



## Review Article

# Best Practice Recommendations for Debriefing in Simulation-Based Education for Australian Undergraduate Nursing Students: An Integrative Review

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## KEYWORDS

simulation;  
simulation-based  
training;  
debrief;  
critical thinking;  
nursing students;  
health professionals

## Abstract

**Background:** An integral and possibly the most important component of the simulation-based learning is the debriefing process. It is desirable to then examine the literature to determine best practice guidelines. **Method:** This integrative literature review searched several relevant online databases including Joanna Briggs Institute, Cochrane Library, MEDLINE, CINAHL, Psych Info, Science Direct, ProQuest, Ovid, and Web of Science. Libsearch, Google Scholar, and Google were also searched to capture relevant literature and research. As a systematic review of randomized control studies already existed in Joanna Briggs Institute (2012), it was decided to include that study and limit the search to only those articles published after 2012. **Results:** There were eight predominant themes that emerged from the literature reviewed regarding the best practice guidelines for debrief phase in simulation-based education: (a) types of debriefing (video assisted and facilitator only), (b) debrief in simulation versus postsimulation, (c) environment in which the debrief takes place, (d) the person who should facilitate the debrief, (e) assessment and training of the person who debriefs, (f) identification of the learning outcomes, (g) method of debrief, and (h) structure of the debrief. **Conclusion:** Following an extensive literature review, it was established that there were eight best practice recommendations to facilitate the debrief process. The integrative review strongly suggested that a safe, structured debrief following the simulation immersion is aligned to best practice. Best practice in simulation is conducive to promoting clinical psychomotor skills and knowledge.

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## Introduction

The use of simulation in the education of health professionals began in the 1960s and has evolved at an unprecedented pace (Levet-Jones & Lapkin, 2014). Simulation

is defined as a technique to “replace or amplify real experiences with guided experiences, often immersive in nature, that evoke or replicate substantial aspects of the real world in a fully interactive fashion” (Gaba, 2004, p. i2). In some countries, it is even a mandated part of the curricula, due in part to the increased complexity of patients, the need to manage risk and patient safety, and the intense

competition for quality clinical placements for students (Anderson, Bond, Holmes, & Cason, 2012).

An integral and possibly the most important component of simulation-based learning is the debriefing process (Dreifuerst, 2012; Edgecombe et al., 2013; Health Workforce Australia, 2010). Within the debriefing process, theory is connected to practice; reflection, critical thinking, and clinical reasoning take place; and learning is maximized (Edgecombe et al., 2013).

Debrief, despite being such an important area, and potentially the most important area for the innovative, educational pedagogy of simulation-based-learning, has not received the attention it deserves. This integrative review attempts to synthesize the evidence and determine best practice in simulation.

## Background and Rationale

Simulation-based learning has been adopted by education institutions at a remarkable pace, and it is a mandated part of nursing curricula in New Zealand and the United States (Edgecombe et al., 2013). In Australia, Health Workforce Australia (HWA) was established in 2008 by the Council of Australian Governments, with the predominant aim of delivering national health reform. An overarching aim of this reform was to expand health simulated learning environments by optimizing simulation training experiences to enhance the development of theoretical skills and clinical competencies required by health professionals pre- and post-registration (HWA, 2010). This was as a direct result of the increasing concerns for patient safety and the decreased opportunity for experiential learning in a clinical placement environment (Imperial College of London, 2012). It is important to note that the use of

simulators alone does not equate to high-quality training, and it is the role of feedback and debriefing that enables the learner to integrate their learning experience (Imperial College of London, 2012). Debriefing provides the process whereby the students develop their clinical reasoning through reflection and metacognition (Mariani, Cantrell, Meakim, Prieto, & Dreifuerst, 2013). Effective debriefing links theory to practice and research and enables students to critically think and to intervene professionally in complex situations (Anderson et al., 2012; Jeffries, 2005). Debriefing is elevated to the most important component of the simulation-based learning experience (Decker et al., 2013). It is an “integral part of the experience and creates the platform where critical thinking and learning integration takes place” (Levet-Jones & Lapkin, 2014, p. 1). Despite debriefing being common practice postsimulation, conflicting views exist as to what is most appropriate or best practice. Through an integrative literature review, this article will aim to establish best practice for debriefing in simulation using high-fidelity mannequins and standardized patients.

## Research Question

The research question “What is the best practice for debriefing simulation-based education for undergraduate nursing students?” was used to guide the research strategy. An approach identified by Sackett et al. (1997)—PICO—was used to describe the elements of the research question to be considered: *P*, for patient or problem; *I*, intervention or interest; *C*, for comparison; and *O*, for outcome.

In relation to this integrative review, these components were as follows: *P* = nursing students, *I* = debriefing with simulation-based education, *C* = no comparison was required as the review was aimed at determining best practice, and *O* = to identify best practice guidelines for debrief facilitation in simulation-based learning.

## Search Strategy

This integrative literature review searched several relevant online databases including Joanna Briggs Institute (JBI), Cochrane Library, MEDLINE, CINAHL, Psych Info, Science Direct, ProQuest, Ovid, and Web of Science. Libsearch, Google Scholar, and Google were also searched to capture relevant literature and research (Figure).

The search terms used included *simulation*, *debrief*, and *health professionals* along with variations of these words that resulted in 2,434 responses. The terms were then combined using the Boolean operator “AND” and further reduced. As a systematic review of randomized control studies already existed in JBI (2012), it was decided to include that study and limit the search to only those articles published after 2012.

### Key Points

- Debriefing is an essential component of simulation-based learning.
- Debriefing requires a structure framework.
- Video-assisted and facilitator only debrief are both equally effective techniques.

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