RN TRANSITION TO PRACTICE — FREE RESOURCE

The Clinical Debriefing Guide

A quick version and a full-length version for debriefing with your orientee after any shift, event, or difficult moment.

HOW TO USE THIS: Debriefing isn't just for codes and near-misses. A quick check-in after any shift that felt "off" builds the same reflective habits that build clinical judgment over time.

When to Debrief

- ☐ After a code, rapid response, or unexpected patient decline.
- ☐ After a near-miss or medication error — caught or not.
- ☐ After a particularly difficult patient, family, or coworker interaction.
- ☐ After the first time performing a new or high-stakes skill.
- ☐ At the end of any shift that felt "off," even if nothing went technically wrong.
- ☐ Anytime your orientee seems shaken, quiet, or different after something happened.

The 2-Minute Debrief (Plus/Delta)

Use this when there's no time to sit down — in the hallway, at the nurses' station, between patients. It's built on the Plus/Delta model, a simple, widely used debriefing technique.

Plus: *"What's one thing that went well just now?"*

Delta: *"What's one thing you'd do differently next time?"*

Plus: *"What's one thing you learned or noticed?"*

Close: *"Anything you want to make sure we come back to later?"*

The Full Debrief (Gather → Analyze → Summarize)

Use this for anything higher-stakes — a code, a hard conversation, a first-time skill. Find a quiet few minutes, sit down if you can, and work through all three steps in order. This structure is adapted from the Gather-Analyze-Summarize (GAS) debriefing method used in TeamSTEPPS.

1. Gather — reconstruct what happened

Ask: *"Walk me through what happened, step by step, from the beginning."*

Ask: *"What did you see, hear, and notice as it unfolded?"*

Ask: *"Is there anything I might have missed or seen differently?"*

2. Analyze — explore why, and how it felt

Ask: *"Why do you think that happened?"*

Ask: *"What made this hard? What helped?"*

Ask: *"How are you feeling about it right now?"*

3. Summarize — lessons and next steps

Ask: *"What's the one thing you want to remember from this?"*

Ask: *"What would you do the same next time, and what would you do differently?"*

Ask: *"What do you need from me before your next shift?"*

Emotional Check-In Prompts

Open with one of these before diving into the clinical details — especially after anything intense. It signals that how they're doing matters as much as what happened.

- ☐ "Before we go through what happened clinically, how are you doing?"
- ☐ "This kind of thing can sit with you — is there anything you want to say before we start?"
- ☐ "There's no wrong answer here. I just want to understand your experience."
- ☐ "Do you want to talk about this now, or would you rather wait until tomorrow?"

Built on: Two widely used debriefing frameworks — Plus/Delta (common in nursing simulation debriefing) and Gather-Analyze-Summarize, part of the AHRQ TeamSTEPPS program.

Debrief Log

A quick record of what you debriefed and when — useful for spotting patterns over an orientation and for your own reference.

Date	Event / Trigger	Key Takeaway	Follow-Up Needed?