



## Debriefing

Debriefing is a process that has been used across different systems including but not limited to, behavioral health, education and systems for people with intellectual disabilities and mental health disorders.

According to Inclusion, Education and Learning Resources, 2019, Debriefing systems have two elements that run in parallel.

- [It can affect change in practice and procedures enhancing outcomes through providing an expedient training and feedback opportunity.]
- It can provide emotional support to both students and staff, if the experience of a restrictive practice or incident of challenging behavior was traumatic for either or both (*Jones and Kroese 2006 cited in Sturmey 2015*).

“A debriefing should provide the opportunity to support the staff member and to inform change within any setting, with the aim of reducing the likelihood of the situation recurring. Baker (2017) states that too often these aims are seen as being met by asking the staff to reflect on what they did wrong. Which then negates any positive message of staff support. However, part of the role of the debrief could be to try and ensure the situation does not reoccur, the factor that the member of staff can have most immediate influence over is their own role in the interaction or incident. Hastings (2010) states that changing staff practice can have a significant positive effect on outcomes for the people they work with, and that this is the priority.”

<https://inclusiveteach.com/2019/02/21/behaviour-debriefing-and-post-incident-support/>

Use of the debrief at Merakey within the IDD system is invaluable and creates the previously described type of environment. As the questions that follow are answered, proactive strategies can be formulated “in the moment” to decrease the risk of incidents being repeated.

Debriefing will seek to answer these questions:

Who was involved?

What happened?

Where did it happen?

Why did it happen?

What did we learn?

(Cook et al., 2002; Hardenstine, 2001)



Merakey debriefing form questions are formulated in a trauma informed way to ensure Direct Care Professionals and Managers do not feel blamed, accused or unsafe when the discussion occurs.

Team members who coordinate and implement the debriefing strategies should be trained on non-judgmental concepts and empathetic reasoning. Everyone should leave the debrief having contributed and feeling more secure about "what to do" if the event is repeated. Debriefing also assist with decreasing the risk that the event will not be repeated. With therapeutic discussion and proactive 24- hour time frame, people will feel more included and can contribute safely to the process. Problem solving and decision making are expedited; safe trauma informed strategies for both staff and the person do not have to be delayed and can be implemented with immediacy.

Debriefing is a trauma informed strategy that occurs within a 24 -hour period so that the risk of the incident reoccurring decreases. It offers time to discuss the details of the event and brainstorm effective strategies. It is a therapeutic tool that connects the Direct Support Professionals, Managers and Clinical Staff to each other with immediacy after an event that can be challenging and traumatic. Data can be taken to ensure the process is effective and decreases these types of incidents so that all environments can be safe for both the people Merakey serves and those who serve them.

Robin VanEerden, MS, LPC, NADD-CC