# How Close Are Interprofessional Debriefers to Meet the INACSL Standards of Debriefing Practices? A Qualitative Study

## Mesleklerarası Eğiticiler INACSL Çözümleme Uygulaması Standartlarını Karşılamaya Ne Kadar Yakın? Nitel Çalışma

*Kevser Özata\* (ORCID: 0000-0001-6649-8962)*

*Büşra Caz\*\* (ORCID: 0000-0002-2766-9930)*

*Şenay Sarmasoğlu Kılıkçıer\*\*\* (ORCID: 0000-0001-9220-5959)*

*\*Hacettepe University Faculty of Nursing, Ankara, TÜRKİYE*

*\*\*Ankara Medipol University Faculty of Health Science, Ankara, TÜRKİYE*

*\*\*\*Mudanya University Faculty of Health Scıences, Bursa, TÜRKİYE*

Corresponding Author: Kevser ÖZATA, E-Mail: kevserozata@hacettepe.edu.tr

**Abstract**

**Aim:** This study aims to determine whether the debriefings performed by different health professions for nearly a decade meet the INACSL standards of best debriefing practices.

**Methods:** In order for learning to occur in simulation, there must be a adequate debriefing session. An adequate debriefing should be based on the criteria described in the standards of best practices published by the International Nursing Association for Clinical Simulation and Learning (INACSL). A high quality, adequate, and effective debriefing must be carried out in accordance with each standard.

**Results:** Most of the debriefers are female. Over half had two years or less experience with simulation, and a quarter had training in simulation or debriefing. The results are presented in five contexts (Competent Debriefer, Environment, Effective Debriefing, Theoretical Framework, and Objectives and Outcomes.), which conform to the four standards covered by the INACSL standards of best practices.

**Conclusions:** Except for the feedback, the debriefings do not meet the INACSL standards of best practices. However, the debriefers are aware of the importance of debriefing and are willing to improve their skills. Most of the debriefers have learned debriefing from observation or the literature. With this study, it was ensured that debriefers gained awareness in terms of INACSL standards. At the same time, this study will also provide awareness about the standards for the literature.

***Özet***

***Amaç:*** *Bu çalışma, yaklaşık on yıldır farklı sağlık meslekleri tarafından gerçekleştirilen çözümlemenin INACSL çözümleme standartlarını karşılayıp karşılamadığını belirlemeyi amaçlamaktadır. Simülasyonda öğrenmenin gerçekleşebilmesi için yeterli bir çözümleme oturumu yapılmalıdır. Yeterli bir çözümleme, Uluslararası Klinik Simülasyon ve Öğrenme Hemşirelik Derneği (INACSL) tarafından yayınlanan en iyi uygulama standartlarında açıklanan kriterlere dayanmalıdır. Her bir standarda uygun olarak yüksek kaliteli, yeterli ve etkili bir çözümleme yapılmalıdır. Simülasyonda*

öğrenmenin gerçekleşebilmesi için yeterli bir çözümleme oturumu yapılmalıdır. Yeterli bir çözümleme, Uluslararası Klinik Simülasyon ve Öğrenme Hemşirelik Derneği (INACSL) tarafından yayınlanan en iyi uygulama standartlarında açıklanan kriterlere dayanmalıdır. Her bir standarda uygun olarak yüksek kaliteli, yeterli ve etkili bir çözümleme yapılmalıdır.

**Yöntem:** *Tanımlayıcı nitelikteki bu nitel tasarım araştırmasının örneklemini on iki çözümleme yapan eğitici oluşturmaktadır. Yöntem: Betimsel niteliksel tasarımlı bu araştırmanın örneklemi on iki eğiticiden oluşmaktadır.. Çözümleyiciler, Eczacılık Fakültesi (n = 3), Hemşirelik Fakültesi (n = 1), Sağlık Bilimleri Fakültesi (n = 8) Beslenme ve Diyetetik Bölümü (n = 3), Çocuk Gelişimi Bölümü (n = 2), Dil ve Konuşma Terapisi Bölümü (n = 1), Fizyoterapi ve Rehabilitasyon Bölümlerinde (n = 2) eğitim veren öğretim elemanlarıdır. Veriler yüz yüze görüşmeler yoluyla toplanmış ve betimsel analiz yöntemi kullanılarak analiz edilmiştir.*

