Debriefing and the PEARLS Framework

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adapted from

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What is debriefing?

- “Debriefing is a **facilitated reflection** … to help identify and close gaps in knowledge and skills” (Eppich & Chang, 2015, p. 1).
- “Debriefing is the **intentional discussion** following the simulation experience that allows participants to understand their actions … and thought processes to promote learning outcomes” (Abulebda et al., 2022, p.1).
- Includes:
  - Active participation, more than just passive feedback
  - Developmental intent focused on learning and improvement
  - Specific discussion
  - Input from multiple sources
- Offers the chance to:
  - Identify strengths and weaknesses
  - Create solutions to problems
  - Apply lessons to future clinical practice

(Eppich & Cheng, 2015; Abulebda et al., 2022)

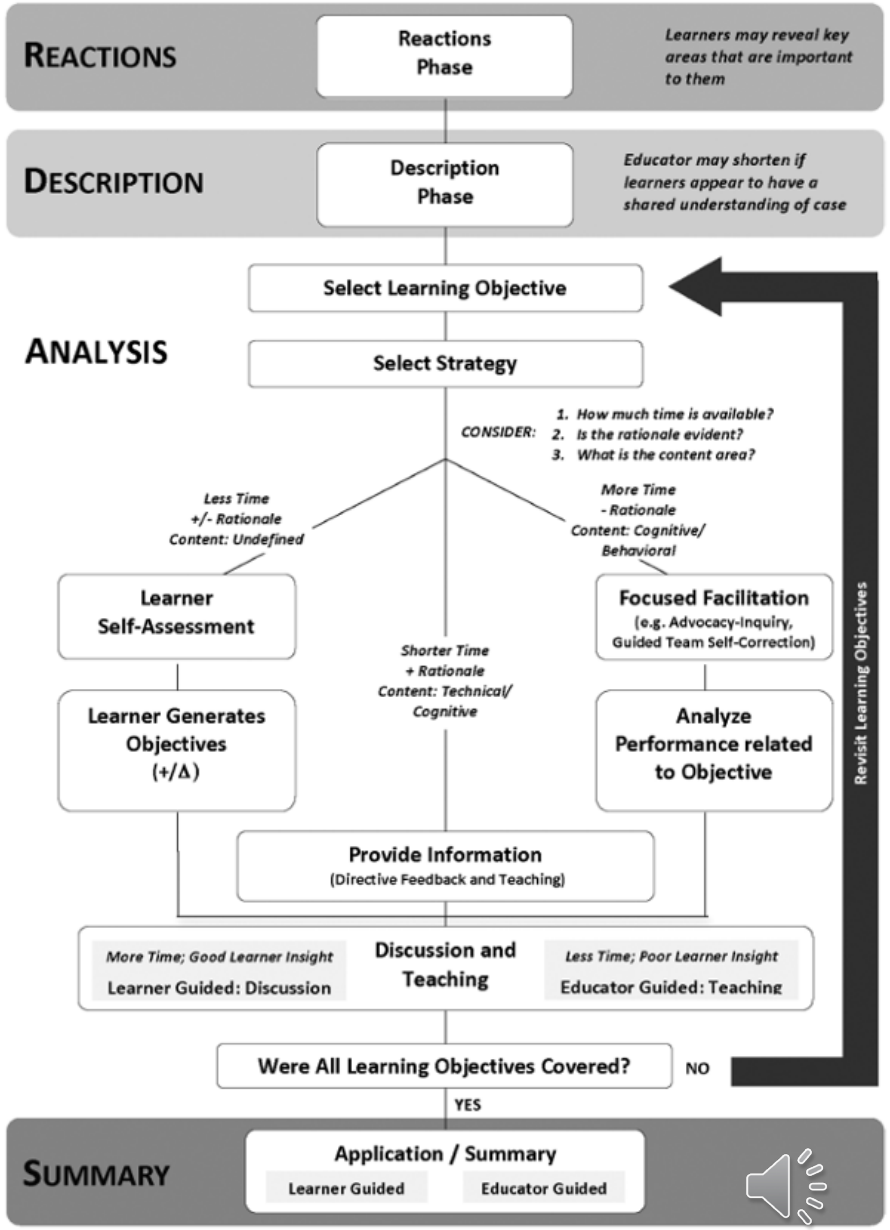
Why is debriefing necessary?

