

Debriefing after Clinical Events in the UNC Pediatric Emergency Department: Development of a Culture of Safety

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UNC
INSTITUTE FOR HEALTHCARE
QUALITY IMPROVEMENT

Patient Story

- 10 yo in traumatic accident brought to ED in cardiac arrest
- Team works hard to resuscitate the patient, but there is not return of spontaneous circulation
- Family brought to patient's room for viewing and grieving
- Team debriefs



Importance

Why does this project matter?

- Debriefing improves future patient care
- American Heart Association (AHA) and American Academy of Pediatrics (AAP) recommend debriefing
- Improved effectiveness of teams
- Aligns with UNC Health's goals

Smart Aim 1: Increase the % of debriefs with closed loop communication to the front line AND escalation of trends to leadership from 0% to 100% by September 30, 2025

Smart Aim 2: Increase the % of Pediatric Emergency Department healthcare workers who agree or strongly agree with, **“This unit regularly reviews work processes to determine if changes are needed to improve patient safety”** *** from 72% to 85% by September 30, 2025

Primary Drivers (What)

System to Identify Events to Debrief

System to Conduct Debriefs

System to Synthesize Debrief Findings

System to Escalate Trends

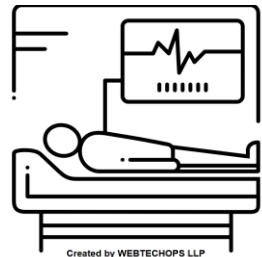
Closed Loop Communication With Front Line

GLOBAL AIM

Build and Maintain a Culture of Safety in the Pediatric ED and Improve Processes of Patient Care

Finding

Patient Care



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Opportunity



Created by Fajar Studio from the Noun Project

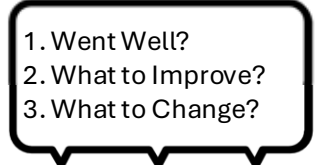
SAFE Report

QR Code → Electronic Request
Verbal Request
ED to PICU Transfers in Epic



Created by Takao Umehara from the Noun Project

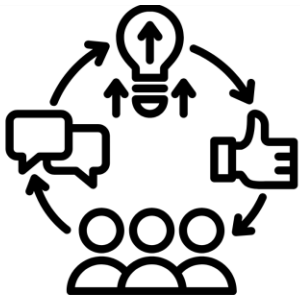
Debrief



Created by Sergi Delgado from the Noun Project

Fixing

Process Redesign



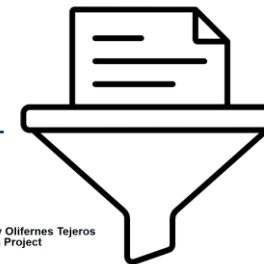
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Patterns



Repeat Findings

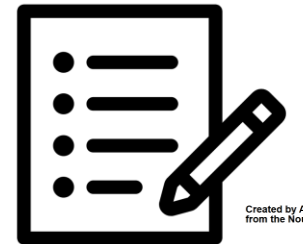
Filter



Created by Olfernes Tejeros from Noun Project

One Offs

Findings



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Closing the Loop

Councils

- ED
- Childrens' Patient Family



Created by Thomas Deckert from the Noun Project

Leaders

- Peds ED
- ED



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Debrief Participants



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Human Factors Interventions

PED eBlast



Created by nuzulis syfaah from Noun Project

Education



Created by Stigiman from Noun Project

Simulation



Created by Febrian Hidayat from Noun Project

Standard Work



Created by wagliahtul mukarramah from Noun Project

Pediatric ED Debrief Program Weekly Report, Week Ending 09/16/25

KNOW

Debriefs Requested This Week

2

Debriefs Completed This Week

1

SHARE

Remember!

- Crowd control is essential in any trauma or resuscitation. Some tips include: delineating roles early, asking for quiet, and requesting those not actively resuscitating to step outside.