**Bulgular:** *Çözümleme yapan eğiticilerin çoğu kadındır. Yarısından fazlası simülasyon konusunda iki yıl veya daha az deneyime sahiptir ve dörtte biri simülasyon veya çözümleme konusunda eğitim almıştır. Sonuçlar, INACSL en iyi uygulamalar standartlarının kapsadığı dört standarda uygun beş bağlamda (Yetkin Bilgilendirici, Ortam, Etkili Bilgilendirme, Teorik Çerçeve ve Hedefler ve Sonuçlar) sunulmuştur.*

**Sonuç:** *Geri bildirim haricinde, çözümlemeler INACSL en iyi uygulamalar standartlarını karşılamamaktadır. Bununla birlikte, eğiticiler çözümlemenin öneminin farkındadır ve becerilerini geliştirmeye isteklidir. Eğiticilerin çoğu çözümlemeyi gözlemleyerek ya da literatürden öğrenmiştir. Bu çalışma ile eğiticilerin INACSL standartları açısından farkındalık kazanmaları sağlanmıştır. Aynı zamanda bu çalışma literatüre yönelik standartlar konusunda da farkındalık sağlayacaktır.*

## INTRODUCTION

As a teaching method, simulation allows students to learn through reflective thinking as a result of their active participation. Simulation essentially consists of three components: briefing, simulation, and debriefing (1,2). Debriefing is a student-centered and an interactive phase that offers students the opportunity to analyze, reflect on, and get feedback from the debriefer about their decisions, actions, and consequences of their actions in the simulation (3-6).

### Background

In a simulation, 80% of learning occurs during debriefing. However, efficient learning and achieving the desired gains are only possible with a well-structured debriefing (7,8). Moreover, structuring the debriefing leads to a more prepared and qualified flow (9,10) and contributes to improving the student's self-awareness and self-efficacy (11-14). The qualified debriefing links theory to practice and empowers students to think critically (15,16). The criteria for qualified debriefing are described in the standards of best debriefing practices published by INACSL (17). The standards of best debriefing practices consist of five important, main points:

(a) The debrief is facilitated by a person(s) competent in the process of debriefing. (b) The debrief is conducted in an environment that is conducive to learning and supports confidentiality, trust, open communication, self-analysis, feedback, and reflection. (c) The debrief is facilitated by a person(s) who can devote enough concentrated attention during the simulation to effectively debrief the simulation-based experience. (d) The debrief is based on a theoretical framework for debriefing that is structured in a purposeful way. (e) The debrief is congruent with the objectives and outcomes of the simulation-based experience (18).

A high quality, adequate, and effective debriefing must be carried out in accordance with each standard. Kolbe et al. (2015) reported that when the standards are not met, debriefing may fail: problems may occur in achieving desired goals, realizing effective learning, or performing desired behavioral changes (13). Furthermore, Der Sahakian et al. (2015) stated

that a poorly structured debriefing might lead to a disturbing and traumatic experience for the participants (19).

The research found in the literature has already studied the effects of debriefing, the comparison of the different types of debriefing, and its effects on patient/student groups with varied features (20,12,21,22,23). However, there is only a very limited number of studies evaluating whether debriefings meet the standards (7,24,25). One of these studies was conducted qualitatively by Mariani et al. (2014) to determine trainers' views/experiences about a debriefing (7). Another one is Waznonis' (2015) study, with a mix-method design, to explain the debriefing process in nursing education in America (25). In the literature, the number of studies evaluating the quality of debriefing in simulation is too limited to reveal the circumstances under which it was conducted. This study aims to determine whether the debriefings performed by different health professions for nearly a decade meet the INACSL standards of the debriefing process.

## METHODS

### Study Design

A descriptive phenomenological design was used in this qualitative research to gain a deeper understanding of how close debriefers are to meeting the standards of best debriefing practices published by INACSL (26). For structuring and reporting this study, Standards for Reporting Qualitative Research (SRQR) (27) and Consolidated Criteria for Reporting Qualitative Research (COREQ) checklists were used (28).

### Setting

This study was conducted within the scope of the Patient Safety and Interprofessional Collaboration Course in the undergraduate program in the School of Medicine at a state university in Turkey. This course was implemented in 2013–2014 to achieve the objectives of medical students gaining knowledge about patient safety and interprofessional collaboration and learning their roles and responsibilities as healthcare providers. The course is carried out with the participation of educators from different health professions. This course was one of the first examples of interprofessional education of health professionals in Turkey (http://www.medinfo.hacettepe.edu.tr/images/HG&MI_ic_2017_intro.pdf) (29,30).

