

MODULE IX - UNIT 5



CLINICIAN WELLBEING:  
SELF-CARE IN THE HEARING CLINIC  
DEBRIEFING DIFFICULT CASES

INSTRUCTOR'S GUIDE

Estimated time for this unit: The time will be dependent on the number of activities selected, as well as the time allocated to the activities.

For a more content-only focus, allow 60 minutes per lecture. If activities are included, two hours are recommended.

### **1. Learning objectives**

1. To understand the need and processes of debriefing.
2. To increase knowledge in the appropriate timing, confidentiality requirements, duration, formats, and focus areas of debriefing.
3. To gain experience in selecting and implementing appropriate tools from the debriefing toolkit.
4. To develop a sustainable debriefing and overall wellness strategy to process difficult encounters and emotional reactivity.

### **2. Concepts to master**

When clinicians hear and see difficult things in the course of their work, the most normal reaction in the world is to want to debrief with someone, to alleviate a little bit of the burden they are carrying. It is healthy to turn to others for support and validation.

Debriefing is poorly defined (and often confused with supervision). The timing of when, and why someone would benefit from debriefing is unclear. The format, duration, and permissions required are unclear. Many clinicians don't debrief, or if they do, they don't always obtain permission from a colleague before debriefing all over them.

The need for a gentle, effective strategy to support compassion satisfaction while gently preventing your colleagues from telling you too much is possible and will be addressed in the following lectures. In order to support development of these techniques in the person-centered clinician's repertoire, the following concepts will be mastered in lecture 5:

- Informal debriefing
- Formal debriefing
- Limited-impact disclosure
- Vicarious trauma

### 3. Reading and preparation

It is recommended to take an approach of introducing the concepts via the lectures, practice the skills during activities, and then seek out further information and reading. A reading list is provided at the end of each lecture.

For slide 16:

<https://www.16personalities.com/free-personality-test>

Because this section deals with quite emotive content, it is recommended that the use of personality tests and lists allow for a little humor, creativity, and emotional space around the topic. It is further recommended that a slide with assistance (such as slide 12 of Lecture 2) be included.

### 4. Lecture 5

Debriefing difficult cases

In this lecture, we will explore why, when, and how to use debriefing as a protective strategy against vicarious trauma and compassion fatigue. The aim is to provide participants with a foundation from where they can develop and expand their debriefing requirements.

### 5. Activity

#### Activity 1: Domains of clinical work

(slide 6, 5 minutes)

Discuss which strategy would best suit the following clinical scenario: supervision, reflective writing or debriefing.

- You incorrectly place the headphones during a hearing assessment (supervision)
- You forget to ask key questions during a case history with a family (supervision, reflective practice)
- You encounter a client with Kabuki syndrome, and you have no idea what it is (reflective practice)
- Your client is angered by the slowness of your assessment. (supervision, reflective practice)
- Because your previous client was so angered by the perceived slowness of your assessment, you find yourself with sweaty palms and panic when you have to assess your next session (debriefing)

#### Activity 2: Supervision and debriefing

(slide 9, 15 minutes)

Often, people draw a blank when asked that they want. As

far as supervision and debriefing goes, it is a good idea for everyone in the relationship to know what it is you like them to provide.

Let's start with the supervisory relationship. Think about the following two questions:

- As a supervisee, what skills and qualities would you like your supervisor to have?
- As a supervisor, what skills and qualities would you like to see in the people you supervise?

Draw three columns on a white board, and have participants list desirable skills, qualities and attitudes under each column (see slide.)

### **Activity 3: Knowing yourself**

(slide 17, 15-30 minutes)

In order to know when to debrief, it is often helpful to have a better understanding of yourself.

Complete the 16 personalities test:

<https://www.16personalities.com/free-personality-test>

This could be completed prior to the lecture or during contact time. Participants should then group themselves into the four broader categories:

- Analysts
- Diplomats
- Sentinels
- Explorers

In the four groups, discuss the following questions:

- For me, what is the best way to approach learning new things?
- For me, what is the best way to manage sudden changes?
- For me, what is the best way to approach learning from a difficult experience in the clinical setting?
- Based on the test results and this discussion, when do I need to consider debriefing, or having a debriefing conversation with my supervisor?

Hint: read the section on strengths and particularly weaknesses: E.g., if one of the weaknesses listed is too sensitive, you could speculate that this weakness may impact on clinical practice in the following way: I may take client frustration or lack of commitment too personally. creating opportunities for mistakes.

This could result in me trying too hard – risk for compassion fatigue. Or, this could result in me disengaging from the client, becoming more cynical, dreading seeing them and creating opportunities for mistakes.

#### **Activity 4: Take stock**

(slide 18, 5 minutes)

Print out a blank workweek page and ask participants to note all the ways in which they formally and informally debriefed or discussed cases, or where they would have benefitted from formally or informally debriefing.