- Allows for reexamination of the simulation to foster reasoning behind clinical judgment
- Students want guidance
  - Studies demonstrate lower satisfaction with independent debriefing
- Increases student confidence while decreasing anxiety
- Improves communication skills
- Promotes continued reflection in practice
- Reduce errors, improving patient safety
- Increases advocacy in future situations

(Luctkar-Flude et al., 2021; Abulebda et al., 2022; Weiss et al., 2016; Seelandt et al., 2024)

The PEARLS Framework

- Using a framework helps faculty ensure evidence-based debriefing is delivered
- The PEARLS framework is interdisciplinary
- Includes scripting optional for use



(Eppich & Cheng, 2015)

Setting the Scene

- Setting the scene (may also occur before the first scenario debriefing, may abbreviate or omit for subsequent debriefings):
- ‘‘I’ll spend about XX minutes debriefing the case with you. First, I’ll be interested to hear how you are feeling now that that case is over; second, I’d like someone to describe what the case was about to make sure we are all on the same page. Then, we’ll explore the aspects of the case that worked well for you and those you would manage differently and why. I’ll be [eager] to hear what was going through your mind at various points in time. We’ll end by summarizing some take-home points and how to apply them in your clinical practice.’’

(Eppich & Cheng, 2015)

Reactions Phase

- Purpose: Allows learners to express initial emotional and cognitive responses
  - Helps establish psychological safety
  - Surfaces learner concerns that may guide the debrief
- Keep questions vague to prompt genuine emotions out of the students instead of encouraging your opinions (ex: don't ask 'did anyone feel scared')
- Scripted prompts:
  - "How are you feeling?"
  - "Other reactions?"
  - "How are the rest of you feeling?"
  - "What are your thoughts on this activity?"

(Eppich & Cheng, 2015)

