**Objective**
The objective of this exercise is to understand the scenario and to provide clear and concise handover of information using the STOP and WATCH form and completing the ISBAR handover.

**Instructions**
Break into small groups. Nominate one participant to provide feedback on how the group worked through the scenario.

**Scenario 1**

Mrs. Tile is a 74-year-old lady in your care. You start your shift to find Mrs. Tile pacing and muttering to herself. Night staff stated she was up early pacing but was compliant when dressing and showering early, as was her normal pattern.

You attempt to direct Mrs. Tile to the breakfast room, but she waves her hand at you and you need to step out of the way quickly to avoid being hit.

You decide to bring Viola a drink, to tempt her to drink something. She is not interested and throws the drink at the wall.

You commence a STOP AND WATCH notification.

**Complete a STOP AND WATCH form**

You need to speak to the care manager. She is on call so you complete an ISBAR handover prior to calling her.

**Complete an ISBAR handover.**
Scenario 1.

- **Patient information**
  Mrs. Viola Tile, 74-year-old female
  DOB: 29th June 1940
  Address: Central Coast ACF
  GP: Dr Smith

- **Vital signs**
  You are unable to obtain current observations
  Baseline: 1 month ago
  T: 36.2; P: 72; R: 18; BP: 138/76 O2 sat: 97%

- **Medical History**
  Dementia, Congestive cardiac disease, hypertension, CA bowel 10 years ago, history alcohol abuse.

- **Medications**
  Aspirin daily, Lasix 40 mg mane, Ditropan daily, minax daily

- **Patient’s normal behaviour**
  State it is always difficult but now it’s worse. She normally walks nearly continuously but is generally compliant with care staff and sits to eat and drink, though quickly and small amounts.

- **Has patient’s behaviour changed suddenly?**
  State she was normal last week but a regular carer that she is fond of recently left the facility

- **Any other symptoms?**
  State that the patient has had some new incontinence.