### Participants

The research population consisted of 12 debriefers that debriefed within the Patient Safety and Interprofessional Collaboration Course scope planned by the Faculty of Medicine, Department of Medical Education and Informatics in the fall semester of the 2018–2019 Academic Year. Debriefers were faculty members of the Faculty of Pharmacy (n = 3), Faculty of Nursing (n = 1), Faculty of Health Sciences (n = 8) [(Department of Nutrition and Dietetics (n = 3), Department of Child Development (n = 2), Department of Language and Speech Therapy (n = 1), Department of Physiotherapy and Rehabilitation (n = 2)]. There were no exclusion criteria in the study. The method was not used to determine the study sample, and the study was completed with 12 volunteer debriefers.

### Instruments

The research data were collected through face-to-face interviews using semi-structured interview questions (See Table 1), which were created by researchers in line with the INACSL standards of best practices (18). A pilot interview was conducted with the first debriefer in order to determine the comprehensibility, appropriateness, and estimated interview duration. After the pilot interview, no changes in the questions were required; this interview was also included in the study (Table 1).

**Table 1.** Interview Questions

| | |
|---|---|
| 1. | Could you introduce yourself, please? |
| 2. | Could you tell us about your simulation experiences? |
| 3. | Can you tell us about your debriefing experiences? |
| 4. | What are your roles and responsibilities in simulations conducted within the scope of interprofessional cooperation and patient safety course? |
| 5. | How do you prepare for the debriefing sessions? |
| 6. | What are the properties of the environment in which you are performing the debriefing? |
| 7. | How the structured goals and objectives for the debriefing are established? Could you explain? |
| 8. | Could you explain from beginning to end how you conducted the debriefing? |
| 9. | What do you do to ensure the active participation of students in the debriefing? |
| 10. | How are you managing unexpected situations that occurred during debriefing? |
| 11. | What are the challenges you face during the debriefing? How do you deal with these challenges? |
| 12. | What are the differences between uni and interprofessional debriefing? |

*Study Period*

The research was conducted between the 2nd and 23rd of January 2019. Invitation letters were e-mailed to the volunteer debriefing participants to invite them to the research. They were informed verbally about the research, and the date and place of the interview were agreed upon. In determining where the interviews would occur, care was taken to ensure that it would be a quiet, suitable place, free of interruptions. One day before the scheduled meeting date, an e-mail reminder was sent to the participants. Before the interview, they were informed about the research, and their written informed consents were obtained. A face-to-face meeting was held with a single debriefer at each meeting. The interviews were conducted by two researchers (B.C. and K.O.) and audio recorded. Each lasted about 30 minutes. During the interviews, while one researcher was conducting the interview, the other kept observational notes about the interview to strengthen the data analysis.

*Data Analysis*

The descriptive analysis method was used in scrutinizing the research data. The purpose of this analysis was to interpret the findings in an organized manner, and direct quotations were frequently included (31). Following the verbatim transcription of the audio recordings, three researchers evaluated the accuracy of the transcriptions by comparing them to the audio recordings in order to prevent possible mistakes in the analysis of the data. Afterward, the transcription texts were read in detail by all the researchers, matching them with the observational notes obtained during the interviews. As a result of repeated readings, the deductive method was used to classify the interviews according to contexts structures based on the INACSL standards of best practices. The researchers evaluated the disagreements regarding the analysis of the research data, and a consensus was achieved. In addition, quotations related to the interviews were included in order to increase the comprehensibility of the findings. Thereafter, transcriptions were sent to the debriefers so that they could give feedback. No changes were made in the transcriptions as a result of receiving feedback from debriefers.

*Ethics*

The study was ethically approved by the University Ethics Committee (Ethics Committee number: 35853172-000). Written permission was obtained from Hacettepe University Faculty of Medicine, Department of Medical Education and Informatics, and informed written consent was obtained from the debriefers.

**RESULTS**

Most of the debriefers (11; 92%) are female. Five (41%) of the debriefers are research assistants. Over half (7; 58%) had two years or less experience with simulation, and a quarter (3; 25%) had training in simulation/debriefing. Five contexts were identified in the study, guided by INACSL standards of best practices: Competent Debriefer, Environment, Effective Debriefing, Theoretical Framework, and Objectives and Outcomes.

*Context 1– Competent Debriefer*

Within the context of Competent Debriefer, there are criteria for the debriefers' education, their quest for feedback from other participants (especially experienced ones), and their recurrence of participation in simulations with the purpose of improving their debriefing skills. There were differences in the debriefing education level of the participants. Some of the them tried to improve their skills by reading the literature, transferring experience, and observing, while others attended training and certificate programs abroad.

