**Debriefing with QSEN Competencies in Mind. Checklist Example**

**Safety:** Minimizes risk of harm to patients and providers through both system effectiveness and individual performance.

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| Competency | Observation |
| 1. Assess patient, equipment and room for potential safety issues. |  |
| 1. Tag or remove defective equipment. |  |
| 1. Report potential or actual safety concerns. |  |
| 1. Identify national patient safety standards. |  |
| 1. Use appropriate checklists. |  |
| 1. Environment Check: |  |
| * 1. Patient’s call light is within reach |  |
| * 1. Clear pathways |  |
| * 1. Bedside table within reach |  |
| * 1. Bed lowered |  |
| * 1. Bedrails – as needed |  |
| 1. Tubing Check. |  |
| * 1. Trace ALL tubes from pumps, gas supplies and vacuums for appropriate connections to patient. |  |
| * 1. Expiration dates. |  |
| * 1. Maintenance IVs |  |
| * 1. IV piggy backs. |  |
| 1. Clean linens |  |
| 1. Fluid containers covered with lids |  |
| * 1. Medication Administration: |  |
| * 1. Follow hospital policy for medication administration. |  |
| 1. Eight Rights of Medication |  |
| * 1. Right patient (NBA- Name, Birthday, & Allergies) |  |
| * 1. Right medication |  |
| * 1. Right dose |  |
| * 1. Right route |  |
| * 1. Right time |  |
| * 1. Right reason |  |
| * 1. Right documentation |  |
| * 1. Right response |  |
| 1. Infection Control |  |
| * 1. Hand washing |  |
| * 1. Appropriate glove use |  |
| * 1. Appropriate disposal of contaminated items |  |
| * 1. Touching hair face or glasses |  |
| * 1. Cleaning diagnostic tools e.g. cleaning stethoscope. |  |
| 1. Complete incident report as appropriate. |  |
| 1. Use and identify safe practices to prevent injury to self. |  |

**Patient Centered Care:** Recognize the patient or designee as the source of control and full partner in providing compassionate and coordinated care based on respect for patient’s preferences, values, and needs.

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| Competency | Observation |
| 1. Determine patient’s view of illness, beliefs and values as appropriate. |  |
| 1. Involve the patient in decision-making processes |  |
| 1. Involve the patient when formulating a plan of care |  |
| 1. Involve family members in the patient’s care |  |
| 1. Ensure that information shared with family members does not breach patient confidentiality |  |
| 1. Ensure plan of care is appropriate for the patient’s age, gender, and cultural and religious background. |  |
| 1. Value the patient’s expertise with their own health and symptoms |  |
| 1. Value the range of human diversity and try to learn from the patient |  |
| 1. Determine patient’s pain and preferred methods for relieving pain. |  |
| 1. Communicate therapeutically with patient and family |  |
| 1. Use terminology patient and family will understand. |  |
| 1. Complete patient assessment which is appropriate for the diagnosis or problem (assessment can be used as a separate topic). |  |
| 1. Convey patient’s wishes to other health care members. |  |
| 1. If appropriate to the scenario, determine patient’s/family’s spiritual beliefs and ensure patient has access to spiritual support. |  |

**Teamwork and Collaboration**: Function effectively within nursing and inter-professional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

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| Competency | Observation |
| 1. Appropriate delegation to auxiliary staff |  |
| * 1. LVNs |  |
| * 1. CNAs |  |
| 1. Willingness to help and support other nurses and staff members |  |
| 1. Practice within own scope of practice. |  |
| 1. Request information from other team members when needed. |  |
| 1. Willingness to ask for help. |  |
| 1. Identification of failure to speak up by a member of a team. |  |
| 1. SBAR (Situation, Background, Assessment, Recommendation) |  |
| 1. Assume role of team leader when appropriate. |  |

**Quality Improvement (QI)**: Use data to monitor the outcomes of care processes and use improvement methods to design and test changes to continuously improve the quality and safety of health care systems.

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| Competency | Observation |
| 1. Identify gaps between local and best practice. |  |
| 1. Identify the effects of changes in practice/equipment/environmental design. |  |
| 1. Test quality measures as useful and relevant tools. |  |
| 1. Identifying team behaviors/communication that need improvement. |  |

**Informatics:** Use information and technology to communicate, manage knowledge, mitigate error, and support decision making.

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| Competency | Observation |
| 1. Retrieve relevant data from the EHR. |  |
| * 1. Lab results. |  |
| * 1. Diagnostics. |  |
| * 1. Last PRN dose. |  |
| 1. Identify clinical missing clinical data needed for patient care. |  |
| 1. Use EHR to track patient’s response to medication. |  |

**Evidence Based Practice:** Integrate best current evidence with clinical expertise and patient/family preferences and values for delivery of optimal health care.

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| Competency | Observation |
| 1. Prebriefing exercise to research current best practice completed prior to simulation. |  |
| 1. Compare learner performance to current best practice (identify performance gaps). |  |
| 1. Compare behaviors against course textbook/checkoff sheets and/or local hospital policies and procedures. |  |
| 1. Identify methods for learners to stay up to date with evidence based practice. |  |