

BEYOND DEBRIEFING: THE EXPERIENCE OF FACILITATING INTERPROFESSIONAL STUDENTS IN A SIMULATION LEARNING ACTIVITY

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BACKGROUND

Simulation and IPE

- ❖ Simulation learning defined as: *replacement of real patient encounters with either standardized patients or technologies that replicate the clinical scenario* (Oduda et al., 2009)
- ❖ Viewed as an important educational strategy in healthcare for teaching essential knowledge & skills (Cheng, Palangas, et al., 2015)
- ❖ In IPE context provides an opportunity for students to collaborate with IP peers in a non-threatening environment (Baker et al., 2008)
- ❖ Enables students to develop clinical reasoning and problem-solving skills (Baker et al., 2008)



BACKGROUND

Role of Facilitators in Simulation Learning

- ❖ Simulation most valuable when learner encouraged to reflect, analyze, and make sense of the experience (Zigmont, Kappus, & Sudikoff, 2011).
- ❖ Facilitator-led debriefing provides an optimal learning experience through reflection and is considered the most important part of simulation (Ali et al., 2015)
- ❖ Facilitators have a vital role in debriefing, but limited experience in debriefing interprofessional students (Jaye, Thomas, & Reedy, 2015)
- ❖ Research in IPE has traditionally focused on the learner's perspective but little is known about the facilitators' perceptions or experiences (Lindqvist & Reeves, 2007)



IPE SIMULATION SESSION



Scenarios of the IPE Simulation Session

- Social worker (with 3 students)
- Patient (with 3 students)
- Family member (with 3 students)
- Team planning meeting (all 6-7 students)
- Meeting with patient and family (all 6-7 students)

All students participate (active participant assuming own professional role, or as observer)



PREPARATION OF FACILITATORS



Accredited 3 hour IPE Faculty Development Workshop

- ❖ To prepare faculty for their facilitator role & become familiar with the simulation activity.
- ❖ Faculty observe, discuss and practice how to promote interprofessional discussion.
- ❖ Faculty assume their facilitator role with “students” who are trained actors who provide an authentic representation of what facilitators are likely to encounter.
- ❖ Benefits: expanding faculty’s debriefing repertoire, increasing comfort level, peer coaching and support.



RESEARCH QUESTION

- ❖ What are facilitators' experiences debriefing an interprofessional group of university healthcare students following a simulation learning activity?