> … Obviously we did not receive any training. Last year we conducted the debriefing with a professor from the Faculty of Medicine… This year we were alone (D2).

> … Since we attended these lessons, I always tried to master this process by observing my teachers (D3).

> …During the three months I stayed in Australia, I attended courses held both within the university and in different cities. Each one discussed issues related to debriefing… (D4).

Debriefers usually did not receive any feedback on the process after the debriefing, but they expressed their willingness to do so.

> … Otherwise, as I said, if you get feedback, I can have more pleasure in my process as a debriefer ... (D2)

*Context 2– Environment*

The Environment Context includes orientation of the students to the debriefing environment, activities carried out to ensure active participation, time of the debriefing, and preparation of the environment. Debriefers stated that they used many methods to orient students to debriefing. It could be exemplified by the debriefers introducing themselves and their profession, giving information about the course/simulation, explaining their expectations from the course, and debriefing.

> …First, I tell you who we are in the name of the promotion of the profession… Have they ever met anyone in the Speech and Language Therapy Department? … (D8)

> … We specify what we will discuss or talk about in the debriefing. (D4).

Another issue in the Environment Context is the active participation of students in the debriefing. In this regard, it was seen that the debriefers generally use the question-and-answer method, give real-life examples, use role-plays and give constructive feedback.

> …Actually, we do interactively question and answer… (D6)

Since the simulation planners pre-arranged the environment, debriefers did not need to organize the environment in which the debriefing took place. Debriefers described the physical characteristics of this environment: a small classroom environment, a U shaped seating arrangement, or a small amphitheater. They also mentioned that technical equipment such as computers, televisions, projectors, and sound systems could be in the environment.

Regarding the time of debriefing, another criterion under this theme, debriefings were usually performed one week after the simulation.

> …We perform the debriefing in the classrooms of the Faculty of Medicine. Actually, there is a group room for 20 people. There are computers, sound systems and screens in the room. (D9)

### Context 3- Effective Debriefing

Under the context of Effective Debriefing, the roles and responsibilities of debriefers during simulation, feedback provided, difficulties encountered, and the summary at the end of the session were discussed. While some of the debriefers prepared simulation scenarios and followed the simulations, others stated that they could not participate in the simulation due to their busy work schedule. In the feedback given during the debriefing, it was mentioned that the students gave feedback to themselves, their friends, and the debriefers about their simulation experiences.

> …So I am actually telling directly face to face. I say how it should be, those who do not, directly to the face…D9)

Debriefers face some challenges, such as students' using mobile phones during the debriefing, not wanting to watch simulation videos, leaving the lesson early, being prejudiced against the lesson, and having their own technical problems. According to the debriefers' answers, some summarized at the end of the debriefing, and some did not.

> …Actually, the biggest challenge we face is that medical students think that they do not provide much benefit for these simulation practices… (D6)

> …For example, there were problems with the sound system. We couldn't hear the video sound…. (D2)

### Context 4- Theoretical Framework

In the context of Theoretical Framework, it was mentioned that the analysis should be carried out within the scope of a theoretical framework and the elements within this framework. Debriefers do not consciously use a theoretical framework, but it is understood from the process definitions that they use Plus-Delta and/or Gather, Analysis, Summarize (GAS)-like approach as a debriefing approach.

> … In other words, we have different questions such as how was your experience, what went well, what went bad, what would you like to change next time?...(D4)

### 1.1. Context 5- Objectives and Outcomes

The debriefers' most emphasized Objectives and Outcomes were to provide awareness of interprofessional collaboration and to promote their profession. Apart from these, debriefers also had goals, such as protecting professional boundaries, a team-centered approach, focusing on non-technical skills, and providing patient–health professional communication. Although the debriefers utilize different methods (e.g., question-and-answer, role play, discussion) during the debriefing to achieve the objectives and outcomes, they did not mention whether they had achieved any of these at the end of the debriefing.

