

Improving simulation debriefing through the process of metadebriefing

Introduction

- Simulation is a widely adopted tool in medical education.
- A crucial element of learning in simulation is through guided reflection *after* the scenario – “debriefing”.
- Research aiming to improve the process of debriefing is limited.
- We outline our experiences with a novel approach to structured analysis of debriefing – “metadebriefing”.
- We aim to explore the potential of this technique to improve our practice.



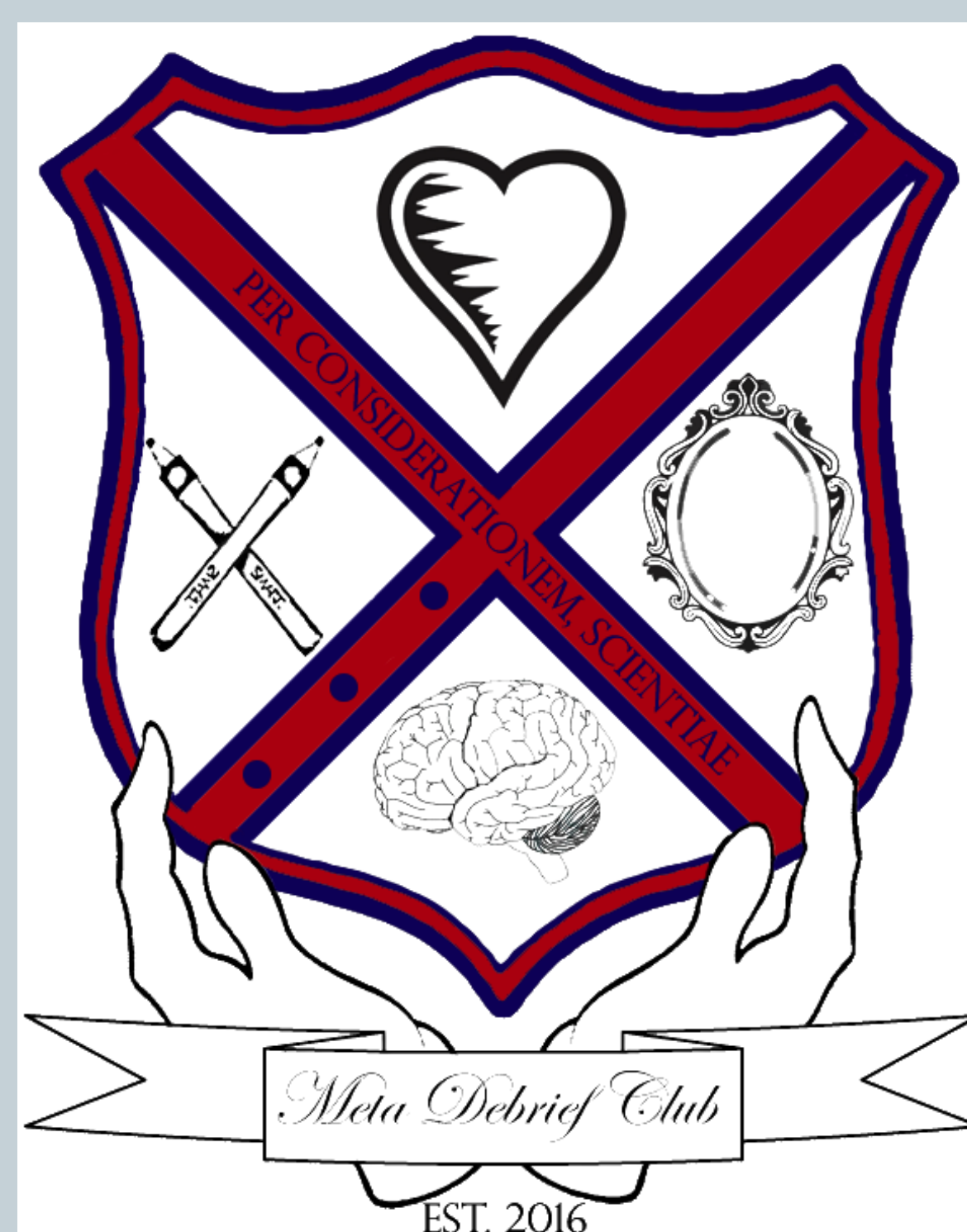
Discuss progress and create new action points

