The Effect of Critical Incident Debriefing on Compassion Satisfaction, Burnout, and Secondary Traumatic Stress in Emergency Department Staff

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About Pennsylvania Hospital Emergency Department

- One of five Emergency Departments (ED) in the Penn Medicine System with over 36,000 annual visits
- Clinical staff comprised of physicians, physician assistants, nurses, and technicians

Background

- ED nurses and staff can feel stressed after critical incidents such as a patient death, violence, code, or medical error
- This stress can lead to professional burnout, job turnover, and poor well-being
- Debriefing sessions are widely recommended as a means to help manage caregiver stress

Objective

- To examine the effect of real-time critical incident debriefing on compassion satisfaction, burnout, and secondary traumatic stress in ED Staff

Methods

- Quasi-experimental design, using a valid and reliable tool
- ED staff participated in a structured debriefing led by a trained charge nurse following a critical incident

Nursing Professional Quality of Life

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<thead>
<tr>
<th>Compassion Satisfaction</th>
<th>Burnout</th>
<th>Traumatic Stress</th>
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<tbody>
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<td>Pre</td>
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Supporting Evidence

- Themes found in critical incident debriefing sessions
- Staff comments following debriefing sessions

Breaks were the most requested resource

“I’m glad we are able to support each other”

 Violence was the most frequently debriefed incident

“Breaks aren’t always realistic, but it’s nice to know someone is paying attention”

 Longer codes often led to increased emotion and stress

“...I never knew we had so many resources available to us”

Limitations

- Small Sample Size
- External Stress
- User Error
- Pairing Results

Conclusion

Identify
- Acknowledge the Incident

Engage
- Debrief the Staff

Support
- Offer Resources

References