

Exhibit 5: Guide for leading a debriefing session

Component	Suggested Framework
Introduction	<ul style="list-style-type: none"> • Review purpose of debriefing session • Brief introductions of participants, including name, title and role in care.
Ground Rules	<ul style="list-style-type: none"> • Respect others thoughts/opinions • Debrief is private and content should not be discussed openly with others following debrief
Gathering Data	<ul style="list-style-type: none"> • Review circumstances surrounding the event in discussion <ul style="list-style-type: none"> - Identifying statement - Brief review of presentation - Review of event(s), including dates, times, individuals involved and clinical information
Reflection	<ul style="list-style-type: none"> • “What was it like taking care of this patient/family?” • “How did the team work well in this case?” • “What breakdowns in teamwork or communication did you notice in this case?”
Response to Event(s)	<ul style="list-style-type: none"> • “What have you experienced since the event?” (Elicit physical, emotional, behavioral, cognitive, or spiritual responses)
Coping Strategies	<ul style="list-style-type: none"> • “How are you taking care of yourself so you can continue to care for others?” • Review strategies for coping with grief (see back of card) • Review available resources (see back of card)
Key Points and Lessons Learned	<ul style="list-style-type: none"> • “What lessons did you learn from caring for this patient/family?” • What will you take away from this experience?
Conclusion	<ul style="list-style-type: none"> • Acknowledge the work that we do in caring for patients and families • Review bereavement support available (“If anyone needs to talk further about how you are feeling, here are some of the resources available”; make yourself available as desired/possible)

When should we debrief?

- When you recognize symptoms of distress in yourself or team members
 - Common signs: irritability, fatigue, isolative behavior/withdrawn, tearful, easily upset, avoidant, poor interpersonal communication, use of inappropriate behavior/language
 - ***If you are thinking about doing a debrief, you most likely need a debrief***

Who should be invited to the debriefing?

- Team members
- Support people who may be helpful: chaplain, social worker, supportive faculty
- Consider including nursing, RT, or other staff

What are some ways to cope with grief?

- Take time for reflection, such as journaling or meditation.
- Take time for yourself to engage in a relaxing or enjoyable activity.
- Reach out to a friend or colleague.
- Connect to resources at work (see below).
- Pay attention to your own physical and emotional needs
 - Examples: exercise, nutrition, sleep, relaxation, time with loved ones
- Pay attention to pain/headache, restlessness, anxiety, poor sleep, low energy as signs of stress
- Feel empowered to make system changes that you feel are necessary. Pass what you learn through the debriefing process to leadership.

Warning signs of difficulty coping with event (consider added supports or mental health referral)

- Traumatic re-experiencing: flashbacks, nightmares
- Avoidant behaviors, numbness or detachment
- Guilt, self-blame, or extended unhealthy hyper-focus on circumstances of case
- Vulgar language, irritability, poor interpersonal style
- Stress or burnout that is impairing care and function
- Increased anxiety, panic, withdrawal, low mood
- Physical symptoms such as poor sleep, severe fatigue, severe headaches
- High risk behaviors: substance use, thoughts of self harm or self harm behavior

Mental Health Resources

- House Officer Mental Health Program: _____
- Chaplain: pager _____
- Social work: unit or on-call SW
- Pediatric Palliative Care: pager _____
- Child/Adolescent Psychiatry: _____
- Office of Decedent Affairs: _____
- Employee Assistance: _____
- National Suicide Hotline: 1-800-273-8255

How should I relate to families after a patient death?

- Be available and present; let your genuine caring and concern show.
- Acknowledge their loss. If words are needed, try reflecting back their emotions.
- Each unit has a different process for contacting the family, such as sending cards after the death. If you want further information, you may contact your hospital bereavement coordinator.