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Suggested Programme Outline

Welcome/Introductions/My Name is?

**Part 1:** Introduction & Background to Clinical Handover

**Part 2(a):** Shift Clinical Handover - Existing Practice

**Part 2(b):** ISBAR3: Shift Clinical Handover - Best Practice

**Part 2(c):** ISBAR3: Shift Clinical Handover - Healthcare Assistant Clinical Handover

**Part 2(d):** ISBAR3: Shift Clinical Handover - ‘Meet and Greet’ and ‘Hello, My Name is…’

**Part 3(a):** Inter-departmental Clinical Handover - Existing Practice

**Part 3(b):** ISBAR3: Inter-departmental Clinical Handover - Best Practice

**Part 4(a):** Communication of Information in relation to a Deteriorating Patient - Existing Practice

**Part 4(b):** ISBAR: Communication of Information in relation to a Deteriorating Patient - Best Practice

**Part 5(a):** Implementing Change: ISBAR3 & ISBAR

**Part 5(b):** Implementing Change: Supporting Resources

**Part 5(c):** Implementing Change: Best Practice Concepts

**Part 6:** Consolidating Change: (Group Work)

**Part 7:** Conclusion & Programme Evaluation

**Note to All Participants:**

As the programme content is delivered through a variety of teaching methodologies (video recording, reflective practice & group exercises), the purpose of this workbook is to facilitate each participant to document key learning points and/or observations from reflective practice/group exercises. It can subsequently be used as a reference document for Clinical Handover as required.
Part 1: Introduction and Background to Clinical Handover:

Note: When undertaking all types of clinical handover, all nurses and midwives must work within his/her scope of practice (NMBI, 2015).

Expected Learning Outcomes:
On completion of Part 1, participants should understand the purpose of conducting a clear, comprehensive, person-centred clinical handover within a timely manner using a standardised, structured-format to achieve the following key objectives:

- Providing focused communication
- Enhancing patient safety
- Improving the delivery of care
- Reducing adverse incidents
- Reducing the time spent in clinical handover
- Improving the quality of clinical handover information

Discussion: Reflective Questions

- What are your thoughts on clinical handover?

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- What are the current challenges you face in clinical handover?

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- Are you familiar with the different types of clinical handover?

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Part 2(a): Shift Clinical Handover: Existing Practice

Expected Learning Outcomes:
On completion of Part 2(a), participants should be able to:
- Discuss the deficits of existing shift clinical handover practices
- Identify internal and external forces affecting shift clinical handover processes
- Describe how ineffective shift clinical handover processes can influence patient outcomes

Discussion: Reflective Questions
- What did you observe within that clip?
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- What were the positive/negative aspects of the shift clinical handover process?
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- Can you identify with this process?
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• Are you familiar with this type of shift clinical handover?

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• What are the key issues arising from this shift clinical handover?

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• How would you solve these issues?

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**Part 2(b): ISBAR_3: Shift Clinical Handover - Best Practice**

**Expected Learning Outcomes:**
On completion of Part 2(b), participants should be able to:
- Discuss how the process for best practice in shift clinical handover works
- Identify key elements affecting shift clinical handover processes
- Describe how effective shift clinical handover processes can influence patient outcomes

**Discussion: Reflective Questions**
- Are you familiar with this type of shift clinical handover?

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- What are the main differences between this and the previous shift clinical handover process?

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- What were the positive/negative aspects of the shift clinical handover process within the clip?

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• How will this impact on the delivery of care?

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• Do you think this could work in your setting?

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• What are the possible challenges to implementing this shift clinical handover process?

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Part 2 (c) ISBAR\textsubscript{3}: Shift Clinical Handover – Healthcare Assistant Clinical Handover: Best Practice

**Expected Learning Outcomes:**
On completion of Part 2(c), participants should be able to:

- Discuss the importance of including the HCA in shift clinical handover to communicate key elements of patient care
- Identify the type of information that is required by the HCA to deliver care within his/ her scope of practice
- Describe how effective shift clinical handover processes between the nurse and HCA can influence patient outcomes

**Discussion: Reflective Questions**
- What did you observe within that clip?

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- Can you identify with this process?