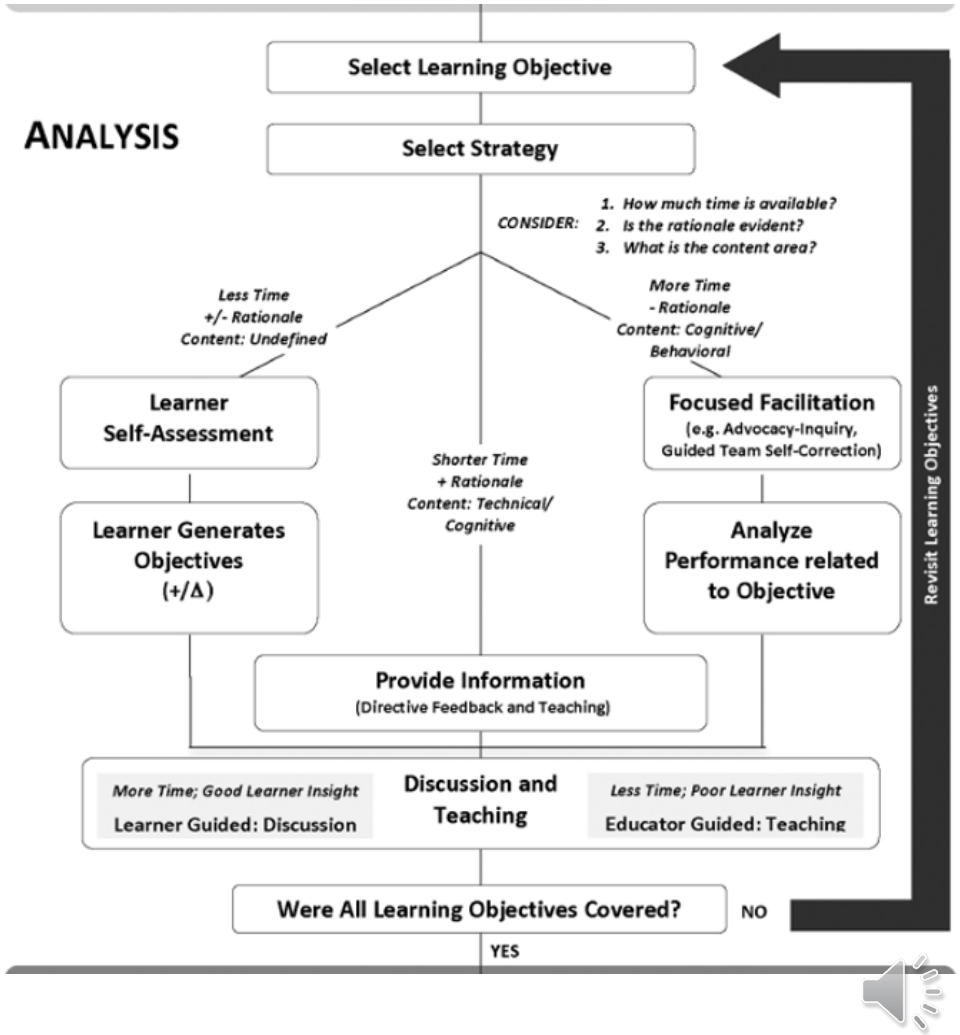
Description Phase

- Purpose: ensures shared understanding of the case
  - Aligns educator and learner perspectives
  - Identifies discrepancies in perception that may be explored later
- Scripted prompts:
  - “Can someone summarize the case from a medical point of view?”
  - “What were the main issues that you had to deal with?”

(Eppich & Cheng, 2015)

Analysis Phase

- Integrates the blended approach – the educator can choose their approach based on:
  - Time available
  - Type of performance gap – cognitive, technical, or behavioral
  - Learner insight and experience
- Likely the longest part of your debriefing
- Signal to transition by stating, ‘‘Now that we are clear about what happened, let’s talk more about that case. I think there were aspects you managed effectively and others that seemed more challenging. I would like to explore each of these with you.’’



(Eppich & Cheng, 2015)

TABLE 3. Decision Support Matrix for Educators

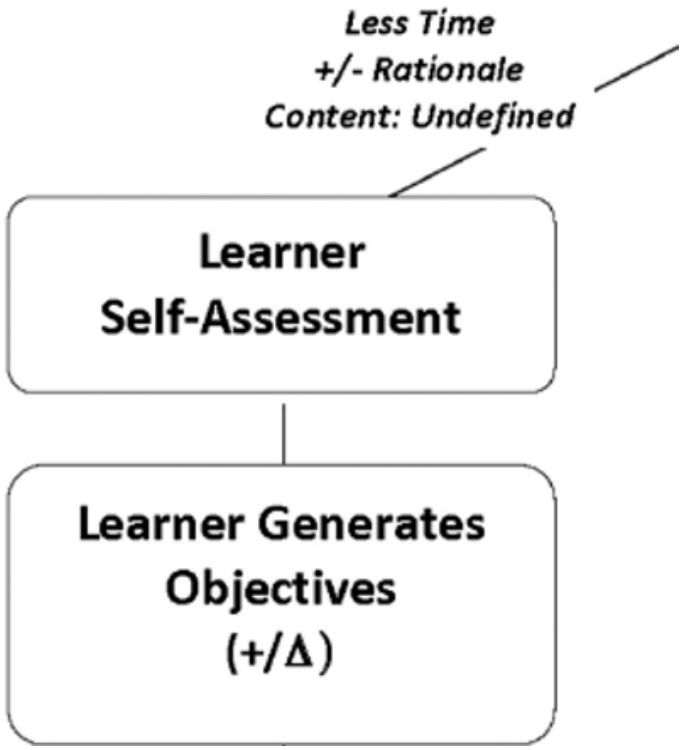
Learning Objective*	Variable/Indication for Use†			
	Performance Domain	Rationale Evident?	Time?	Method of Debriefing
1.	○ Cognitive		○ Short	○ Directive feedback
	○ Technical	○ Yes	○ Moderate	○ Learner self-assessment
	○ Behavioral	○ No	○ Long	○ Focused facilitation
2.	○ Cognitive		○ Short	○ Directive feedback
	○ Technical	○ Yes	○ Moderate	○ Learner self-assessment
	○ Behavioral	○ No	○ Long	○ Focused facilitation
3.	○ Cognitive		○ Short	○ Directive feedback
	○ Technical	○ Yes	○ Moderate	○ Learner self-assessment
	○ Behavioral	○ No	○ Long	○ Focused facilitation
4.	○ Cognitive		○ Short	○ Directive feedback
	○ Technical	○ Yes	○ Moderate	○ Learner self-assessment
	○ Behavioral	○ No	○ Long	○ Focused facilitation
5.	○ Cognitive		○ Short	○ Directive feedback
	○ Technical	○ Yes	○ Moderate	○ Learner self-assessment
	○ Behavioral	○ No	○ Long	○ Focused facilitation