> …In other words, it is very important for me to get them know our profession and tell them that our profession is important…(D3)

### DISCUSSION

The results of this study reveal the status of meeting the INACSL standards of debriefing conducted in the scope of the Patient Safety and Interprofessional Cooperation Course from the debriefers' point of view based on their experiences. In order to conduct an effective and adequate debriefing session, it is crucial that it is planned in accordance with INACSL best practice standards (11,24,32). Creating an organized and planned approach towards meeting the Competent Debriefer standard is an effective strategy toward developing debriefing

skills. This study shows that debriefers have difficulty meeting the criteria in the Competent Debriefer contexts. With limited research results on this subject in the literature, this finding is in line with the previous study conducted by Mariana et al. (2014), which shows that most of the debriefers did not receive formal training and did not have a continuous training plan (7). Training at the international level for developing debriefer skills is becoming widespread (33). However, the relatively limited, nationally structured continuing education options for debriefers may be the underlying cause of not meeting the Competent Debriefer standard.

The results illustrate that there are obstacles in meeting the standards related to the debriefing environment. Obstacles that arise due to poorly structured criteria in the Environment Context are expressed as difficult debriefing situations (20). The literature emphasizes that the process should be well structured, and the debriefers should be experienced to avoid these unsuitable situations. The reason for having difficulty meeting the criteria may be the debriefers' limited experience and also their responsibilities in planning/structuring the simulation and debriefing. The results regarding the environment also reveal that some debriefings were carried out in a small amphitheater. The optimal debriefing environment should be planned, comfortable, and confidential so that students can feel psychologically safe while sharing their thoughts honestly and openly (34). In this study, although the environmental conditions did not always meet the best standards for debriefing, we think that the infrastructure of the institutions is an important determinant, and sometimes the best option is to use the present conditions as effectively as possible. The findings show that debriefings were performed one week after simulation. In the literature it has been demonstrated that there are two types of debriefing — during and after the simulation — and the ones performed after the simulation (same day or the following day)

are more effective (24, 35). Even so, the negative impact of a long time between simulation and debriefing on the efficiency of the debriefing is reduced by watching simulation video recordings. It should not be overlooked that this limitation may be caused by scheduling problems arising from the students' class schedule and the institution's infrastructure facilities.

The way feedback is given is also as necessary as timing in debriefing. Debriefers are constructive in their feedback, reinforcing good performances and the emphasizing points that need improvement. Feedback from debriefers meets INACSL standards. In this study, debriefers often face problems with students, technical issues and educational planning. These problems have also been mentioned in other studies in the literature (36,37,34). This study reveals that most of the debriefers do not know the theoretical framework, but they presumably lead debriefing based on Plus Delta and GAS. Similarly, in the study of Waznonis et al. (2015), most of the debriefers could not express a theoretical framework (25). According to the results of this study, debriefers set general outcomes for the session, but they are not emphasized enough in the debriefing. Their lack of education and experience, busy working schedules, and inadequate preparation for debriefing may prevent meeting the standard.

## CONCLUSIONS

According to the debriefers' experiences, the criteria that the debriefing meet from the INACSL standards are limited. Most of the debriefers have learned debriefing from observation or the literature. Some of the environments in which analysis is carried out are not sufficient for practical debriefing. The area where solutions are best executed according to the standards is feedback. Debriefers have limited knowledge of the theoretical framework, and the relationship

between debriefing and simulation Objectives and Outcomes is limited.

With this study, a discussion on the qualities of debriefing has been initiated for the first time in Turkey. Although the study results were not at the desired level, we assume that the awareness of debriefers of quality standards has increased with this study. At the same time, this study will provide awareness of standards for administrators of institutions and decision-makers. The research has been scientifically strengthened by reporting in line with two guidelines (COREQ, SRQR) developed for qualitative research. Apart from that, the volunteer participation of all debriefers in this course is another necessary feature of the study.

### Limitation

Besides the strengths of this study, there are also limitations that the readers should consider. Due to the nature of qualitative research, the results are valid only for the institution where the research was conducted. Therefore, this should be taken into consideration when interpreting the results of the study. In line with the study's findings, it is recommended that continuing and regular education be planned to improve the skills of debriefers and conduct studies on the quality and frequency of this education. It is recommended that accessibility or/and options of education be increased at the national and international levels. It should be ensured that projects are developed and appropriate environments are created in cooperation with institution administrators in order to solve infrastructure problems for debriefing. In addition, it is recommended to continue periodic evaluation meetings regarding the problems debriefers experience and propose solutions for those challenges.

### Author Contributions

Kevser Ozata, Busra Caz, and Senay Sarmasoglu Kılıkcıer have substantial contribution to the conception and design of the study, acquisition of data/ or analysis and interpretation of data as well as drafting as an article. All the authors have seen and approved the final version of this manuscript.

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