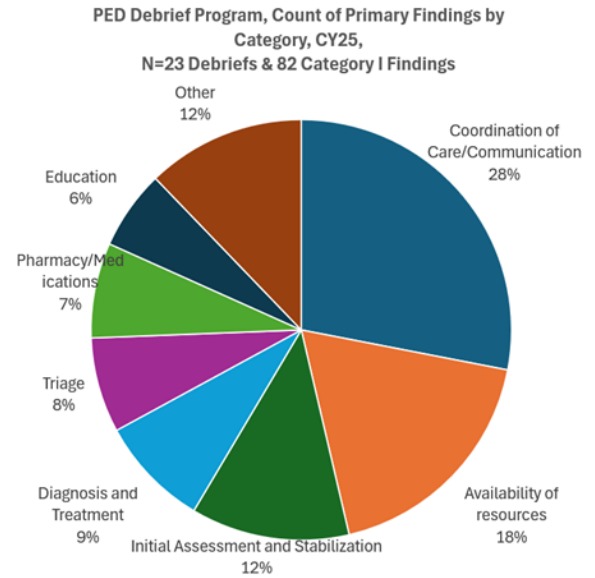
Education:

The IO skills station remains in the peds waiting room area for those who want to try it out!

DO

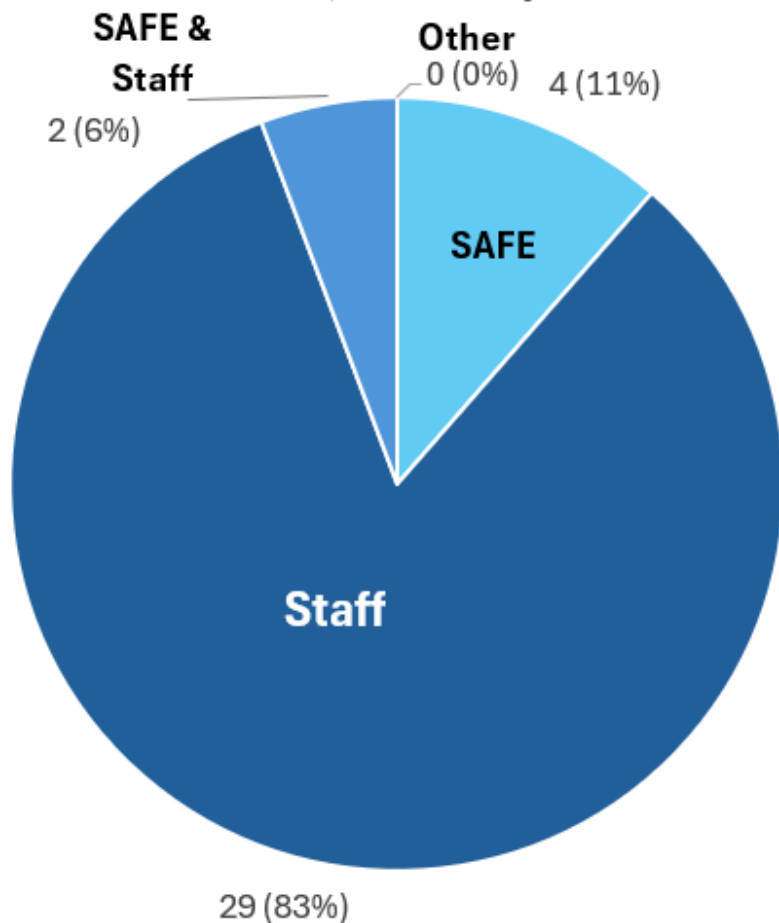
Check out this article on how a trauma center implemented roles stickers:

[How We Did It: Defining roles and preventing crowding in the trauma bay - Trauma System News](#)

