DEBRIEFING at the BEDSIDE

Basic Debriefing Process for Birth Professionals

Who this outline is for: Anyone on the healthcare team working with people in the perinatal period

Every person giving birth has an idea of how it might go for them. During the days, weeks, and months following birth, it's natural for birthing people to compare and contrast those expectations with what actually happened. These birth memories can live with each person for a lifetime (Simkin, 1992). One of the primary predictors of a birthing person's experience is the relationship with their health care practitioners (Edmonds, Declercq, & Sakala, 2021).

Debriefing the birth experience with someone takes training, practice, and a lot of self-work. Here's a basic outline of why birth debriefing is vitally important for parents and also ways it can benefit you, too!

Learn more scripts, charting basics, and resources in the Trauma-Informed Birth Nurse Membership.

Learn More



Trauma-Informed

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BASICS of a DEBRIEF

Be Honest

In developing trust, it's important to center honesty. Be clear if you have a time constraint and what you can and can't be confidential about. Ask "may I offer something/may I share something I observed?" Then provide a personalized, honest, positive impression from the experience, if possible (plant seed of accomplishment). Ex. "I could tell you were scared and you were calm breathing for your baby the whole time."

DOs & DON'Ts

Basic Tips

Do's

Do sit down

Do validate feelings

Do openly hear frustrations

Reminder: A short, bedside debriefing opportunity doesn't need to be charted in detail. However, the client may disclose concerns that may require additional follow-up and/or referral. If so, discuss your professional obligation with them, too. This may include case management, updates to provider for an earlier follow-up appointment or PMAD screening, social work, or unit manager in the case of staff misconduct. If unsure, it's best to ask. You may be the bridge between this client and the specialized pospartum help they need.

Do debrief your own feelings with a trained pro <u>at a later time</u>

Don't's

Don't look or feel rushed Don't assume others' intentions or qualify their actions Don't promote toxic positivity - feelings are valid and normal Don't try to fix anything

Remember: You're not responsible for your patients' feelings. You won't have any consequences for negative feelings. You are not to blame for their feelings. Listening without fear of repercussion can help you stay present.



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Resources:

- Debriefing the Front Lines
 <u>debriefingthefrontlinesinc.org</u>
- Red Star Nurses, Overtime Journal
 <u>redstarnurse.com</u>
- <u>Trauma Informed Care in the Perinatal</u> <u>Period</u> by Julia Seng

UNIT Pebrief RESOURCES

Unit-Specific Actionable Steps

Debriefing at the bedside is a tool for individuals that can be scaled to support a shift to more unit-wide, trauma-informed practices.

Our vision for your unit:

- Print and laminate pages 1-4 for an easy-grab staff resource. Edit this section below to include the local resources your staff can use to support the debriefing.
- Print copies of page 5 for parents to keep after a bedside debrief.
- A bedside debrief doesn't have to be a formal process. In the early hours and days
 postpartum, the birth experience is still very fresh. When staff prioritizes active
 listening, you're acknowledging and helping the birth person begin a process that will
 take time.

Personalize this page for your unit-specific resources and reminders so that your whole team can more easily integrate regular bedside debriefing

Reminders & Resources



