

# ReSPECT

February 2020  
NEWSLETTER

## 6 Months of ReSPECT!

We are thrilled to mark our half a year anniversary. Six months to go! As many of you will be aware; the ReSPECT Process was launched across Worcestershire on 1st July 2019 after a 12 month run up of planning, engagement and education roll out for all staff across Health and Social Care. Here is an update of where we are now just six months later...



### Where are we at?

We want to know more about how you feel with regards to the ReSPECT form and how well the form works in practice. This is the reason why we will be carrying out an audit. It will be a way for us to find out if the form is fit for purpose, how well it works and where there could be improvements. Watch out for it and talk to us about your experience of the process.



### Access to training

Well done and thank you to all of you who attended our face to face sessions and completed the Worcestershire ReSPECT e-learning. Face to face training sessions are no longer available but you can still access online as indicated below.

- If you work for WHCT or WHAT, you can still access training via ESR. If you are experiencing connection issues please try the option below first, before contacting your learning and development team.
- If you have an nhs.net email address, the quickest way to complete the training is to access the HEE modules, choosing whether Authorship or Awareness via [www.e-lfh.org.uk/programmes/recommended-summary-plan-for-emergency-careand-treatment-respect](http://www.e-lfh.org.uk/programmes/recommended-summary-plan-for-emergency-careand-treatment-respect)
- If you work for a Non-NHS external organisation then we can still set you up with a username and password for Moodle by emailing [alex.ferry@nhs.net](mailto:alex.ferry@nhs.net)



### Policy

The Worcestershire ReSPECT policy can be found on all organisations intranet sites for guidance. Each organisation is currently working on creating a Standard Operating Procedure (SOP) which will be readily accessible to staff covering FAQ's, specific guidance for services and a tailored approach to the policy.

## The ReSPECT Team

### It's a boy!

We've had some special news! We are sending our Congratulations to Sam Skilbeck, Macmillan ReSPECT Project Manager who went on maternity leave last month.



### Welcome Thenain – newly appointed ReSPECT Project Lead

#hello my name is... Thenain Coulibaly

Hello, I am Thenain and I am the Macmillan ReSPECT Project Lead for Worcestershire. I am based at PoWCH. I have been appointed to lead on the last 7 months of the project; I am responsible for monitoring and evaluating the impact made by the project but also ensuring the process is embedded throughout the health economy.



I am passionate about health, committed to improving quality of care and patient experiences. Social justice is another interest of mine. I find the ReSPECT process to be incredibly empowering for the patient, the clinician but also the patient's relative. It encourages the patient to be heard, make his/her own choices and feel in control all the way until their last days of living. It is our duty to ensure patients choices are recognised and respected across all Health Care settings and I am absolutely thrilled to be part of this unique process, which ultimately improves

### Hello Sue– ReSPECT Project Administrator

Hi! I am Sue and I am the ReSPECT Admin. Prior to this I was an Executive Officer in the Civil Service for many years; too many to mention! I really enjoy my new role in the NHS supporting the ReSPECT Project delivery with #teamworcestershire. Please feel free to contact me if you have any questions about ordering or else!



### Fond farewell

Jo Hodgetts, ReSPECT project lead is left her post on 7th February, and "handed over the reins" to Thenain who we introduced you to earlier. Jo said; *"I have had the most fantastic 18 months leading the implementation of ReSPECT across Worcestershire. I would like to say a huge and heartfelt thank you, to all of you whom have embraced the change, contributed your time and energy to the project, and continue to work to embed ReSPECT into normal practice"*

As a county and health and social care system we have achieved an incredible amount in a relatively short period of time by working collaboratively, and most importantly implemented a process that will help us to have better conversations with people, giving them a voice and a choice in a potential future emergency. I have learnt such a lot in my time here and will take this with me into my new post. I am looking forward to reading the final evaluation report and am leaving the project in Thenain's safe hands for the final few months.

Best wishes and I will miss you very much #TeamWorcestershire



## Updated patient resources

### Our new patient information leaflet is here!

We are pleased to announce that we have produced a patient leaflet. The leaflet explains what ReSPECT is, who it is for and how it works.

A PDF version of our patient leaflet can be found on our website - <https://www.hacw.nhs.uk/respect>.

Please contact us if you would like some leaflets for your team/department; we have a limited stock of printed leaflets available.