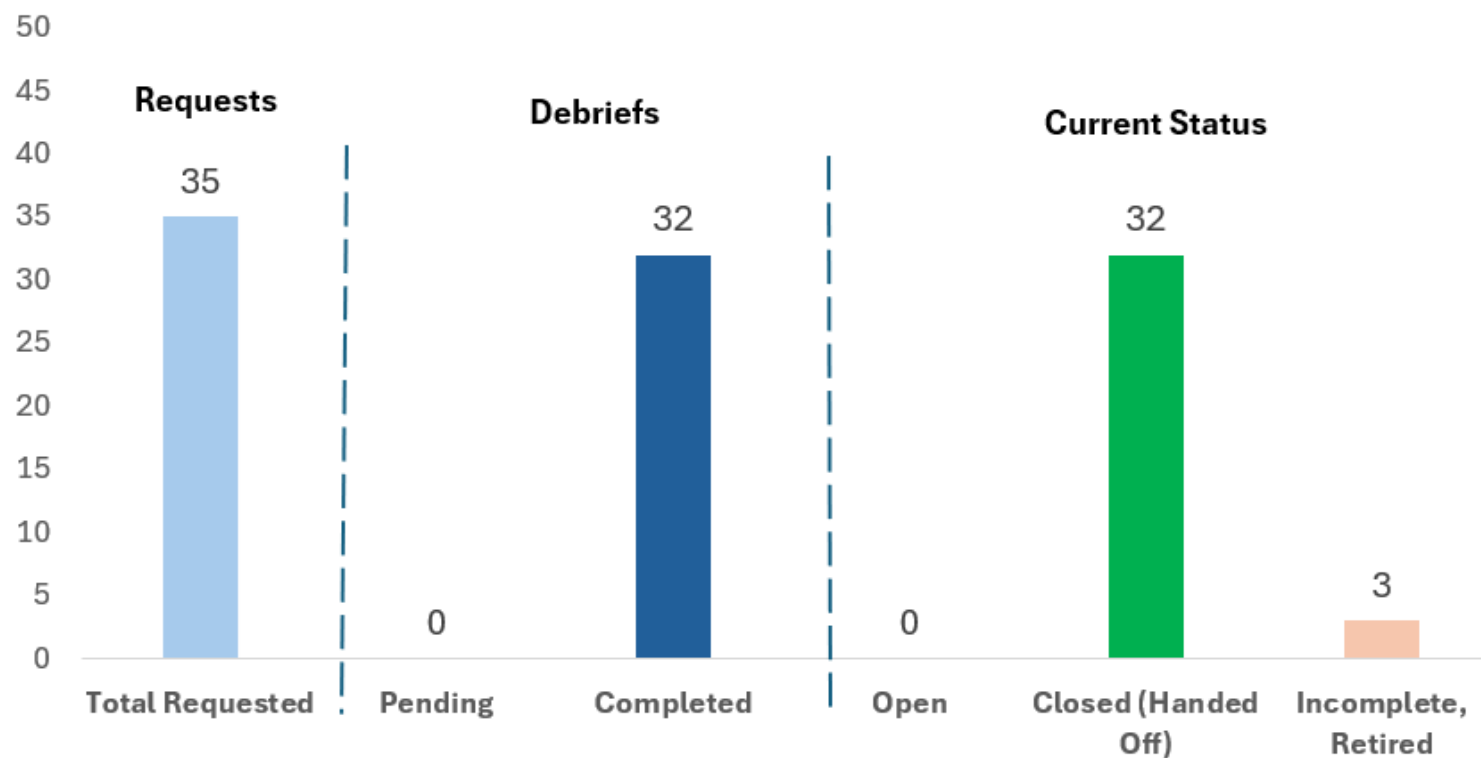


Debrief Requests

Peds ED Debrief Requests by Source CY25, N=35 Requests

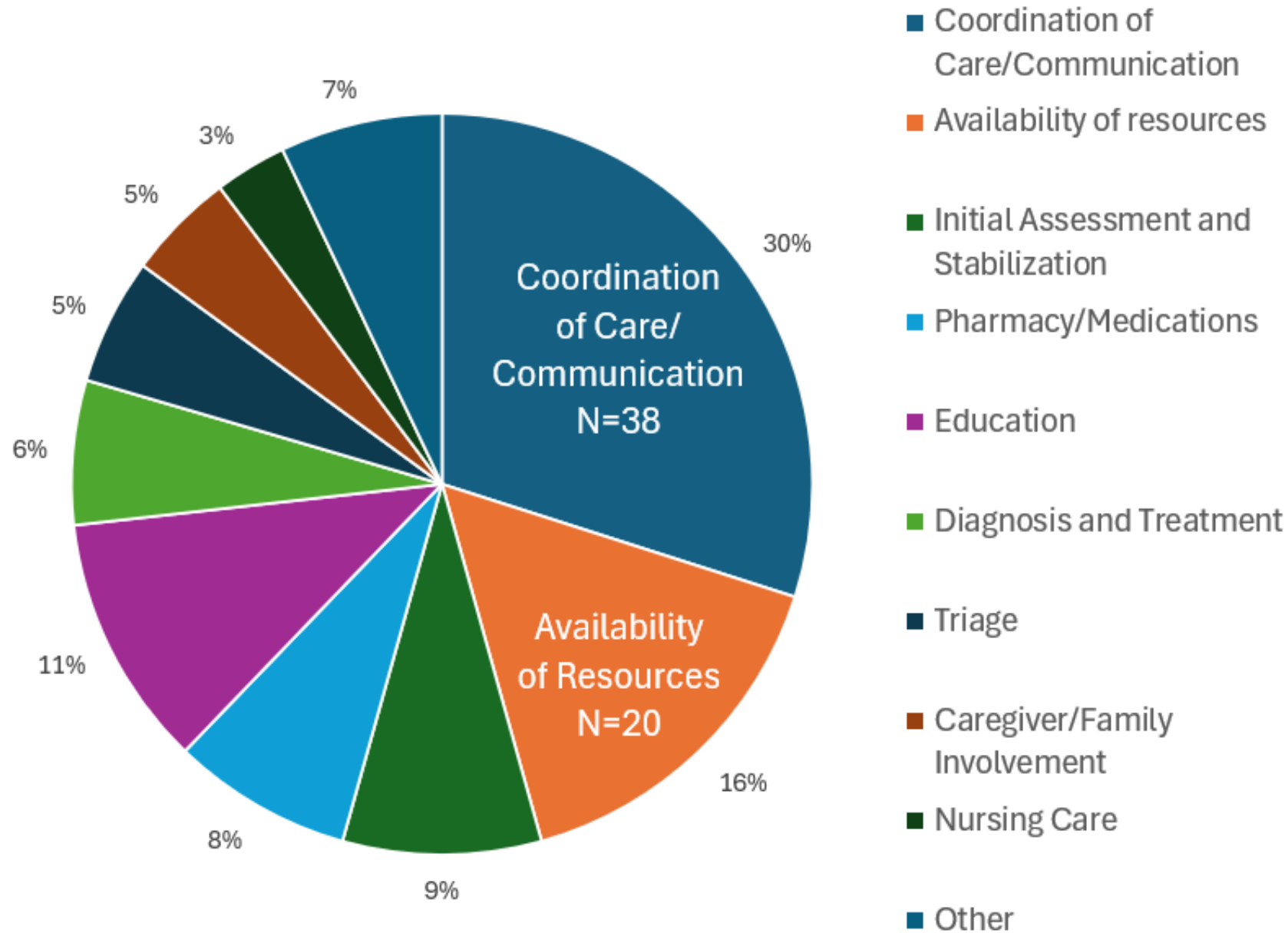


Peds ED Debrief Request Status CY25, N=35 Requests

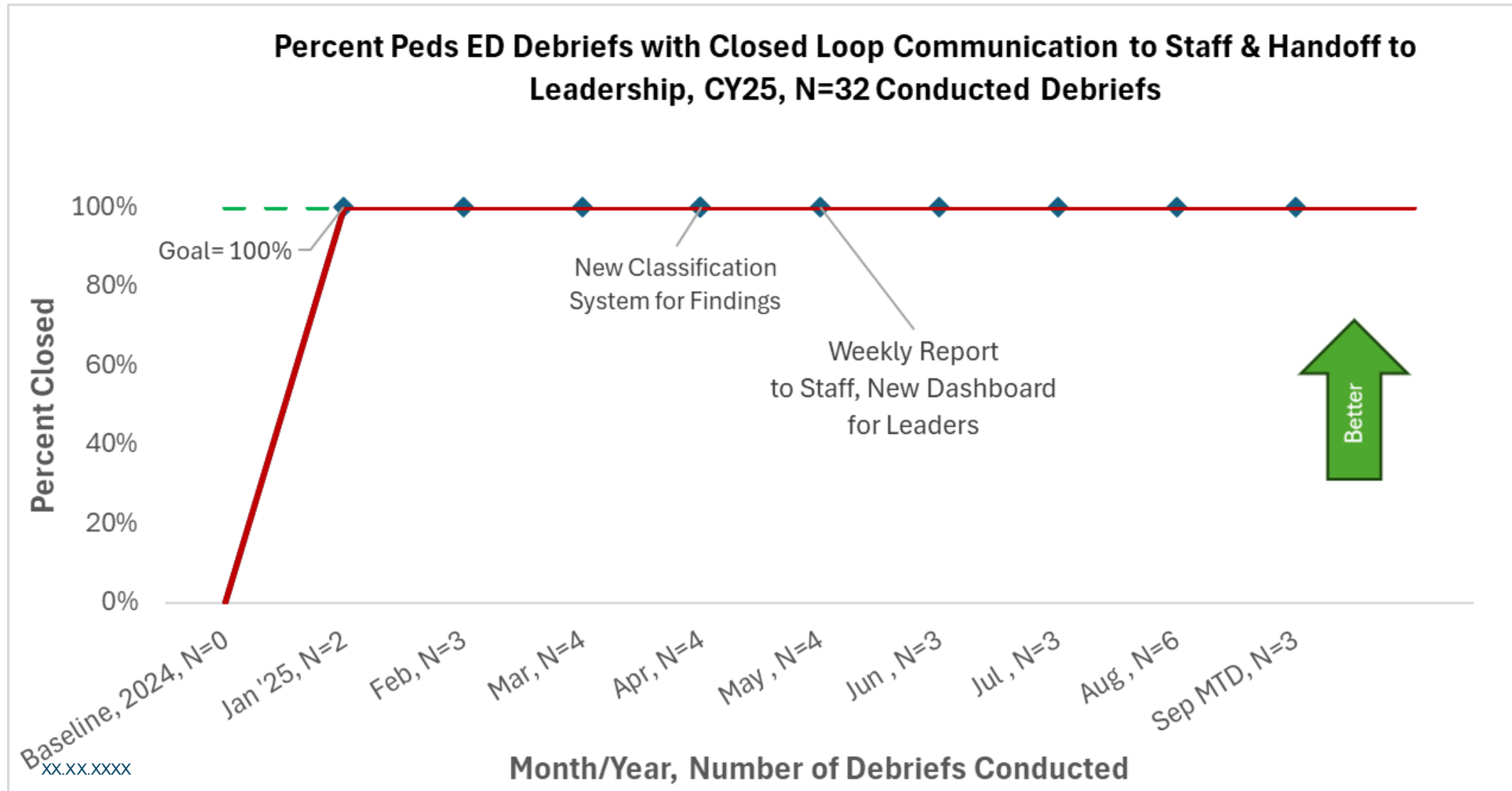


PED Debrief Program, Count of Findings by Category, CY25