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- Do you think this approach will work?

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- How this will affect the delivery of patient care?

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Part 2 (d) ISBAR₃: Shift Clinical Handover; ‘Meet and Greet’ and ‘Hello, My Name is…’

Expected Learning Outcomes:
On completion of Part 2(d), participants should be able to:
  • Discuss the concepts of ‘Meet and Greet’ and ‘Hello, My Name is…’
  • Identify how ‘Meet and Greet’ and ‘Hello, My Name is…’ impact on the therapeutic relationship between patients and staff
  • Describe how ‘Meet and Greet’ and ‘Hello, My Name is…’ support effective communication processes and patient safety as part of shift clinical handover

Discussion: Reflective Questions

  • What did you observe within that clip?
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  • Can you identify with this process?
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  • Do you think this approach will work?
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    __________________________________________________________

  • How this will affect the delivery of patient care?
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Part 3(a) Inter-departmental Clinical Handover
- Existing Practice

**Expected Learning Outcomes:**
On completion of Part 3(a), participants should be able to:

- Discuss the deficits of existing inter-departmental clinical handover practices
- Identify internal and external forces affecting inter-departmental clinical handover processes
- Describe how ineffective inter-departmental clinical handover processes can influence patient outcomes

**Discussion: Reflective Questions**

- What did you observe within that clip?

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- What were the positive/negative aspects of the inter-departmental clinical handover process within the clip?

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• Can you identify with this process?

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• Are you familiar with this type of inter-departmental clinical handover?

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• What are the key issues arising from this inter-departmental clinical handover?

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• How would you solve these issues?

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Part 3(b): ISBAR₃: Inter-departmental Clinical Handover - Best Practice

Expected Learning Outcomes:
On completion of Part 3(b), participants should be able to:
• Discuss how the process for best practice in inter-departmental handover works
• Identify key elements affecting inter-departmental handover processes
• Describe how effective inter-departmental handover processes can influence patient outcomes

Discussion: Reflective Questions
• Are you familiar with this type of inter-departmental handover?

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• What are the main differences between this and the previous inter-departmental process?
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• What were the positive/negative aspects of the inter-departmental handover process within the clip?
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• How will this impact on the delivery of care?

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• Do you think this could work in your setting?

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• What are the possible challenges to implementing this inter-departmental clinical handover process?

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Part 4(a) Communication of Information in relation to a Deteriorating Patient - Existing Practice

Expected Learning Outcomes:
On completion of Part 4(a), participants should be able to:

• Discuss the deficits of existing practice regarding communication in relation to a deteriorating patient
• Identify internal and external forces affecting communication in relation to a deteriorating patient
• Describe how ineffective communication in relation to a deteriorating patient can influence patient outcomes

Discussion: Reflective Questions
• What did you observe within that clip?

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• What were the positive/negative aspects of communication in relation to a deteriorating patient within the clip?

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• Can you identify with this process?

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• Are you familiar with this type of communication process in relation to a deteriorating patient?

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• What are the key issues arising from this communication process?

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• How would you solve these issues?

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Part 4(b) ISBAR: Communication of Information in relation to a Deteriorating Patient - Best Practice

Expected Learning Outcomes:
On completion of Part 4(b), participants should be able to:

- Discuss how the process for best practice in communication of information in relation to the deteriorating patient works
- Identify key elements affecting communication of information in relation to a deteriorating patient
- Describe how effective communication of information in relation to a deteriorating patient can influence patient outcomes

Discussion: Reflective Questions
- Are you familiar with this type of communication of information in relation to a deteriorating patient?

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- What are the main differences between this and the previous process for communication of information in relation to a deteriorating patient?

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• What were the positive/negative aspects of the communication of information in relation to a deteriorating patient within the clip?

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• How will this impact on the delivery of care?

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• Do you think this could work in your setting?

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• What are the possible challenges to implementing the process for communication of information in relation to a deteriorating patient?