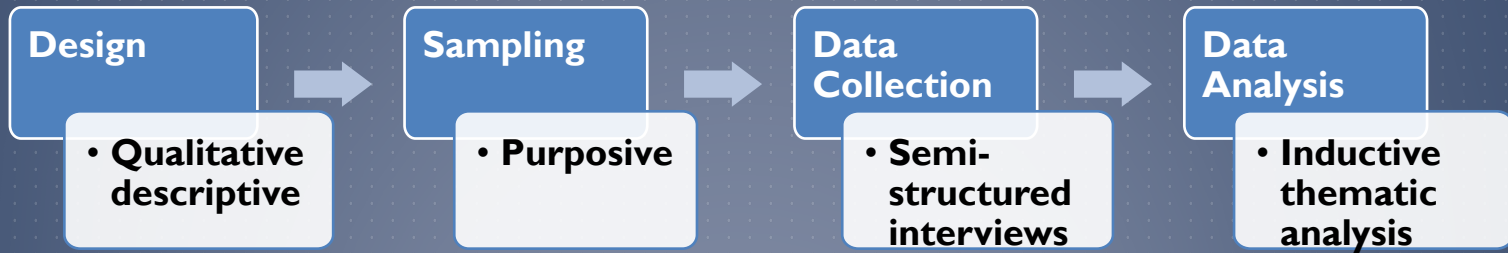
Strategies & resources used

Challenges & successes encountered

Influence of the interprofessional context



METHODS



SAMPLE

5 RNs	3 OTs	3 PTs	Total = 11
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Teaching experience: 1 - 43 years

Previous IPE experience: 9 participants

Other previous SIM experience: 7 participants



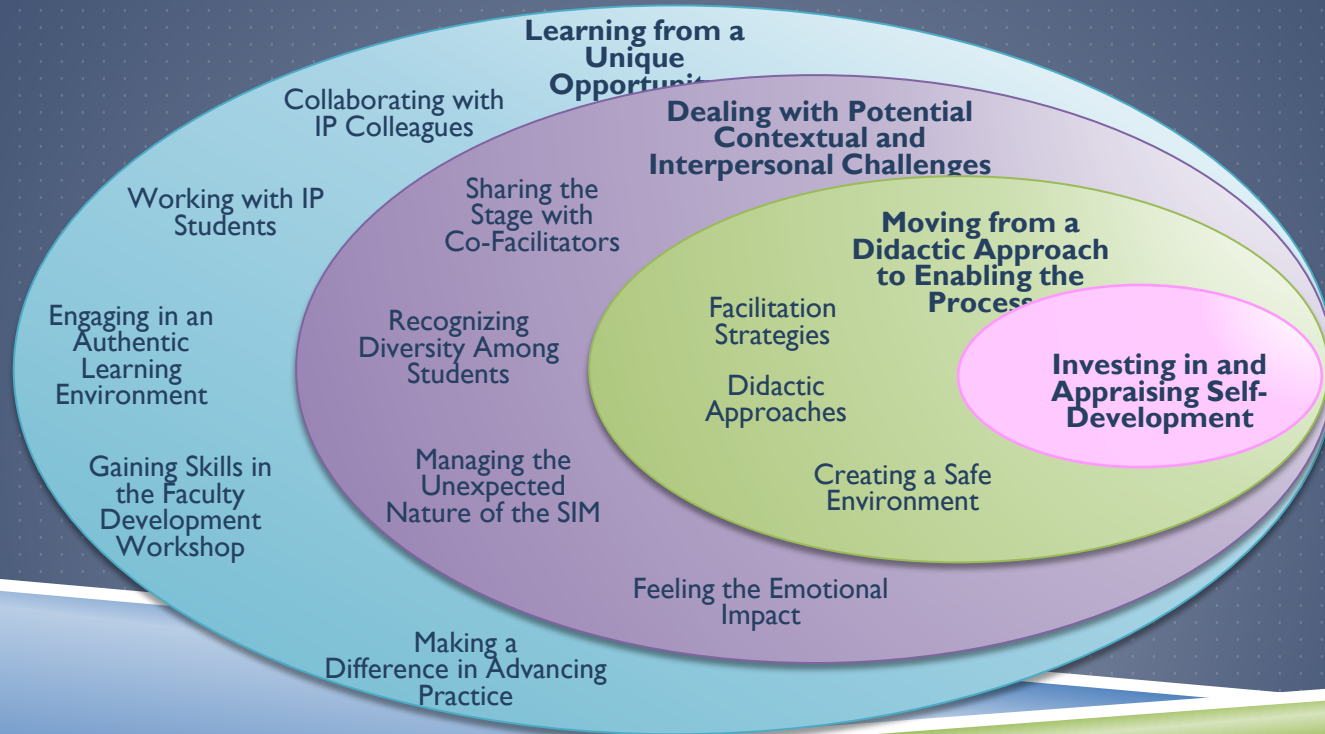
Average number of SIMs: ≈ 5 (1-10)



STUDY FINDINGS



BEYOND DEBRIEFING: THE FACILITATION EXPERIENCE



Learning from a Unique Opportunity

- ❖ Working with IP students
- ❖ Collaborating with IP colleagues
- ❖ Engaging in an authentic learning environment
- ❖ Gaining skills in the Faculty Development workshop
- ❖ **Making a difference in advancing practice**

"I feel it's going to shape tomorrow's healthcare in a different way than the way we function now [...] trying to break down those [professional] silos"
(N.05)



Dealing with Contextual and Interpersonal Challenges

- ❖ Recognizing diversity among students
- ❖ Managing the unexpected nature of the simulation
- ❖ Feeling the emotional impact
- ❖ **Sharing the stage with co-facilitators**

“You know who your co-facilitator will be, but you don't know who they are [...] you're always a little bit concerned about, is it going to be a difficult co-facilitation, will I be able to work well with this person?”
(N.01)



Moving from a Didactic Approach to Enabling the Process

❖ Didactic Approaches

- ❖ Setting expectations
- ❖ Imparting information
- ❖ Performance evaluation

❖ Facilitation Strategies

- ❖ Exploratory questions
- ❖ Holding back & giving space

❖ **Using silence**

❖ Creating a Safe Environment

“The ‘ah ha’ moment for me was the silence. Being ok with silence. Just sitting back, asking a question and letting them talk. If there was a silence, that is ok”

(OT.06)



Investing In and Appraising Self-Development

- ❖ Developing debriefing skills
 - ❖ Use of preparatory material
 - ❖ Self-reflection
- ❖ Assessing competencies as a facilitator
 - ❖ Self-reflection
- ❖ Learning from co-facilitators
 - ❖ **Complementary relationship**

"I found it was complementary between my colleague and [myself] [...] he talked about things that I didn't think about. That was helpful [...] he clarified things that I didn't know. And I brought some ideas that he didn't talk about"

(PT.10)



DISCUSSION

- ❖ Approaches to debriefing
 - ❖ Instructor-centered vs. learner centered (Cheng et al., 2016)
 - ❖ Importance of labeling debriefing strategies
- ❖ The co-facilitator relationship
 - ❖ Mutual learning
 - ❖ Fear of the unknown
- ❖ Self-reflective practice
 - ❖ Continuous
 - ❖ Recognizing personal strengths/limitations



CLINICAL IMPLICATIONS

- ❖ Faculty development initiatives
 - ❖ Articulating effective debriefing strategies
 - ❖ Highlight learner centered approaches
- ❖ Co-facilitator preparation
 - ❖ Team building activities
- ❖ Promotion of self-reflective practices
 - ❖ Personal reflection exercises
 - ❖ Self-assessment tools



LIMITATIONS

- ❖ Only 3 of the 5 professions from the faculty of medicine represented
- ❖ Time frame between SIM activity and interviews



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QUESTIONS??

