

When the Debrief Runs Out: Dealing with Psychological Harm in Simulation

KATHERINE JANZEN RN MN
HEATHER MACLEAN RN MN
SHELLEY JESKE RN MN, CHSE



Objectives

- ▶ Understanding what constitutes Psychological harm
- ▶ Outline strategies to recognize and mitigate psychological harm
- ▶ Discuss outcomes of Educator “think tank”
- ▶ Highlight policy and changes in practice
- ▶ Identify next steps

Simulation in Nursing

- ▶ INACSL Standards used at MRU
- ▶ Mimic real life situations
- ▶ Fiction contracts with “real” patients
- ▶ Debrief session for “sense making”



“creating a setting where learners feel safe enough to embrace feeling uncomfortable”

(Rudolph, Raemer, & Simon, 2014)

Psychological Harm

- ▶ Definition
- ▶ Causes/circumstances
- ▶ Lived experience at MRU
- ▶ Recognizing student vulnerability



The foundation of psychological safety are trust and safety (Gaba,2013)

Getting to the Heart of the Matter

- ▶ Simulation team “Think Tank”
- ▶ All facilitators RN’s with 1-5 years experience; one CHSE
- ▶ Represented BN, ACCN and Midwifery members



Outcomes

- Being aware of cues
- Caring for self after SCE
- Include clinical instructors
- SCE debrief with co-facilitator
- Risk management consult
- Normalize stress
- Alternate facilitator on call
- Student Resources available
- Comfort-Stretch-Panic Model
- Emergency contact number for facilitators



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Policy and Practice Changes

Purpose

- ▶ To ensure participants with uncontrolled physical and/or psychological stress responses are recognized, managed and addressed prior to, during and following a Simulated Clinical Experience (SCE).

Uncontrolled Stress and Response Plan

Policy Name: Uncontrolled Stress Response Plan	Date of Development: July 2015
Approved by:	Date of Last Revision:
Date of Next Review:	

Supporting Students and Facilitators

- ▶ Begins with Pre-brief
- ▶ Adequate Debriefing
- ▶ Self Care after SCE



Going Forward

- ▶ Policy in progress
- ▶ Published Article
- ▶ Further research



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