

Six Core Strategies[©] service review tool

Strategy 6: Debriefing techniques

New Zealand adaption – 2nd edition

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About the Six Core Strategies®

The Six Core Strategies © is a whole-of-system approach for reducing the use of seclusion and restraint in mental health and addiction services. This evidence-informed framework was originally developed in the US by the National Association of State Mental Health Program Directors in response to people accessing services and other stakeholders saying the experience of seclusion and restraint is traumatising for both people receiving services and staff.

The framework consists of six strategic areas as shown below. This document focuses on the service objectives that sit under **Strategy 6: Debriefing techniques**. For more information, please refer to the full version of the *Six Core Strategies© service review tool: New Zealand Adaption – 2nd Edition*.



How to use this document

This document provides examples of what each service objective could look like. Your service can use the ratings below to identify whether you meet the objective and record it in each column. Then use your ratings to identify one or two key priorities for your service to work on over the next 3 to 6 months.

Yes	The objective is <i>fully embedded</i> into everyday working practice, values and culture.
Partly	Part of the objective has been implemented, but not fully embedded into everyday working practice, values and culture.
No	The objective is <i>newly</i> implemented or not present, and not yet embedded into everyday working practice, values and culture.

6. Debriefing techniques

GOAL SIX: The purpose of debriefing is to firstly embed a systems approach to practice change. Reflection on restrictive events will inform future preventative approaches as evidenced in policy, procedures and practices. Secondly, the process of debriefing attempts to return the unit to a pre-event state and mitigate the trauma of restrictive practices on people and staff. Each event is followed by a post-event debrief, formal team debrief, and executive management debrief. For the formal team and executive level reviews, the level of management and external expertise increases according to the complexity of the situation under review.

Debriefing processes improve future outcomes through reflecting on current practice and identifying opportunities for safety and quality improvement. Debriefing provides a purposeful evaluation of practice, enabling shared learning to support practice change. It is essential for senior leadership to participate and support these processes occurring. This includes senior clinical and professional roles, service managers, and the clinical director.

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps	
Organisational devel	Organisational development			
1. Our service has developed and	Debriefing policies and procedures should include:	Yes		
implemented clear and specific debriefing policies and procedures.	 debriefing goals people present during events responsibilities and roles debriefing processes documentation follow-up information feedback into service delivery practices evaluation of the quality of debriefing use of culturally informed processes and approaches for Māori and Pasifika practices. 	Partly No		

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
2. Our service has policies and procedures that outline consistent debriefing activities and expectations for each event.	Each restraint event is followed by an immediate post-event debrief, formal team debrief, and executive or external debrief. An immediate 'post-event' debrief facilitated by a designated debriefer that aims to: • ensure everyone's safety, including the person and people present during the event, including staff • ensure the person experiencing restraint is safe and monitored appropriately • return the unit to pre-crisis status • gather information and capture event details with clear documentation • ensure information is distributed to key staff prior to the formal team debriefing • elevate visibility of an event by reporting to the clinical director within 24 hours. Formal team debrief within 1–2 days of the event involving key clinical and professional staff, lived experience, cultural and whānau advocates. The formal debrief involves a rigorous analysis and aims to: • build on information gained at the immediate debrief for in-depth analysis preferably within 24hours • problem solve through root cause analysis, with a focus on examining the setting, situation, and systems involved. (cont.)	Yes Partly No	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
2. Our service has policies and procedures that outline consistent debriefing activities and expectations for each event. (cont.)	An executive and/or external debrief that is responsive to the complexity of the situation under review, urgency of need, and number of events occurring. This debrief occurs daily and or weekly depending on need and involves leaders, managers, and external consultants with relevant experience. This debrief aims to: • provide support for the treatment team • provide administration support for quality improvement and systems change to promote prevention.	Yes Partly No	
3. Our service has developed debriefing policies and procedures to address trauma responses amongst people, staff and other people present during an event.	Debriefing policies and procedures should include guidelines and frameworks that consider the potential responses and issues experienced by: the person whānau staff people present during an event services involved in the ongoing care and treatment of the person and whānau such as community-based services.	Yes Partly No	
4. Our staff are provided with training on how debriefing will inform care and treatment planning.	 Staff training includes: identifying early warning signs and trigger points for people presenting with risk factors of aggression or violence supporting people's choices in practice providing a range of self-soothing options, including culturally informed processes and approaches using the person's chosen self-soothing approaches or alternative actions identifying and facilitating early intervention and community-based solutions. 	Yes Partly No	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
Debriefing in everyda	ay practice		
5. People have a choice whether to be involved in debriefing activities either in person or by proxy, and to have whānau participate if requested.	 ensuring the person understands why this process occurs and what they can expect from it capturing the person's experience or voice in debriefing as critical information with support from peer roles and advisors ensuring the person and whānau are kept informed of outcomes and actions from the debrief organising advocate or advisors to participate by proxy, if the person is unable or chooses not to participate supporting decisions and choices led by the person around debrief time and venue making supports available to minimise the potential for retraumatisation and facilitate the collection of information incorporating tikanga Māori models and processes collaborating with whānau, cultural and community-based services to support early intervention or prevention. 	Yes Partly No	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
6. Our staff are supported to understand their own responses to restrictive practices.	 Actions include: offering both immediate team debrief or individual debrief if staff members prefer providing resources to encourage routine reflection on practice amongst staff fostering a non-blaming learning culture to foster open conversations and debriefing informing staff of outcomes and changes following the debrief providing regular supervision and cultural supervision access to Employee Assistance Program services encouraging staff to identify and access other supportive resources as required. 	Yes Partly No	



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