Debriefing: Culture and Conversation

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Feedback in Clinical Medical Education
JAMA, Aug 12, 1983—Vol 250, No. 6
Jack Ende, MD

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Debriefing/Feedback Conversations

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Roadmap

• Challenges
• Case study
• Credibility
• Culture
• Change
• Conversations

Do Team and Individual Debriefs Enhance Performance? A Meta-Analysis

Scott I. Tannenbaum and Christopher P. Cerasoli, the Group for Organizational Effectiveness, Albany, New York

HUMAN FACTORS
Vol. 55, No. 1, February 2013, pp. 231-245
Common Challenges

- “Time”
- “How to be critical while staying positive”
- “Hard to be direct”
- “Don’t want to step on toes”
- “Don’t want to hurt feelings”
- “Defensiveness”
- “Maintaining the relationship”
Feedback is important…

…so is knowing how to give it…

…but perhaps even more so is the relationship and the culture in which it is given.

The Feedback Sandwich

- Usually inauthentic
- Formulaic
- Linguistic ritual
Feedback that threatens self-esteem is less effective…and potentially harmful

A case study

- Setting: emergency department
- 18 year old cyclist hit by car--witnessed loss of consciousness. Brought to hospital by paramedics “alert but out of it”
- (Simulated) patient with possible airway injury
- Discussion ensues about timing of and indication for intubation
Learning objectives

• Perform rapid trauma evaluation and management of the trauma patient
• Demonstrate effective teamwork and communication
• Deal with conflict within the team

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“Learners sort, weigh and assign value to the learning cues presented to them, deciding which information must be integrated into their developing professional identity and which information can be dismissed” (p. 196)

Watling et al. 2012

Beyond individualism: professional culture and its influence on feedback
Christopher Watling,¹ Erik Driessen,² Gees P M van der Vleuten,³ Meredith Vanstone⁵ & Lorelei Lingard⁴

Medical Education 2013: 47: 585–594

Music lessons: revealing medicine’s learning culture through a comparison with that of music
Christopher Watling,¹ Erik Driessen,² Gees P M van der Vleuten,³ Meredith Vanstone⁵ & Lorelei Lingard⁴

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<table>
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<tr>
<th>Medicine</th>
<th>Music</th>
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<tbody>
<tr>
<td>• Learning by doing</td>
<td>• Learning by lesson</td>
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<tr>
<td>• Competence</td>
<td>• Ever better performance</td>
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<tr>
<td>• Value teacher clinical skills</td>
<td>• Value teachers’ teaching abilities</td>
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<tr>
<td>• Perceive self-assessment as possible</td>
<td>• Perceive need for external feedback</td>
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It’s not just “*giving feedback*”… it’s having a conversation
Supportive learning/workplace culture

Psychological safety

• A belief that one will not be punished or humiliated for speaking up with ideas, questions, concerns, or mistakes

• Interpersonal risk-taking is possible

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Edmondson 1999, 2008
Safety is not a word; safety is a feeling
“I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.”

Maya Angelou
Thoughts and actions are linked

Frames  ➔  Actions  ➔  Results

One's thoughts  ➔  What one does  ➔  The outcome

Intentionally Rational

Assuming a positive intent…
Giving the benefit of the doubt…

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Rudolph et al 2006
Frames of mind

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Frames  Actions  Results
?
Did not speak up
Patient safety at risk

Rudolph et al 2006
Changes future actions $\rightarrow$ risk of superficial learning
Changes the frame $\rightarrow$ deeper understanding

Common pitfalls to being honest yet non-threatening
Being “judgmental” can be harsh and threatening

Being “nonjudgmental”: trying to be nice

Non-judgmental: the problem

Examples of less effective patterns

• “Leading the witness” or dirty questions
• “Read my mind” or “guess what I’m thinking”
• Hint and hope
Non-judgmental: the problem

Dirty question
• Posing a question that suggests an answer

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Non-judgmental: the problem

Dirty question
• “Don’t you think it would have been a good idea to be more assertive about your concern when patient safety was at risk?”

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Non-judgmental: the problem

“Guess what I’m thinking”
• Asking a question for which you are looking for a specific answer…but you are not clear about it
Non-judgmental: the problem

“Guess what I’m thinking”
• “What’s the best way to get your point across in a critical situation?”

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Non-judgmental: the problem

Hint and hope
• *Speaking indirectly and hoping they “get it”*
Non-judgmental: the problem

Hint and hope
• "Speaking up is hard but worth it."

An alternative stance

There’s No Such Thing as “Nonjudgmental” Debriefing: A Theory and Method for Debriefing with Good Judgment

Jenny W. Rudolph, PhD, Robert Simon, EdD, Ronald L. Dufresne, MS, and Daniel B. Raemer, PhD

Simul Healthcare 2006;1: 49–55
Being honest yet non-threatening: 

_Speak from the first person perspective using “I” Messages_

- “I saw / heard…didn’t see / hear”
- “My impression is…”
- “My worry is/was…”
- “I am concerned…”
- “In my experience…”
- “It seemed to me…”
- “Usually I do”…

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Turning “You” into “I”

<table>
<thead>
<tr>
<th>“You”</th>
<th>“I”</th>
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<tbody>
<tr>
<td>“You didn’t speak up”</td>
<td>“I didn’t hear you speak up”</td>
</tr>
<tr>
<td>“You put the patient at risk”</td>
<td>“I think that could have put the patient at risk”</td>
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The steps

• Tell them what you want to talk about
• Tell them what you saw / heard
• Tell them what you think about the observation
• Ask them what they think

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The steps

• “I’d like to talk the discussion between you and and the surgery resident about whether or not to intubate the patient before the CT scan.”
• “I heard you say: “I am worried, but that’s fine.””
• “I was wishing you would have been more clear about your concern, especially when there is an airway issue.”
• “What was going through your mind at that moment”

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Reframe the conversation

- Rather than “teacher to learner”
- Participants are partners in learning; the teacher is also a facilitator
- “Reciprocal illumination” [Roger Kneebone]