N= 32 Completed Debriefs and 127 Findings



Aim #1: Closed Loop Communication to Staff and Handoff to Leadership



Aim #2: Psychological Safety of Staff Participating in Debriefs

**Percent of Debrief
Participants Reporting
an 8-10 Response
(Scale 0-10) to, "I Felt
Safe During the Debrief"**

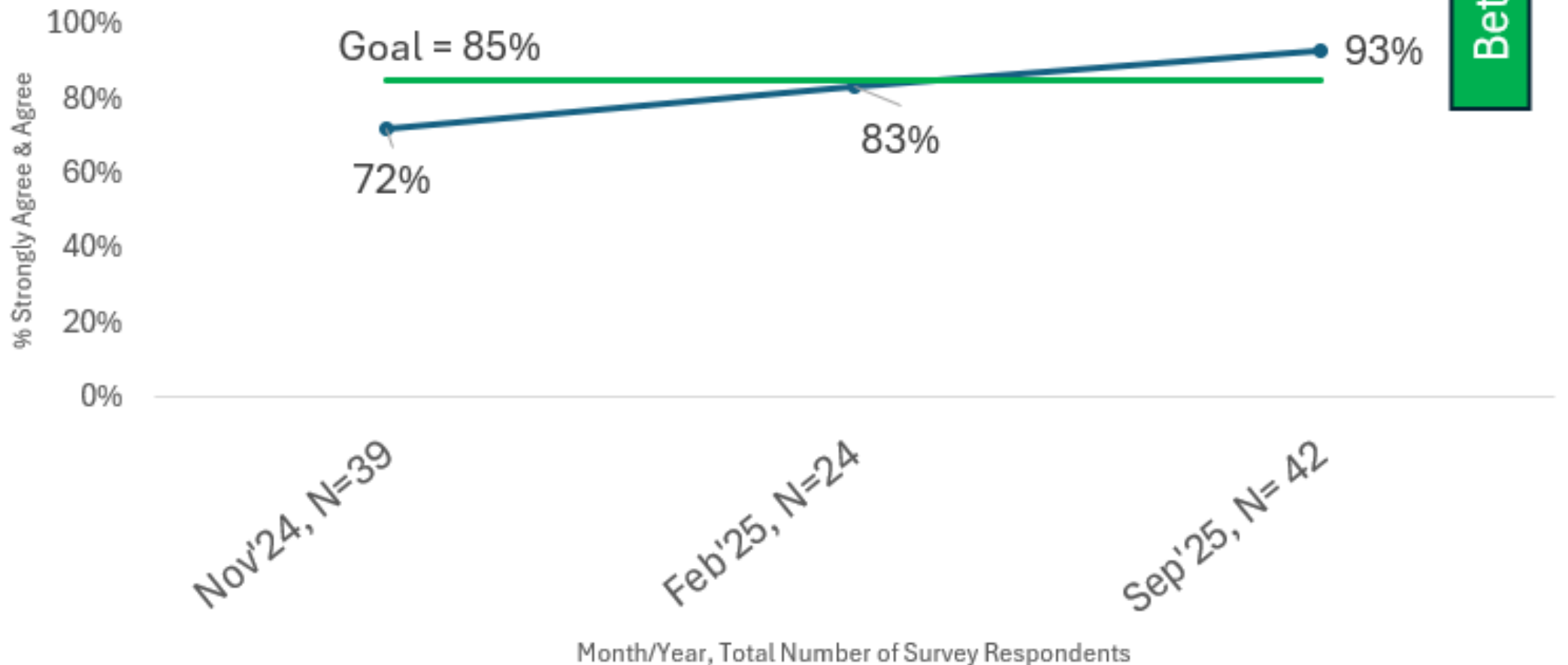
Number of Completed Debriefs
N=32

100%



Aim #2: Psychological Safety of Staff Participating in Debriefs

% Pediatric ED Respondents Who Strongly Agree & Agree with the Statement,