*Learning objectives include those that are predefined by the educator and also those that are brought forth by the learners during the debriefing.
†Other variables not specific to learning objectives, such as (1) learner level of insight, (2) learner degree of clinical/simulation experience, and (3) educator debriefing experience should be considered when selecting most appropriate method of debriefing.

(Eppich & Cheng, 2015)

Analysis Phase: Learner Self Assessment

- Use When:
  - Time is short
  - Learners have moderate insight
  - Performance gaps are evident
- Prompts:
  - “What aspects of the case do you think you managed well and why?”
  - “What aspects of the case would you want to change and why?”
- Benefits:
  - Encourages reflection
  - Surfaces learner priorities
- Close performance gaps selectively using directive feedback and teaching or focused facilitation



(Eppich & Cheng, 2015)

Directive Feedback and Teaching

Shorter Time
+ Rationale
Content: Technical/
Cognitive

Directive feedback and teaching

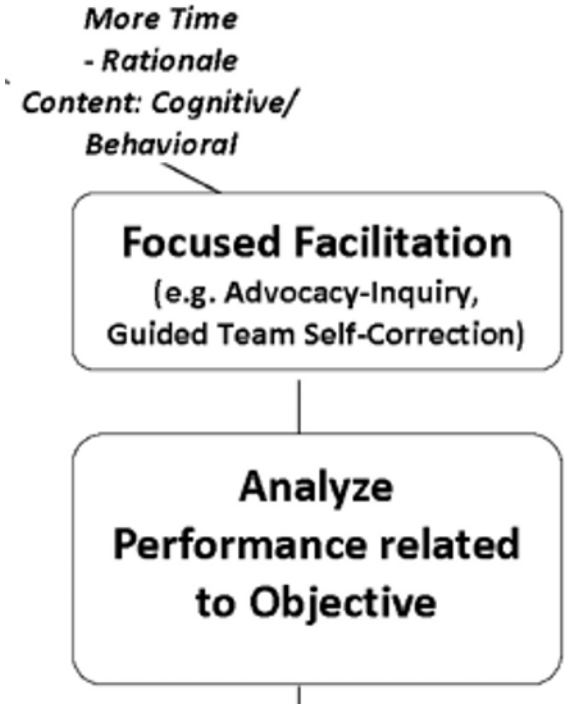
Provide the relevant knowledge or tips to perform the action correctly.

- "I noticed you *[behavior]*. Next time, you may want to … [*suggested behavior*]… because *[provide rationale]*."

(Eppich & Cheng, 2015)

Analysis Phase: Focused Facilitation

- **Use When**:
  - Time allows deeper discussion
  - Rationale for actions is unclear
  - Behavioral or decision-making gaps exist
- **Techniques**:
  - **Advocacy-Inquiry**: “I noticed [behavior], I think [judgment], can you share your thinking?”
  - **Exploring Alternatives**: “What other options did you consider?”
  - **Guided Correction**: “I would like to spend a few minutes talking about XXX.’’
- **Benefits**:
  - Uncovers mental models
  - Promotes critical thinking



(Eppich & Cheng, 2015)

ADVOCACY - INQUIRY			
	Specific observation	**Express your point of view about the observation**	**Ask about their perspective (more than one learner should be engaged)**
STEP 1: EXPLORE PERFORMANCE	• I saw / didn't see…. • I noticed / didn't notice… • *I heard you say…* • *I didn't hear…*	**Appreciation** • I liked that…. • I thought that was interesting / fascinating… **Appreciation or concern** • I was thinking… • That makes me think that… • I had the impression that… • It seemed to me that… **Concern** • I was wishing that… • I felt uncomfortable because… • I was worried/concerned…	*Example questions (short, open-ended):* • How do you see it? • What your thoughts were at the time? • What was going through your mind? • How did you assess the situation? • What were your priorities at the time? • How did the team get organized? • What weighed in your decision?

