After-Action-Review in pre-hospital practice: A qualitative study

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Background

After-Action-Reviews are context-sensitive, self-regulated learning processes which may help developing both individual and organizational knowledge and make it available for the whole organization. This study was done to identify learning process indicators in After-Action-Reviews in medical practice and to understand if the After-Action-Review concept proofs effective in catalyzing both individual and organizational learning.

Methods

38 written reports of After-Action-Reviews of a rural ambulance service in Switzerland were analyzed using qualitative content analysis (inductively developed coding system including 42 subcodes) to identify learning process indicators and understand which learning strategies are used by professionals.

Research Question

Which learning processes are initiated by After-Action-Reviews (AAR) in medical practice?

- Can indicators for self-directed learning processes be identified?
- Do AAR have effects on organizational learning?

Results

Learning objectives

Professionals developed suitable learning objectives of all domains, including organizational objectives. The defined objectives support future learning and enable professionals to monitor their learning process.

Content

Professionals followed a holistic, multi-perspective reflection approach. Content covered not only medical, technical, tactical and organizational issues, but also human factors to a large extent.

- Preparations (e.g., draw adrenaline) cost plenty of time, even for the experienced. Logistics could check if pre-filled syringes are available/cost efficient
- Both team members think aloud and give feedback. Close feedback loops in acute troubles: airway, PetCO2

Conclusion

Identified learning strategies support individual and organizational learning processes.

Analyzed AAR support knowledge transfer within the organization and thus support organizational learning.

Studied professionals use critical reflection and discuss errors openly and constructive. This supports a safety culture and may have positive influences on patient safety.