

1) Who Should Lead a Debriefing Session?

It is preferable for the someone *other than* the manager/work setting leader to lead the debriefing session, because:

- Staff may be more comfortable speaking up to someone other than their manager, especially regarding issues of leadership and psychological safety
 - A person from outside the unit will 'drill down' on issues that someone familiar with the unit may not
 - It can be difficult for Managers to get out of "problem solving" mode and to just listen to staff
- 'Neutral' staff from Quality, Safety, Risk, Human Resources, and Nursing Education are often an excellent resource for facilitating debriefing sessions. Work Setting Managers can debrief a unit *other than their own* (preferably not in same department/service line), which can be very educational for them.

2) Where should a Debriefing Session take place? How many should attend?

Find a quiet place close to the unit (NOT a nurse's station) so that staff can attend most easily. A break room is often an ideal location. Debriefing Sessions should take place on each shift (day, evening, night, weekend) to ensure that there is adequate representation of opinions from the entire staff. The overall goal is to have at least 50% of unit staff participate in a debriefing session.

3) The person conducting the Debriefing Session should:

- Arrange group in a circle if possible
- Introduce themselves and state their purpose (to share results and elicit insights)
- Explain that what they record is anonymous, but non-identifiable examples and quotes will be shared with management

4) Helpful tips for getting the most out of Debriefing Sessions:

- Ask open ended questions and 'drill down' to clarify the responses
- Ask for clarification when items are discrepant
- Allow the respondents to talk -- no problem-solving or updating
- Clarify amounts when respondents use words like "always" or "never"
- Use summarization to bridge pauses, stimulate further conversation.
- Draw out quiet participants, but be respectful that silence can be an indicator of discomfort
- Turn the item into a fill-in-the-blank statement. ("It is difficult to speak up if I perceive a problem with patient care because ____.")
- Ask open-ended questions, or ask staff to describe their work ("On your last shift, tell me something that was frustrating/worrisome/irritating...")
- Use the qualitative comments entered at the time of survey to stimulate conversation ("A respondent suggested that/expressed concern that..." Does that resonate? Do you think that is an issue? What are your suggestions for fixing that?)

5) Writing Up Notes

- Note # of participants, role types, date/time/shift
- Group quotes and examples into similar categories, such by Survey Domain or by theme
- Share the notes/writeup with work setting and organization leadership