(Eppich & Cheng, 2015)

	Clarify understanding of the learner's rationale for action	Explore the rationale and facilitate discussion or teach to augment performance	Help learners generalize
STEP 2: UNDERSTAND AND EXPLORE RATIONALE; FACILITATE DISCUSSION OR TEACH TO AUGMENT PERFORMANCE	• So what I'm hearing is that *[behavior]* was related to *[insert rationale here]*…. • If I understand correctly, you are saying that [*insert performance gap]* was due to [insert frame here]	**Positive Performance** • Identify and reinforce existing frame through discussion • Discuss/teach to highlight positive performance **Areas of Improvement** • Identify and explore new frame through discussion • Teach to augment performance	• What strategies do you see going forward that would he helpful here? • How will this impact your performance next time? • How would you manage that situation differently next time? • How will your train of thought change the next time you encounter a similar situation?

(Eppich & Cheng, 2015)

Summary Phase

- Did you use learner-guided techniques?
  - ‘‘I like to close the debriefing by having each you state one to two take-aways that will help you in the future.’’
- Did you use instructor-guided techniques?
  - ‘‘In summary, the key learning points from this case were ….”

(Eppich & Cheng, 2015)

How to implement

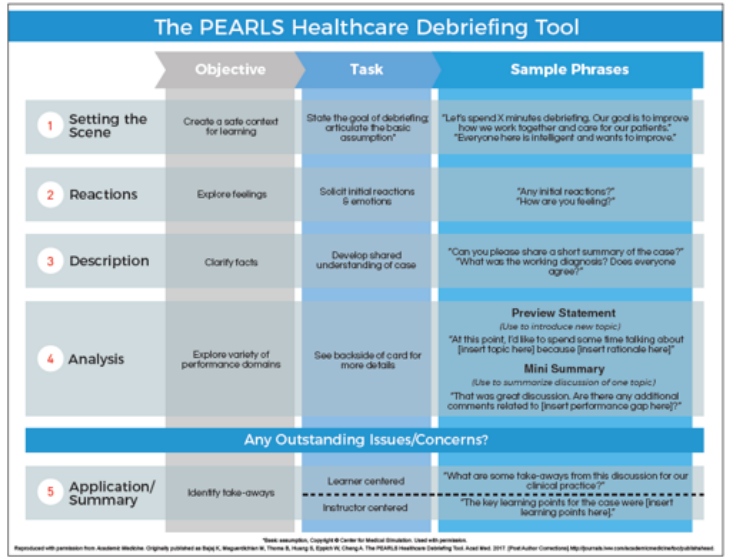
- You can apply the PEARLS now by utilizing the KCNHP CSC Debriefing Checklist provided.

Debriefing Checklist

Debriefing Structure

- ☐ Debriefing should take place immediately following the simulation-based experience (SBE) in a separate private space unless integrated at designated points within the scenario (debriefing-on-demand) (Criterion 1)
- ☐ When multiple SBEs are running simultaneously each learner group should be debriefed separately to ensure privacy. *The KCNHP Clinical Simulation Center (CSC) has a dedicated pre/debrief classroom, 075/076.* (Criterion 3)
- ☐ Duration of debriefing is dependent on the knowledge level and experience of the learner(s), the make-up of the learners (individual or team, and variables such as age, gender and race), and the objectives of the SBE. *20 to 30 minutes is considered optimal* (INASCL)

Evidence Based Method



PEARLS is the recommended evidence-based debriefing framework of the KCNHP (Criterion 4)

