(A) Policy Statement

Define the scope and use of debriefing on the Kobacker Child and Adolescent Inpatient Unit.

(B) Purpose of Policy

The purpose of debriefing is to assist in the prevention of the future use of seclusion and restraint by determining if all least restrictive alternatives were considered, and by identifying what led to the incident and what could have been done differently. Debriefing also can identify organizational/process barriers that can be revised in order to achieve a reduction and elimination of restraint and seclusion. Debriefing after a seclusion and/or restraint event can also help to minimize or reverse the negative effects these restrictive measures can cause.

(C) Procedure

Upon conclusion of each incident of seclusion and/or restraint, debriefing will occur. Debriefing will include staff, patients and parents.

1. Immediate post-event debriefing shall be completed by the next working day. (No more than 24 hours)
   b. If requested, as indicated on the nursing admission assessment form, notify the patient’s family of the seclusion/restraint event and debrief the incident with the family. If the family requests additional participation in the debriefing process, arrangements will be made. Once the initial crisis has stabilized, provide a copy of the Patient Restraint/Seclusion Debriefing Form for the patient to complete, discuss and process with a staff member who has completed training and under the supervision of the charge nurse.
   c. Notify the Nurse Manager/designee of the incident.
   d. Patient debriefing should involve team members who were involved in the incident.
   e. Assist patient with reviewing and revising coping strategies as needed.

2. Formal debriefing process shall be initiated within 24 hours of the event.
   a. The Kobacker staff will discuss the event which will be documented on the Staff Debriefing form.
   b. If further discussion/intervention is required, the Nurse Manager/designee will intercede and assist.
   c. The forms will be kept in a notebook for future performance improvement activities and staff educational inservices.
<table>
<thead>
<tr>
<th>Approved by</th>
<th>Review/Revision Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tamara Cerrone, BSN, RN, Nursing Director Child/Adolescent Inpatient Unit</td>
<td>3/2007</td>
</tr>
<tr>
<td>Tanvir Singh, MD, Medical Director, Kobaaker</td>
<td>5/17/2010</td>
</tr>
<tr>
<td>Monecca Smith, MSN, RN, Director of Nursing / CNO</td>
<td>2/25/2011</td>
</tr>
<tr>
<td></td>
<td>7/29/2014</td>
</tr>
<tr>
<td></td>
<td>5/26/2016</td>
</tr>
<tr>
<td></td>
<td>5/26/2016</td>
</tr>
</tbody>
</table>

Review/Revision Completed By:
Administrator Ambulatory Services & Behavioral Health
Tammy Cerrone, Staff Nurse, A Mullins, LISW-S

Next Review Date: 5/26/2019

Policies Superseded by This Policy: 1-M-42