“This unit regularly reviews work processes to determine if changes are needed to
improve patient safety.”



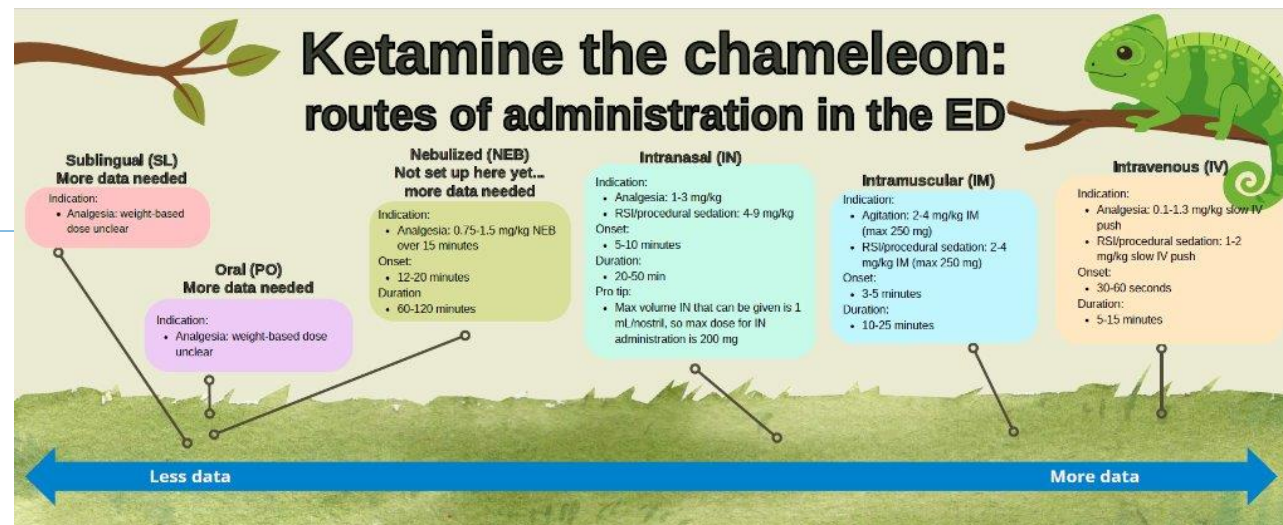
Action Item Completion

CY25 Improvement Teams Launched

- Pediatric Massive Transfusion Protocol Revision
- Pediatric Post-Mortem Care
- Supply Overhaul