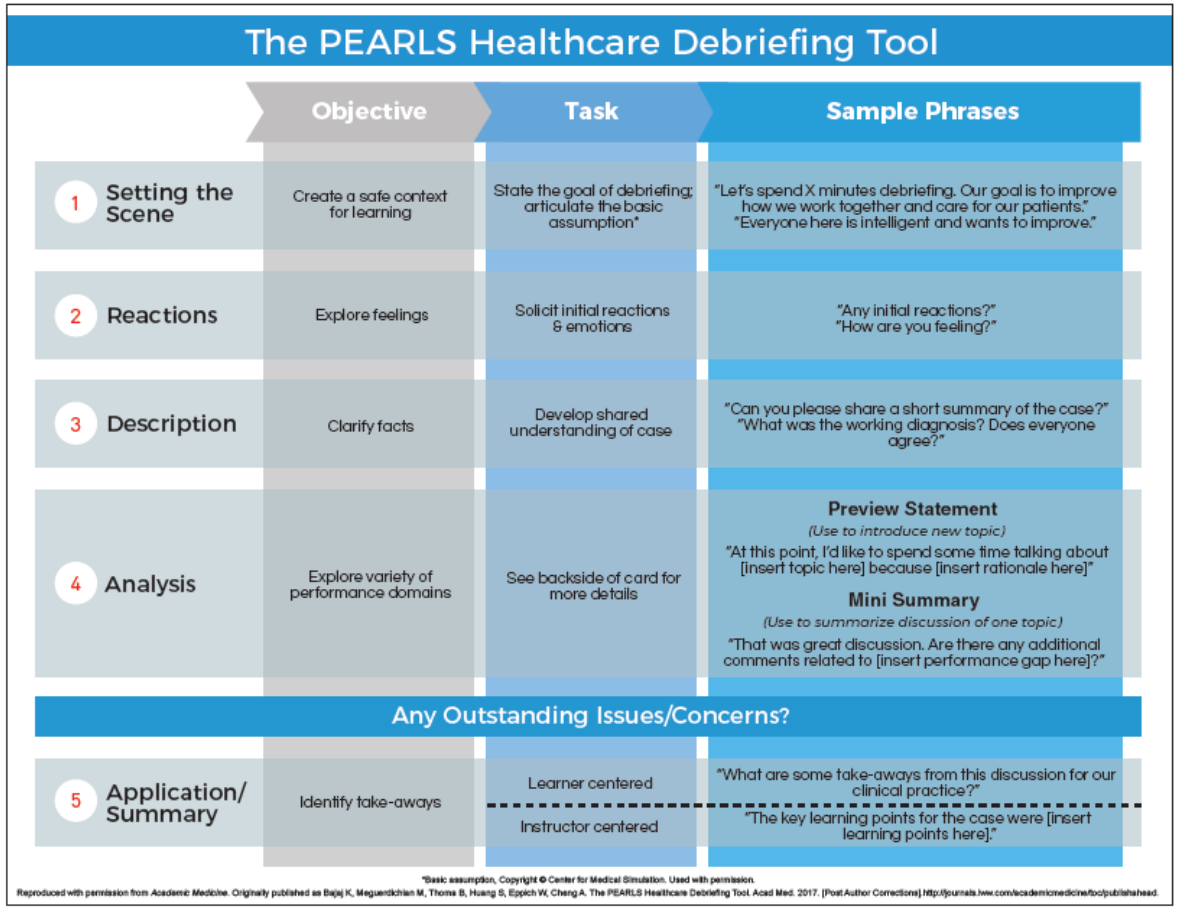
Exit

- ☐ Before dismissal from debriefing, learners must complete the Simulation Effectiveness Tool. Please hand out the copies of the survey provided to your students. Once complete please collect and return to the Clinical Simulations Coordinator (Criterion 1, Operations)

Society for Simulation in Healthcare www.ssih.org
International Nursing Association for Clinical Simulation and Learning (INASCL) www.nursingsimulation.org
Bajaj K, Meguerditchian M, Thoma B, Huang S, Eppich W, Cheng A. The PEARLS Healthcare Debriefing Tool. Acad Med. 2018, 93(2), 3...

