Differences in Debriefing Practices in Nursing Education: Instructor-led and Peer-led

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Introduction & significance

•Simulation and debriefing are fairly new teaching methods utilized within nursing education
•Debriefing is a useful reflection tool for students
•Scant research on comparing types of debriefing → little evidence-based research identifying the most effective method
•The International Nursing Association for Clinical Simulation and Learning (INACSL) Standards of Best Practice: Simulation (2013) states debriefing should be conducted by an individual trained in debriefing practices who witnessed the simulation activity

Theoretical framework

•National League for Nursing (NLN)/Jeffries Simulation Framework
•Currently used at institution for developing, planning, and debriefing simulation experiences
•Focus on simulation-guides design, implementation, and evaluation of simulations
•Promotes student centered environment
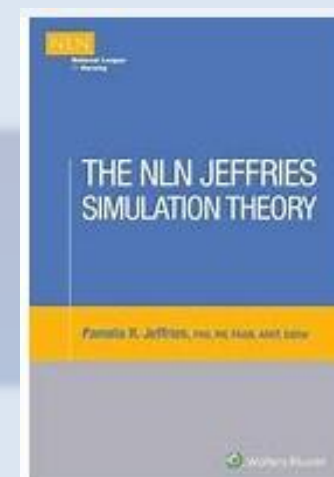
Review of literature

•Dreifuerst (2012) compared Debriefing for Meaningful Learning (DML) vs. customary debriefing
   ➢ DML is an effective debriefing tool
•Grant, Dawkins, Molhook, Keltner, & Vance (2014) compared oral debriefing vs. videotape assisted debriefing
   ➢ Either method of debriefing effective
•Forneris et al. (2015) used the Health Sciences Reasoning Test (HSRT) to compare customary debriefing vs. DML
   ➢ DML debriefing scored higher on perceived positive differences in quality of debriefing
•Dufrene (2013) examined peer-facilitated debriefing vs. faculty facilitated debriefing
   ➢ No difference in learning outcomes
•Waznonis (2014) **debriefing may be the most important aspect of simulation learning** but is not evidence-based

PICO question

In final semester associate degree pre-licensure practical nursing students (Population), does peer-led or instructor-led debriefing after simulation based learning activities (Intervention) improve student learning outcomes (Outcomes)?

Methodology-Design

•This quantitative study asked participants to complete the Debriefing Assessment for Simulation in Healthcare (DASH) Student Version Long Form- a 23 question rating scale to evaluate the debriefing process and the person leading the debriefing discussion

Population

•A convenience sample of 31 students enrolled in a Practical Nursing (PN) program
•Voluntarily solicited

Description of procedure

•The same group of 5-6 students performed 2 simulations and participated in both types of debriefing
•Instructor-led debriefing after the 1st scenario and peer-led debriefing after the 2nd scenario
•The group was asked for a volunteer to facilitate the peer-led debriefing session
•Both facilitators used the standard NLN debriefing questions
•There was no control group

Data collection

•DASH was distributed to the students for completion after each debriefing
•Verbal explanation was provided that for the peer-led debriefing, the peer-leader was regarded as the "instructor"

Characteristics of the sample

•N=31 students, 27 female, 4 male
•Variety of ages & cultural beliefs
•Students knew each other well-have been together as a cohort for 10 months

	N	Minimum	Maximum	Mean	Std. Deviation
Instructor-Led debriefing	23	143	216	204.91	14.30
Peer-Led debriefing	23	145	209	199.22	13.03
Valid N (listwise)	23				

Results-Analysis of data

Instructor-led debriefing highlights
•Highest average ratings for DASH questions (N=23 questions)
•I felt that the instructor respected participants
•Focus was on learning and not on making people feel bad about making mistakes
•Average scores of 6.94

Peer-led debriefing highlights
•Thoughts and emotions without fear of being shamed or humiliated
•Ranked highest with a sum of 209

Overall summary

•**Paired samples _t_-test revealed that there was no significant difference in the overall debriefing styles**
•5 out of 23 elements identified that the students showed greater benefit with the instructor vs. peer
   ✓ Clarifying roles and expectations of the student in the debriefing process
   ✓ Instructor demonstrated respect for the students
   ✓ How the instructor focused on learning and not making people feel bad if they made mistakes
   ✓ Instructor communicated clearly
   ✓ Students appreciated that if a student became upset the instructor helped them work through their emotions and was respectful in doing so

Implications for practice

•With increased utilization of simulation in nursing education, it is essential that nurse educators explore different debriefing methods
•Debriefing is meaningful, even if it is peer-led
•Peer-led debriefing is a better alternative than no debriefing due to time or instructor limitations

Limitations

•Only looked at 2 debriefing methods, while there are others that can be utilized such as video-assisted, or individual vs. group techniques
•DASH is intended to rate an instructor and that may have confused some students when they were rating their peer
•Small sample size