Debrief session following simulation

Metadebriefers meet

Watch footage of debrief and plot phases of debrief

Review action points from previous meeting



Results

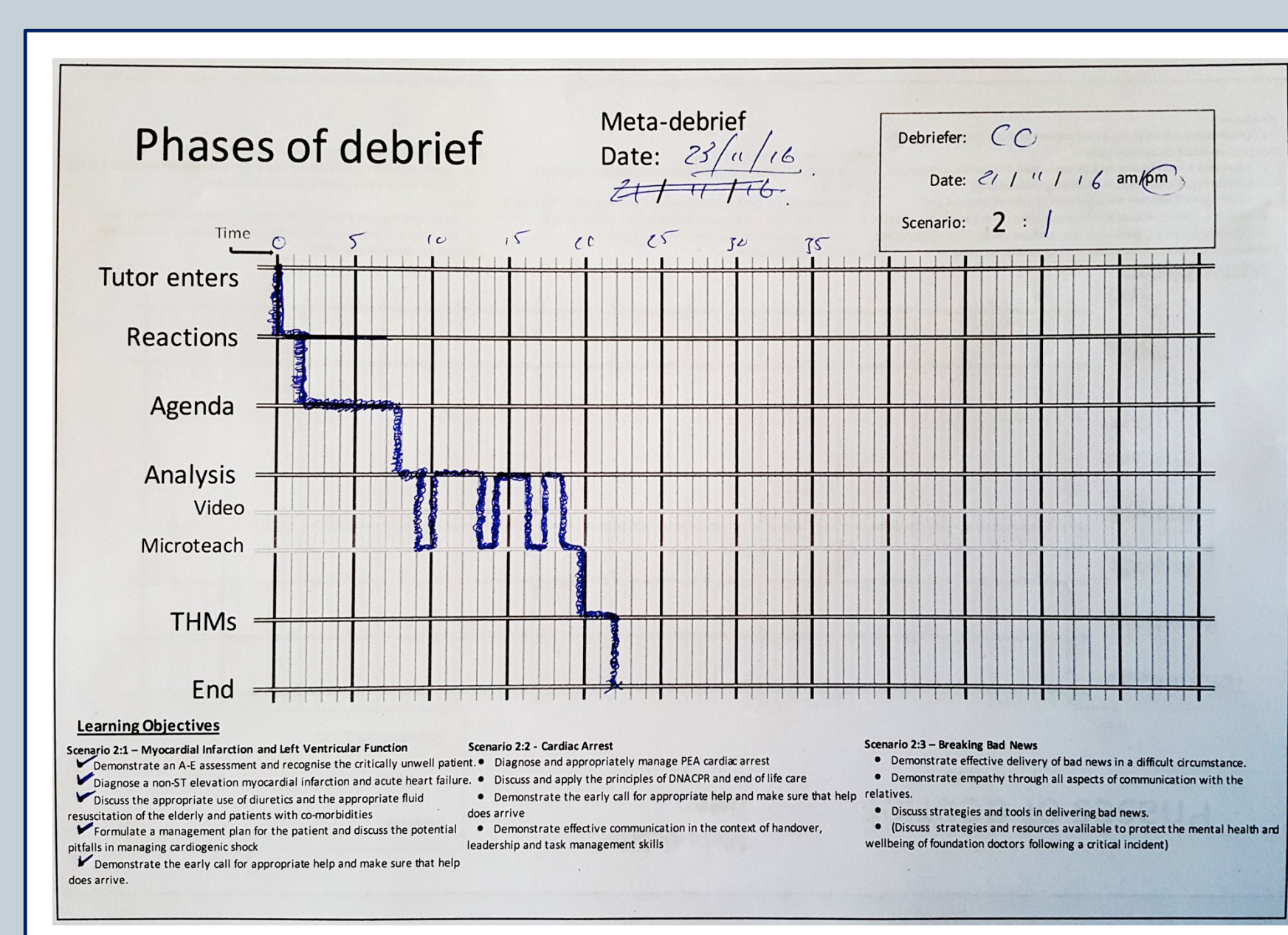
- The process of metadebriefing has led to the generation of a safe learning space in NHS Lothian for faculty members to share their practices. The experiences of attendees has been universally positive.
- Qualitative feedback from attendees suggests our debriefing practice has improved.

Conclusions

- A space for faculty and peers to evaluate their debriefing in Lothian has been created, in a friendly and non-judgemental environment.
- We feel that the process of metadebriefing is an effective tool which has the ability to improve simulation debriefing and therefore maximise learning for participants.
- This will provide a sustainable and cost-effective way to maintain and improve the quality of debriefing and simulation-based education within our institution.