C. Andrews Adapted 2026.4.29

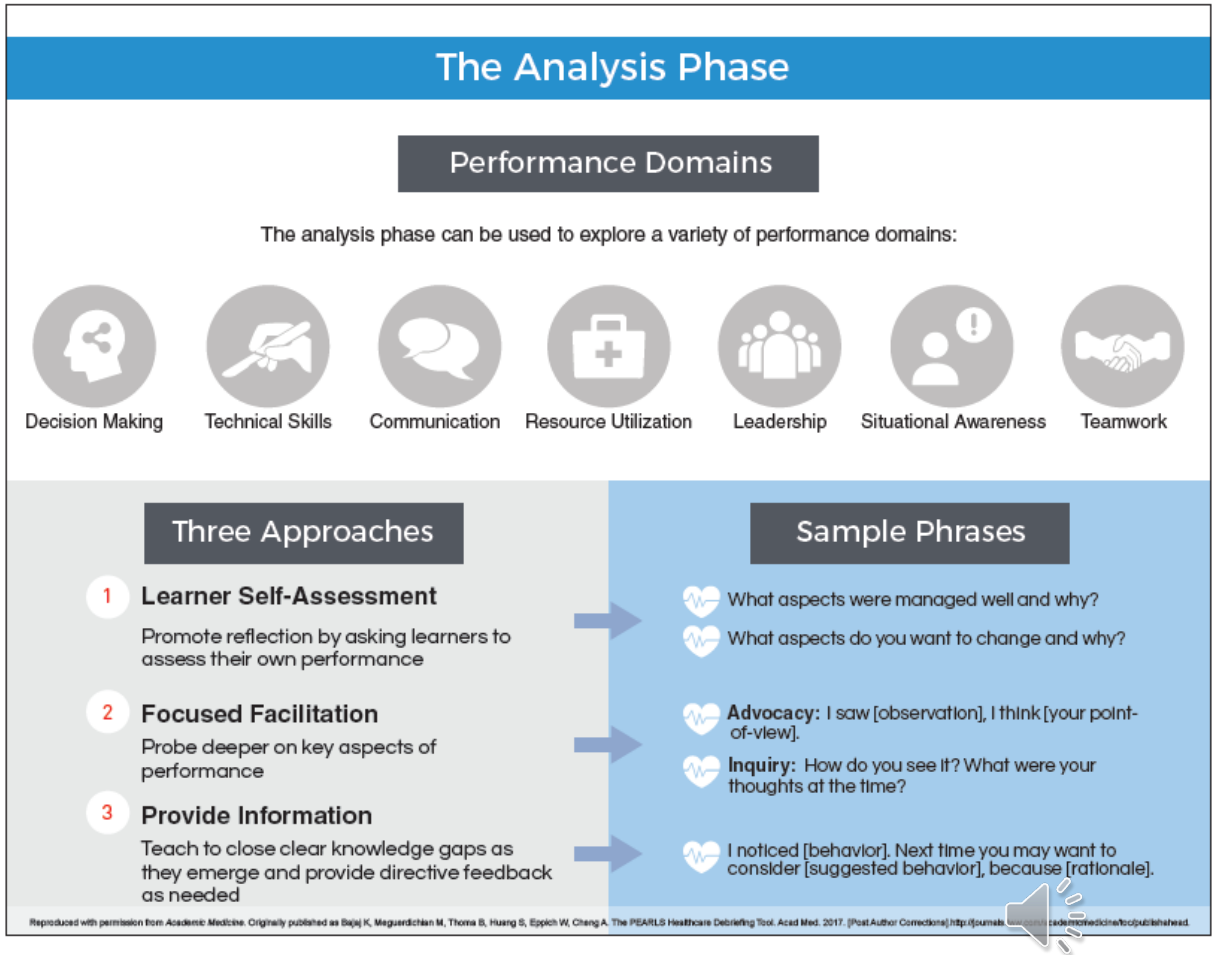
(SSH, n.d.; INACSL, 2025; Bajaj et al., 2018)



