

Event Debrief

PURPOSE: This tool is designed to structure a rapid investigation and review significant occurrences.

Complete the debrief as soon as possible following the event, ideally prior to the end of the shift.

GOALS:

Identify defective processes, encourage reflection on actions, learn from and improve those processes, provide care to the team
when needed, and to SHARE learnings with others using a standardized format.

Debrief Facilitator:	Title:	Debrief Date/1	Debrief Date/Time: Patient Name:	
Event Date/Location:	MRN:	Patient Name:		
VOICE Number:				
Debrief Participant	1	Γitle	Department	
1				
SITUATION: Description of event, approxir event discovered?)	nately one or two sentences	s. (What happened? What	was the outcome? How was the	
BACKGROUND: Provide some backgrour	nd information related to this	problem, opportunity or s	ituation.	

ASSESSMENT: What is your assessment of the current situation, problem or opportunity? Focus on system processes positive and/or negatives; what went well/what could have gone better. (Consider teamwork, staffing, equipment/supplies, communication etc.)
and or negatives, what went well-what could have gone better. (Consider teamwork, Stanning, equipment/supplies, communication etc.)
RECOMMENDATION(S): Consider immediate interventions to prevent /minimize harm. What action, solution or experiment do you recommend? What are you requesting? Please include an action due date for each action item.
ADDITIONAL CONSIDERATIONS (Check all that apply and include details):
□ Notify your chain of command?
☐ Is there a need to secure equipment, supplies, medical devices, and/or medication?
☐ Any patient or family ongoing support needed?
☐ Do we need to involve Social Services, Pastoral Care or Patient Liaison?
☐ Care for the caregiver?
☐ Is there a need for disclosure?