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Part 5(a): Implementing Change: ISBAR₃ & ISBAR

Expected Learning Outcomes:
On completion of Part 5 (a), participants should be able to:

- Describe ISBAR₃ and ISBAR
- Identify the context in which both ISBAR₃ (shift clinical and interdepartmental handover) and ISBAR are used (communication on patient deterioration)
- Discuss how ISBAR₃ is used in tandem with the nursing process and a chosen model of nursing to support the exchange of relevant focused information in a structured, standardized format in shift clinical handover
- Identify how ISBAR₃ is used to support the exchange of relevant focused information in a structured, standardized format in inter-departmental clinical handover
- Identify how ISBAR is used to support the exchange of relevant focused information in a structured, standardized format in communication on patient deterioration

Discussion: Reflective Questions

- Are you familiar with ISBAR₃ and ISBAR as communication tools?

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- Have you used ISBAR₃ or ISBAR prior to this (either in shift clinical/inter-departmental clinical handover or for communication on patient deterioration)?

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- Do you think ISBAR$^3$ and ISBAR can support shift clinical /interdepartmental clinical handover/ communication on patient deterioration?

- How will using ISBAR$^3$ and ISBAR affect the delivery of patient care?

- Within the context of using ISBAR$^3$ for shift clinical/inter-departmental clinical handover and referring to the model of nursing used in your clinical area, is there additional information that should be included under each heading?
Part 5(b): Implementing Change: Supporting Resources

Expected Learning Outcomes:
On completion of Part 5(b), participants should be able to:
- Identify what the supporting resources are
- Discuss how they are used, where relevant, as part of shift and inter-departmental clinical handover or for communication of information in relation to the deteriorating patient to support a structured, standardized approach to the exchange of relevant information.

ISBAR\textsuperscript{3} & ISBAR Templates for Shift Clinical/Inter-departmental Handovers and Communication in relation to Patient Deterioration:

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Patient Status Communication Sheet:

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Guidance: Clinical Handover Procedures:

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Discussion: Reflective Questions

- Do you think these resources can support shift clinical handover, inter-departmental handover or for communication of information in relation to the deteriorating patient?

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- Can you think of other resources that may support shift and inter-departmental clinical handover or for communication of information in relation to the deteriorating patient?

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Part 5(c): Implementing Change: Best Practice Concepts for Clinical Handover

Expected Learning Outcomes:
On completion of Part 5(c), participants should be able to:

- Identify what best practice in clinical handover involves
- Discuss how best practice concepts are incorporated into clinical handover to support a structured, standardized approach to the exchange of relevant information.

On the Move (Shift Clinical Handover):

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Patient Communication Boards (Shift Clinical Handover):

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Clear Roles and Responsibilities:

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Safety and Risk:

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ISBAR$_3$ – Risk:

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ISBAR\textsubscript{3} - Read-Back (Identification of Priorities):


Confidentiality:


Discussion: Reflective Questions

- Are you familiar with these best practice concepts?

- Do you think these best practice concepts can support clinical handover?

- How will the best practice concepts affect the delivery of patient care?
Part 6: Consolidating Change (Group Work)

Expected Learning Outcomes:
On completion of Part 6 participants should be able to:
• Discuss how best practice clinical handover (shift, inter-departmental and communication regarding a deteriorating patient) processes work
• Identify the key elements affecting clinical handover and communication processes
• Describe how effective clinical handover and communication processes can influence patient outcomes
• Discuss how to sustain the improvements made through implementation of the best practice processes

Discussion: Reflective Questions
• How will you implement the best practice clinical handover and communication processes in your area?
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• How will you engage your colleagues to participate in the best practice clinical handover and communication processes?
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• How will you sustain the improvements you have made?
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Part 7 Conclusion and Evaluation:

Thank you for your participation in this programme and please complete the enclosed evaluation as your feedback is valued to inform future programmes.
References


HIQA (2013) *Patient Safety Investigation Report into Services at University Hospital Galway (UHG)* HIQA, Dublin, Ireland.


HSE Change Management Resources (2014) *HSE Change Model*. Health Service Executive: Dublin

Keogh, B. (2013) *Review into the Quality of Care and Treatment Provided by 14 Hospital Trusts in England*, NHS, United Kingdom.


NMBI (2015) *The Scope of Nursing and Midwifery Practice Framework*, NMBI, Dublin Ireland