Methods

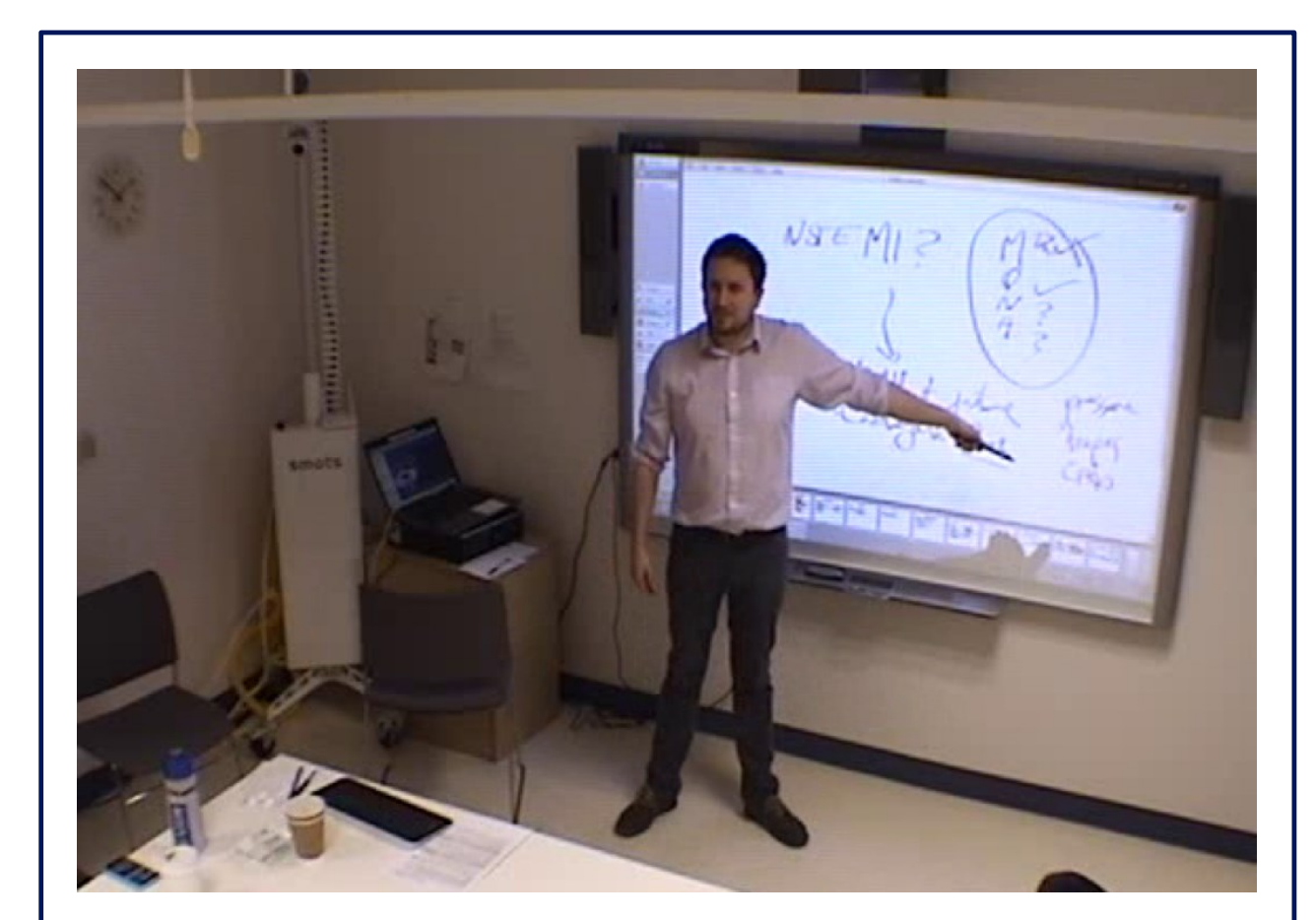
- We provided 120 simulated scenarios to FY1 doctors within NHS Lothian over a period of 8 months.
- Each scenario was followed by a facilitator-led debrief.
- The video footage of each debrief was recorded and reviewed at a weekly metadebrief.



“My debriefing skills have massively improved”

“I always look forward to metadebriefing – it’s an enjoyable way to reflect on my practice”

“I could see my behaviour changing and my technique improving with each session!”



Acknowledgements

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