the debriefing?
 - a. What might affect the unit's and/or hospital's ability to make those changes?
 7. If you could change anything about the debriefing process, what would that be?