Improvements from Debrief Findings

- Pediatric ED Resuscitation Pager
- Pediatric Massive Transfusion Protocol Job Aid
- Unit bereavement process
- 24 hr pharmacy list



Haili Gregory PharmD

Text Page: “PED RESUSCITATION**” to alert the following teammates of a pediatric resuscitation anywhere in the ED:**

- ED Charge
- Respiratory Therapy
- ED Pharmacists
- Children’s Emergency Response Team
- Child Life
- Chaplain

Scripting for text page:

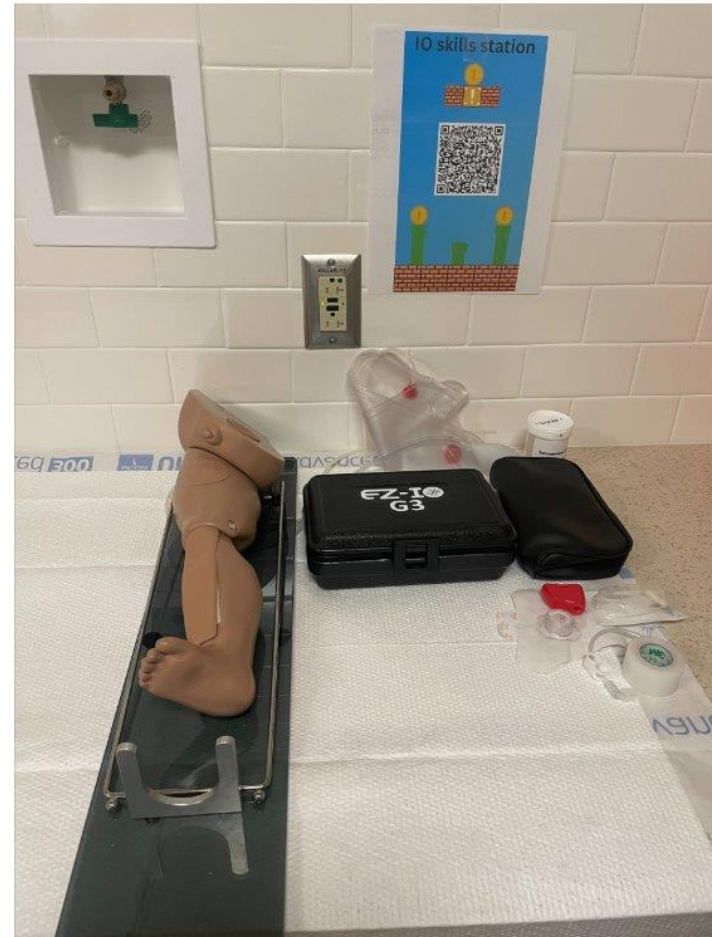
• [+/- PRE ALERT if applicable] Peds ED resus G147 or ED Trauma Bay x [whatever info you have about the patient including their age & why you’re sending the page] [patient here now, please respond now OR will page again when patient arrives] [your name & call back number]

If you need the PICU fellow call them directly at **984-974-5488**

alth

Sustainability Plan

- Continue to train facilitators
- Weekly team meetings for accountability and for weekly blast development
- Bimonthly leadership meetings
- Easy to use and updated database



Spread Plan

- Change Kit intro to Childrens Emergency Response Team and Pediatric Urgent Care
- Obtain feedback and spread further



Patient Story Conclusion



← ↻ 🔒 <https://www.pemportal.net/ped-resource>

Why IV Pumps & Syringe Pumps Matter in the PED (Infographi

Papoose Immobilizer Guide

PIV Infiltration Education: Management of Non-Chemotherapeu
Extravasations

PIV Infiltration Education: Touch Look Compare Chart

PIV Infiltration Education: Extravasation / Infiltration of Caustic
Prevention and Treatment (Policy Stat)

Post Mortem Care and Bereavement in the PED



*If this sign is out, it
means that someone
is saying goodbye to
their loved one.*



*Please be kind and
respectful during this
time.
Thank you.*

*Please be kind and
respectful of those
in this room.
Thank you.*



Acknowledgements

- May-Britt Sten, MSN, RN, CPHQ, Carlton Moore MD and the rest of our team
- All of the patients and their families involved in the clinical events we debriefed
- All of the staff involved in clinical care of these patients in the PED and who participated in debriefs so far

