# **Cold Debrief Tool**

#### Introductions

Clarify which case is being discussed Introduce who is leading Debrief Team introductions and roles for the case being discussed

## Purpose of Cold Debrief – to be READ to all attendees before commencing Debrief

## What it IS for

Opportunity to come together in safe environment to help us all understand and process Group understanding of complex and challenging situation

Completing jigsaw puzzle – experiences and perspectives will be different

- Everyone will have a different truth of the same event
- Everyone will have a different experience of the same event

Reflection for learning – positives and issues that need addressing

Opportunity for some clarity (maybe not everything)

A way to process an experience together

A way to provide further information to the team involved (ie from JAR/PM etc if available)

### What it NOT for

Not an investigation/case review/clinical interrogation

Not about blame or what 'should have done'

Not to prolong difficult experience

Not compulsory - can leave at any point, no need for explanation

### **Ground Rules**

Leave hierarchy at the door

Everyone should be able to contribute and everyone's contributions should be respected

No blame - learning for the future

Make no assumptions

Allow people to explore questions and uncertainty

Confidentiality

## **Acknowledgements**

Everyone will experience and deal with this differently

Offers of ongoing support – psychology, chaplain, supervisors, managers, peers Emotive

- Any paediatric death is difficult and has a huge impact
- Repeated management of challenging behavioural disturbance is a cause of significant moral injury While debrief is not clinical interrogation, important to talk through questions or uncertainties



### **Debrief Structure**

#### Introduction

Clarify case details to be discussed

Purpose of Debrief and explanation of why Cold Debrief felt to be indicated

Introduction of team members (names, roles, agencies)

Explanation of structure of Debrief process

Ground Rules to be read to everyone in attendance

#### **Structure Outline**

Case narrative in stages

Learning points and discussions

- What went well
- What could have been done differently
- What was difficult and what can we learn from this

Action points and responsible persons

Signposting to further support

## **Case Narrative in Stages**

Factual narrative for each stage to be led by area lead

- Pre-hospital care and processes
- Pre-Alert/Notification/Arrival
- Team preparation and planning
- Initial Management
- Progress and outcome
- Any other issues

Key updates to be provided to the team (JAR, PM, other agency involvement, inquest etc)

#### **Case Discussions**

Opportunity for team discussions and questions for each stage of care

- Pre-hospital care and processes
- Pre-Alert/Notification/Arrival
- Team preparation and planning
- Initial Management
- Progress and outcome

Consider the following as relevant to the each stage of the case

- Communication
- Team work/Human factors
- Clinical care and processes including planning
- Investigations
- Equipment
- Guidelines and process/pathways
- Family

Other teams and agencies involvement, interactions, perspectives, challenges

Written documentation of the discussions for each stage is essential to ensure appropriate actions are recorded with details of those taking responsibility for each.

## **Summary and Close**

Acknowledge emotion and thank attendees for coming and for input

Summarise key learning from discussion

Each individual to identifying one thing that went well and one thing that will their change practice Summarise action points, who is responsible and timeframe

Signpost to further support (time frame - may find you need help further down the line)

(TRiM, Psychology team, Chaplaincy team, Educational supervisors/managers, Peers)

Hope debrief was useful

Discussion around how to communicate further updates if relevant



# **Debrief Documentation**

Pre-Hospital Phase
Information
Issues and Learning
Action Dainte and Dancen Dagmanaible
Action Points and Person Responsible
Pre-Alert/Notification/Planning Phase
Information
Issues and Learning
Action Points and Person Responsible



Initial Management
Information
Issues and Learning
Action Points and Person Responsible
Progress and Outcome
Information
Issues and Learning
Action Points and Person Responsible
Action Points and Person Responsible
Action Points and Person Responsible



Other Issues (	Team work/Human	Factors/Clinical Ca	are/Process/Inves	stigations/Equi	ipment/Family	//Process)
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Information	
Jesues and Learning	
Issues and Learning	
Action Points and Person Responsible	
Other Teams / Agencies	
Other Teams/Agencies	
Information	
Issues and Learning	
Action Points and Person Responsible	