The PEARLS Healthcare Debriefing Tool

	Objective	Task	Sample Phrases
1 Setting the Scene	Create a safe context for learning	State the goal of debriefing; articulate the basic assumption*	"Let's spend X minutes debriefing. Our goal is to improve how we work together and care for our patients." "Everyone here is intelligent and wants to improve."
2 Reactions	Explore feelings	Solicit initial reactions & emotions	"Any initial reactions?" "How are you feeling?"
3 Description	Clarify facts	Develop shared understanding of case	"Can you please share a short summary of the case?" "What was the working diagnosis? Does everyone agree?"
4 Analysis	Explore variety of performance domains	See backside of card for more details	**Preview Statement** *(Use to introduce new topic)* "At this point, I'd like to spend some time talking about [insert topic here] because [insert rationale here]" **Mini Summary** *(Use to summarize discussion of one topic)* "That was great discussion. Are there any additional comments related to [insert performance gap here]?"
Any Outstanding Issues/Concerns?			
5 Application/ Summary	Identify take-aways	Learner centered	"What are some take-aways from this discussion for our clinical practice?"
		Instructor centered	"The key learning points for the case were [insert learning points here]."

*Basic assumption, Copyright © Center for Medical Simulation. Used with permission.



The Analysis Phase

Performance Domains

The analysis phase can be used to explore a variety of performance domains:

Decision Making · Technical Skills · Communication · Resource Utilization · Leadership · Situational Awareness · Teamwork

Three Approaches

1. **Learner Self-Assessment**
   Promote reflection by asking learners to assess their own performance
2. **Focused Facilitation**
   Probe deeper on key aspects of performance
3. **Provide Information**
   Teach to close clear knowledge gaps as they emerge and provide directive feedback as needed

Sample Phrases

- What aspects were managed well and why?
- What aspects do you want to change and why?
- **Advocacy:** I saw [observation], I think [your point-of-view].
- **Inquiry:** How do you see it? What were your thoughts at the time?
- I noticed [behavior]. Next time you may want to consider [suggested behavior], because [rationale].

(Bajaj et al., 2018)

Clinical Simulation Center Effectiveness Tool

USI Clinical Simulation Center Effectiveness Tool

After completing a simulated clinical experience, please respond to the following statements.

PREBRIEFING:	Strongly Agree	Somewhat Agree	Do Not Agree
Prebriefing increased my confidence (PREBRIEFING)	3	2	1
Prebriefing was beneficial to my learning. (PREBRIEFING)	3	2	1
SCENARIO:			
I am better prepared to respond to changes in my patient's condition. (LEARNING)	3	2	1
I developed a better understanding of the pathophysiology. (LEARNING)	3	2	1
I am more confident of my assessment skills. (LEARNING)	3	2	1
I felt empowered to make clinical decisions. (LEARNING)	3	2	1
I developed a better understanding of medications. (Leave blank if no medications in scenario) (LEARNING)	3	2	1
I had the opportunity to practice my clinical decision-making skills. (LEARNING)	3	2	1
I am more confident in my ability to prioritize care and interventions (CONFIDENCE)	3	2	1
I am more confident in communicating with my patient. (CONFIDENCE)	3	2	1
I am more confident in my ability to teach patients about their illness and interventions. (CONFIDENCE)	3	2	1
I am more confident in my ability to report information to health care team. (CONFIDENCE)	3	2	1
I am more confident in providing interventions that foster patient safety. (CONFIDENCE)	3	2	1
I am more confident in using evidence-based practice to provide care. (CONFIDENCE)	3	2	1
ENVIRONMENT:			
The Clinical Simulation Center facilities and equipment met the needs of the learning experience.	3	2	1
The Clinical Simulation Center staff were helpful and supportive.	3	2	1
DEBRIEFING:			
Debriefing contributed to my learning. (DEBRIEFING)	3	2	1
Debriefing allowed me to communicate my feelings before focusing on the scenario*(DEBRIEFING)	3	2	1
Debriefing was valuable in helping me improve my clinical judgment. (DEBRIEFING)	3	2	1
Debriefing provided opportunities to self-reflect on my performance during simulation. (DEBRIEFING)	3	2	1
Debriefing was a constructive evaluation of the simulation. (DEBRIEFING)	3	2	1
What else would you like to say about today's simulated clinical experience?			

(Andrews, 2025)

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