

Recommended Summary Plan for Emergency Care and Treatment (ReSPECT)

ReSPECT Recommended Summary Plan for Emergency Care and Treatment for: Preferred name

1. Personal details

Full name: _____ Date of birth: _____ Date completed: _____
 NHS/CHI/Health and care number: _____ Address: _____

2. Summary of relevant information for this plan (see also section 6)

Including diagnosis, communication needs (e.g. interpreter, communication aids) and reasons for the preferences and recommendations recorded.

Details of other relevant planning documents and where to find them (e.g. Advance Decision to Refuse Treatment, Advance Care Plan). Also include known wishes about organ donation.

3. Personal preferences to guide this plan (when the person has capacity)

How would you balance the priorities for your care (you may mark along the scale, if you wish):

Prioritize sustaining life, even at the expense of some comfort Prioritize comfort, even at the expense of sustaining life

Considering the above priorities, what is most important to you is (optional): _____

4. Clinical recommendations for emergency care and treatment

Focus on life-sustaining treatment as per guidance below Focus on symptom control as per guidance below
 clinician signature: _____ clinician signature: _____

Now provide clinical guidance on specific interventions that may or may not be wanted or clinically appropriate, including being taken or admitted to hospital +/- receiving life support:

CPR attempts recommended CPR attempts NOT recommended
 Adult or child Adult or child
 clinician signature: _____ clinician signature: _____

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How can ReSPECT help us?

- The form may support decisions around use of person-centred care plans and enable the person to remain at home
- The form should highlight circumstances in which the person should be conveyed to hospital
- It provides us with a summary of recommendations to help us to make immediate decisions about a person's care and treatment
- It should have details of key contacts/care providers, community teams and access to pathways
- The form is used to inform decision-making when a person does not have capacity to make or express choices

Is a ReSPECT form legally binding?

No, just like a DNACPR form, its not legally binding, you still need to use clinical judgment and may decide not to follow the recommendations on a ReSPECT form. It is a guide to immediate decision-making. You should be prepared to justify valid reasons for overriding the recommendations on a ReSPECT form. For example you may decide to treat a choking person - if you believe that that was not the circumstance envisaged when the person decided that they did not want CPR.

Review date?

The ReSPECT form doesn't have a set review timeframe. A review date should be planned according to each person's situation.

Why doesn't the form show the NHS logo?

ReSPECT is for wider use than just the NHS and was not developed by or within the NHS. It should be used and recognised by all communities and organisations involved in health and social care, including care homes, hospices and private hospitals that are not managed by the NHS.

Which areas uses ReSPECT?

The intention is that ReSPECT will become UK wide. Areas have introduced it and many more are considering. Over time it may become best practice for all residents in a care home to be offered the opportunity to have a ReSPECT conversation and develop a plan.

Is it ok if the form is printed in black and white?

Yes.

What if the form is a photocopy?

The ReSPECT form should not be photocopied to avoid difficulties with version control. However in an emergency a ReSPECT form copy should be considered to be the valid version unless there is clear reason to judge otherwise.

Can we use an electronic version of ReSPECT?

Yes. The plan is for it to become digital and work is ongoing to ensure the ReSPECT form data can be shared across any electronic patient record systems (open Electronic Health Records). This will take time.

Visit respectprocess.org.uk for more information

Why ReSPECT?

- A ReSPECT form summarises treatments to be considered and those that would not be wanted or would not work for the patient in an emergency. It might include recommendations of when transfer to hospital would be desirable or not
- ReSPECT is a summary of recommendations to help you to make immediate decisions about that person's care and treatment. It contains recommendations about whether CPR should be attempted
- A ReSPECT form contains much more than a CPR decision: it is not just a replacement for a DNACPR form; it is to promote recording an emergency care plan by many people, and may recommend active treatment, **including attempted CPR** if it should be needed
- ReSPECT is for all of the UK: as it is more widely adopted, it should help prevent variation in (DNA)CPR documentation which we currently see

Who is it for?

ReSPECT can be for anyone but will have increasing relevance for people who have complex health needs, people who are likely to be nearing the end of their lives, and people who are at risk of sudden deterioration or cardiac arrest.

Where is the form?

It should be with the person, and readily available for us. The person should take it with them if they go out or travel away from their home, and make sure that their family, friends or carers know about it, and know where to find it in an emergency. The form is a summary - the full care plan sits with/behind it.