

Interview with Katie Jett

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Lisa Bonsall: It's Lisa Bonsall, Senior Clinical Editor for Lippincott NursingCenter. I'm here at the Lippincott Nursing Education Innovation Summit. Right now, I have the pleasure of speaking with Dr. Katie Jett. Thank you so much for talking with me today.

Katie Jett: Hi.

Lisa Bonsall: Can you start out by explaining what is debriefing?

Katie Jett: Okay. Debriefing is really what, and I'll say it in my presentation, but it is the heart and soul of simulation. And it's really been extended in the last decade to be a way to transition students from action to reflection in a variety of different settings. And I think we've thought of debriefing as simulation based only type of experience but really we should debrief with our students at every opportunity often. And the goal really is to diffuse their feelings, to help them clarify their train of thought, their pathways to decisions, refocus them in the right ways and give them the opportunity to reflect and make changes and improvements that they transition to a variety of different care and clinical settings.

Lisa Bonsall: Thank you. And how can debriefing be used to enhance clinical judgment and reflection?

Katie Jett: So one, you know, you can't really debrief without reflecting. And that is the goal. Right. Transitioning them from what they did to reflecting on why they did it, how they did it, what they could have done, what they should have done, what they did do well. When you think about debriefing to enhance clinical judgment, one of the big things is they've done that in clinical, in the classroom, on an exam, in simulation, in the virtual reality lab, wherever they're getting their clinical experience or an activity that we're doing to try to bridge that theory to practice. We have to understand their train of thought. We have to understand their path to decision. And I always use that during debriefing as I'm less concerned about what you did than understanding why you did it. And helping to reframe that, to make better decisions in the future.

So a lot of times our students aren't thinking, right? They're in a scenario. They're in a clinical, they're doing. And later on, when we take the time aside to focus and understand, then we can see why they made the decisions they made and help reframe their thinking or refocus their thinking to make better decisions in the future or to even understand what they did. That enhances clinical judgment because we're teaching them to think through what they've done, even if they didn't think through it while they did it. When you take time to debrief with them, to reflect, to diffuse the emotion, to diffuse the situation and give them the opportunity to step by step, articulate that train of thought, why they did it, we can really understand their decisions.

And we're not going to fix our learners through debriefing, we're going to help reframe that thought so that it takes the path that makes better decisions for themselves and their patients or clients. And there's so many ways that you can use it to enhance clinical judgment. I think one of the big things is taking them out of their mind and putting it out into the universe. What they did, allowing them that time to kind of walk through it, whether use a whiteboard, whether you use a reflection and journals and guided critical reflections however you do it. There's so many ways to do it.

But if you don't do it, how do we know what they did and why they did it? And sometimes their train of thought is not so off, but they just need a little guidance. And that's our job. That's our role as educators is to help them make sense of the decisions they made or didn't make and then how they can make better and long-lasting decisions in the future.

Lisa Bonsall: Great. Can you talk about the roles of the facilitator and the student during debriefing and what are some best practices?

Katie Jett: Yes, absolutely. This is a kind of funny story. Can I tell it? When I was born, my mom, I guess I was like, refusing to nurse, refusing, refusing, refusing. And my mom said to me as an infant, I don't recall, of course, that I was going to learn everything the hard way. Like, she's like, this kid's going to learn everything the hard way. And that is exactly what I did as a facilitator during debriefing. When I first started, I was an ER nurse and I was thrust into a simulation based learning environment. And I'd have these students, they go through their simulation or we'd go in clinical and I'd be like, my expectations were so unrealistic because I was used to that ER nurse, graduate nurse, you know, And so I was horrible. I would be like, you didn't do this. You didn't do this, you didn't do this. They'd shut down. I didn't understand why they were shutting down, because I was just trying to help them, right?

And I very, very, very quickly realized I am not doing something right. I didn't know what I wasn't doing right, but I spent time to educate myself. I got onto the Society for Simulation of Health Care. Like, how do I do this? Like, I didn't have any formal training. Most educators don't. You know, we learn by being thrust into an environment and trying to model best practices on educators that we admire or we self educate or seek, you know, seek external education. So I started reading everything I could. Really quickly realized that I had been doing almost exactly opposite of how I should have been doing it. And then I asked my boss, like, who does this well, who does this well here, and how can I get some opportunity to observe them and start to emulate that? And I did it with debriefing and running simulations. I also did it in clinical and in the classroom. I was a new educator, I never taught anything or anybody but new nurses. And it is very different, right? The novice student from the novice nurse.

So I learned how to facilitate well by reflecting and debriefing myself constantly. And so I studied, I studied, I studied and I observed and I observed. And just like a new nurse, I picked out what I liked that people did. And when I saw that students were engaged and were receptive and were speaking. And then when I saw what shut them down, you know, I'm like, okay, I'm not going to do that anymore. And I practiced. I asked for my faculty assignment to be in the simulation center, like, can I work? I love this. And I very quickly learned that the role of the facilitator is just that. It's almost the opposite of what we do when we're in the classroom.

