FAQs patient

General

What is ReSPECT?

ReSPECT is a process where a patient and healthcare team talk together and work out a personalised plan for potential future emergency treatment - to ensure that the patient receives the best possible treatment for their individual situation.

What does ReSPECT stand for?

ReSPECT is an acronym. This stands for:

Recommended

Summary

Plan for

Emergency

Care and

Treatment

Who is it for?

Everyone. It does have increasing relevance for those people with particular healthcare needs. This can be those who are at risk of cardiac arrest, nearing the end of their life or simply for those who want to record their own preferences. ReSPECT is suitable for both adults and children of all ages.

How does it work?

The plan is created through conversations between a person and one or more healthcare professionals who are involved in their care. The plan should stay with the person and be available immediately to health and care professionals faced with making immediate decisions in an emergency in which the person themselves has lost the capacity to participate in those decisions.

Why might I need a ReSPECT plan and conversation?

Healthcare organisations have naturally started using ReSPECT throughout the UK as an improved replacement for Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR). This helps patients with improved decision making which is a National Institute for Clinical Excellence (NICE) guideline. As part of NHS England/NHS Improvement's long-term plan (2019) this aims to give people more control over their health and more personalised care when they need it. ReSPECT involves both of these guidelines.

Who gives me a ReSPECT plan?

Conversations will take place with healthcare professionals and summarised onto the ReSPECT plan. You will then be given this shortly after the conversation(s). This could be from someone you had the conversation with or someone from the organisation's admin team.

Is ReSPECT the same as DNACPR?

Respect is replacing DNACPR in Sheffield as it is a more comprehensive and individualised plan rather than recording just one decision.

What if I get ill but I don't have a ReSPECT plan?

You may consider discussing and completing a plan as soon as possible. This might be for example either at your home or soon after or during hospital admission.

Can I choose to have a ReSPECT plan?

Yes. You can start the conversation yourself with a healthcare professional or it could be a Gp or community nurse or Hospital doctor or nurse. Clinicians engaging in this process should have had training in its use.

Can I get one now?

Yes, however you may wish to talk with your significant other/s and write down some information first to help guide the conversation. This will help the healthcare professional in completion of this process in a timely manner with the conversation and plan completion.

Is the ReSPECT plan accepted in places other than Sheffield?

Yes. Currently around 70% of the country uses it. This includes NHS Scotland and in the future possibly Northern and Southern Ireland but not currently Wales. Locally this includes Chesterfield, Doncaster, Leeds and Lincolnshire.

What if I cannot speak/read English?

A professional interpreter (not a relative) should be used if the patient does not speak English. The plan is written in English, as all healthcare professionals need to be able to read it. You may be given a leaflet in a different language to support this process.

How do I find out more about ReSPECT?

You can find more information about the ReSPECT process at the Resuscitation Council website this is: www.resus.org.uk/respect

About the plan

What do I do with my ReSPECT plan?

Your ReSPECT plan should be kept in a safe place at home where it is accessible in an emergency if you are unwell. Some people chose to keep it in an emergency folder by the door. Let others, such as relatives, carers, know where it is kept. It is very important to bring your ReSPECT plan with you if you come into hospital.

What if I lose or damage my plan?

If you lose or damage your ReSPECT plan then please contact a member of your healthcare team as soon as possible. A new one can be printed off as your GP should have an electronic copy, or the hospital if you have just been discharged.

What if I change address?

The ReSPECT plan remains valid as the patient remains the same. For example, if the person is away from home on holiday. However, a permanent address change needs to be updated as soon as possible on all copies.

Who makes the decisions?

Your views are crucial. The 'lead clinician' or one of their team are usually the people making decisions whilst taking into consideration what your opinions are. This will be the GP in the community or Consultant in an acute care setting such as a hospital. The health professionals will make every effort to come to a joint agreed plan with you. However, it is important to remember that the ReSPECT plan cannot be used to demand certain treatments that are not likely to benefit you. For example CPR is one of these boundaries. We need to have conversation/s so all involved are aware and come to an agreed understanding.

Why do the professional having the ReSPECT conversation have to sign the plan?

The healthcare professionals signature confirms that they are taking responsibility for adhering to best practice in following the ReSPECT process for complying with capacity and human rights legislation.

What sorts of treatments are covered?

The health professionals will discuss a variety of treatment options with you and a summary of this will be documented on the plan.

Can I see what's written about me?

Yes, it's important that you know the recommendations that are recorded and that you are comfortable with them. You will be given the completed plan to take home with you.

What if my health changes or my preferences change?

Yes. If your condition or circumstances change, or if you want to change your mind for any reason, then the ReSPECT plan can be changed. Discuss with your GP or consultant.

What if the person lacks capacity to make decisions?

You may be the person caring for an individual who lacks capacity (lacks the ability to understand information and use it to make informed choices). In this situation a ReSPECT plan can be made which is agreed to be in their best interests (for overall benefit).

What if I am unable to make a decision/express my wishes in the future?

If you have an LPA for Health and Welfare, they will be involved in the discussion on your behalf. If you don't have an LPA, clinicians will talk to your relatives to find out more about your wishes and preferences.

Will my relatives be involved in filling in the ReSPECT discussion?

Only if you want them to. If you lose the ability to make decisions about your health and care, clinicians will talk to your relatives to find out more about your wishes and preferences.

How long is the plan valid for?

For life. It can be cancelled, and new versions can replace it if your condition/preferences change.