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Clinical Handover Consent and Team Communication

Practical 02 / Communication role-play

Aim

Deliver a structured handover and respond to consent, confidentiality and communication concerns.

Principle

Effective handovers give the right person timely information and make responsibility explicit. Consent depends on voluntary understanding and a meaningful choice.

Materials and Requirements

- Fictional ward chart, role-play script and handover template
- Documentation prompt and interpreter availability card

Procedure

1. Identify patient and team in the simulation. State the immediate concern and urgency and provide relevant background only.
2. Identify the simulated patient and receiver and state why action is needed now. Include relevant background with timing and limit the presentation to facts affecting the response.
3. Summarise current assessment, observations, actions and remaining uncertainty. State what response you need and by when.
4. Describe current observations, working assessment, completed actions and uncertainties. Give an explicit request with urgency and identify the pending result that could change it.

Continue with step 5 on the next page.

Procedure Continued

Clinical Handover Consent and Team Communication

5. Obtain acknowledgement or read-back for critical information. Record who received it and who owns pending actions.
6. Ask the receiver to read back critical values and the next action. Record the contact, date, time and responsibility and use the escalation route if acknowledgement is delayed.
7. In the consent scenario explain reason, expected benefits, risks, alternatives and choice. Check understanding and ask about language and privacy needs.
8. For consent establish the person's preferred language and needs for privacy or interpretation. Explain material information and ask the person to describe their understanding and choice.
9. Summarise decisions and escalate capacity, safety or disagreement concerns through the supervising team.
10. Summarise the decision or unresolved issue, expected next action and owner. Discuss any capacity, safety or communication concern with the supervising clinician and document the handover.

Precautions

- Use simulated or approved de-identified material.
- Respect privacy and obtain professional interpretation when appropriate.

Observations and Interpretation

Clinical Handover Consent and Team Communication

Observations and Record

Item	What to record	What it tells you
Handover	Situation, brief background, assessment and request	Supports rapid action
Communication	Understanding, interpreter use and patient questions	Enables participation
Responsibility	Named team, action and time	Prevents missed tasks

Worked Example

At shift change a serious result remains pending. The receiving colleague reads back which result to check and when to notify the senior.

Result and Interpretation

The pending action has a clear owner and time. Document handover completion and communicate new findings through the agreed route.

Viva Questions and Answers

What does SBAR stand for?

Situation, Background, Assessment and Recommendation.

Why check understanding before consent?

A signature alone does not establish an informed choice.

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