Traditionally, right, that sage on the stage, we use that term all the time, but we're used to feeding our students information and giving it and giving it and giving it and then assessing it in a sometimes high stakes or somewhat stakes environment. And in debriefing you're there to transfer them through that path. Right. Not to point out what they did and did not do. We call out what we you know, we call out what we see. But really it's about understanding. And the facilitator has to set that stage like you have to be like, this is a safe learning environment.

Why do we do these things? We do it so that you have the opportunity to think through, make decisions, apply theory to practice in an environment where it's okay to make mistakes. That's not how I started. I didn't do that. And they felt judged and they felt unsupported and defeated a lot. And I didn't want them to... That's clearly not what I wanted. The facilitator really has to...they have to set the stage for how the environment is going to be. This is a safe space. I need your attention. I need your engagement. Here are the rules. Here are the expectations.

Clear expectations, everything. In every year of adulting, I realize how important being clear with your expectations are. And so I think that's huge. Here's what we're going to do. It shouldn't be a surprise. Like we're always like, ooh, we're going to reveal something, right? It shouldn't be a surprise. Let them know what you're doing. They're going to get to do it, and we'll talk about that afterwards. So giving that climate set to be a safe environment, a serious environment, but a safe environment, and then just what my role is, what your role is, here's what the day is going to look like. Pre briefing them, giving them the opportunity to ask questions before they go in to either clinical, the activity you're doing, class or simulation, or virtually as well and then telling them what's going to happen afterwards. I think that's really, really important.

But this isn't a time to teach. This isn't a time to reteach. This isn't the time to lecture. This is a time to understand that doorway to decision, that path to why they did something and help them critically think and clinically judge that situation to make better decisions or to make the good decisions again. That's really the heart and soul of it. And then also you have to think about...like you might be one facilitator for eight students in a class of 60. So we have to be...every student is entitled to the same learning experiences. So we have to be more diligent and focused that when we're facilitating, we're following the own objectives of our day. We don't get off on a tangent of reteaching. That's not really...you're sprinkling in, like you're sprinkling in content for clinical decisions and, and, you know, elaborating on the whys and the what's and the deeper level stuff. But it isn't the time to reteach content.

And so you have to check yourself. And then also when you're you know, if you're not doing an entire group and not doing it the same, we want to make sure the students are getting the same opportunities for learning and it's really not fair if you're, you know, going over what's going to be on a quiz next week or content...when that's really not the purpose of debriefing at all. So you just have to check yourself.

And it's really hard, right? Because we as nurse educators are opportunists. We look at every opportunity to teach, like everything is an opportunity, but really it's not about us. And I think that's, that's what you have to remember. It's not about us and giving them what we know. It's about giving them the opportunity to safely show us what they're doing and what they know and us help to clarify things...to reframe thought, to help pull out, you know, the meat and potatoes of that experience. It's not a time to lecture. That is hard.

What makes it a little bit easier to is if you can remove your learners from the area in which you did whatever you did, whether it was simulation, clinical or whatever. One of the best practices is to take them out of the environment. I do some pretty high stakes simulations where there's med errors, the patient declines, they deteriorate. You know, the students have to identify that and it's intense, right? And they are not without emotion. It might be a mannequin or it might be a situation in class. But they're judging themselves and they're taking that experience seriously. So if you can remove them from that environment, it almost immediately diffuses some of that energy from what they just did. I think that's really, really important.

And facilitators have to read the room. All students are different, cohorts are different, groups are different. Some are very engaged. Some it's, you know, like pulling teeth to get them to do anything. We have to not be afraid to mix it up, to read the room, to change the approach based on the people in front of us without losing the objectives of whatever that experience was. I love moving them out of the area. I love giving them the opportunity to emotionally diffuse, even if it seems like it wasn't a very intense experience.

I think, in one word, how did you feel? And sometimes it's stupid, horrible, like I know nothing, you know, but sometimes it's okay, good, better, anxious but prepared, you know. So we give them a time to diffuse that out a little bit and then focus on the experience and walking through it. I think that's really important as well.

It should always be about the learner. I think that is a real big takeaway that I've had. It's not about me and what I know, not about me and what I want to teach. It's about them and their experience and keeping that at the forefront. I think it's also really important for best practices that you seek formal training or learning. That you, like I did, observe people that do it well and emulate the good facilitators because it is all over the board with faculty, especially if you don't have a simulation model that you adopt. So just again, surrounding yourself with people that are experienced and engaged and are there for the students is going to be really important.

Lisa Bonsall: Thank you so much for talking with me today.

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