### Easy read patient information leaflet

An easy read patient leaflet is now available! A pdf version of our patient leaflet can be found on our website <https://www.hacw.nhs.uk/respect>.

Please contact us if you would like some leaflets for your team/department; we have a limited stock of printed leaflets available.

### ReSPECT Sticker

We have created a sticker so that it is easier for health professionals and relatives to find where the patients' ReSPECT form can be found. Patients place the sticker at the back of their front doors or on their fridges noting where the ReSPECT form is kept.

## Changes to ordering - ReSPECT forms

Nicola Price will take over from Sally Tolly as the main contact for ordering ReSPECT forms and folders. Thank you to Sally for undertaking this role and we wish you all the best in your retirement.

For staff at Worcestershire Health and Care NHS Trust, Worcestershire GP practices and hospices, please contact Nicola Price for all orders via [nicola.price8@nhs.net](mailto:nicola.price8@nhs.net).

For staff at Worcestershire Acute Hospitals NHS Trust, please continue to follow the process via Xerox, code WR1265



# ReSPECT FAQs

FAQ	Answers
Does a GP/Consultant have to sign the form for it to be valid?	No, the Senior Health Care Professional (usually a GP or Consultant) should endorse the form at the earliest possible opportunity. For more information please refer to: Section 8 of the policy, Clinical Responsibility for ReSPECT recommendations, p16, c)
Does a GP have to go out to see a patient within 3 days for the ReSPECT form to be valid?	The requirement for a GP Face to Face review is dependent on the circumstances and the other clinicians involved. Absence of GPs countersignature does not make the ReSPECT form invalid. For more information please refer to: Section 8 of the policy, Clinical Responsibility for ReSPECT recommendations, p15-16, a) to e)
Can staff below Band 6 nurses be involved in the ReSPECT form completion?	Anyone can initiate the ReSPECT conversation if they feel confident and competent to do so. The ReSPECT awareness training supports you with understanding and initiating the conversation. Anyone competent (i.e. who has completed the authorship training) and confident to do so can complete the form. This can be any band depending on the structure and internal policy of the team
Do Nurses have the authority to countersign the ReSPECT form?	The Senior Clinician responsible for the patient care can countersign the form. Who can countersign the form should be discussed, agreed internally and stated in your local operational policy around the ReSPECT process.
How much do Care Homes understand about the ReSPECT process?	Over 400 staff from Care Homes in Worcestershire have completed Face to Face and online training. Promotion continues at every opportunity. Any Health and Social Care professionals involved with providing or supporting care in homes should be promoting ReSPECT at every opportunity to increase awareness.
Will WMAS accept the ReSPECT form if it has the patient's previous address on it?	The form is relevant to the patient and not to the address they are currently residing in. Focus should be on unique identifiers which are: Name, DOB and NHS number. The ReSPECT form is a statement of wishes and preferences; it is not a legally binding form. In the absence of any evidence to the contrary, staff should respect the wishes and preferences regardless of inaccurate address details (i.e. error in the address or change in address). The address on the form can be updated; the form does not have to be rewritten.
Will WMAS accept a ReSPECT form with a sticky label address or does it need to be hand written?	Focus should be on unique identifiers which are: Name, DOB and NHS number. The ReSPECT form is a statement of wishes and preferences. It is not a legally binding form. In the absence of any evidence to the contrary, staff should respect the wishes and preferences regardless of how the details are written or stuck to the form as long as the sticker relates to the correct patient.

Is the red DNACPR form still valid?	Yes. DNACPR forms are still valid until they are succeeded by a new ReSPECT form. It will take some time before all DNACPR forms are changed to ReSPECT forms. We also need to be aware of out of area patients who may not have adopted ReSPECT and still use DNACPR forms.  DNACPR forms should always be valid until a ReSPECT form is completed.
If I don't feel confident completing the form, can I start the ReSPECT conversation, give the patient the ReSPECT form and refer the patient to the GP?	It is good practice for trained staff (awareness training) to initiate a ReSPECT conversation with a patient where appropriate. Staff who are deemed competent and feel confident to complete the process should fill in the form with patients. Under no circumstances should a blank ReSPECT form be given to the patient as it places the onus on the patient and it shouldn't. Patient can be signposted to their GP or other Professional who will provide the form.
Is the form valid since patients don't sign them?	A ReSPECT form records clinical recommendations for emergency care arising from patient-centred discussions and is neither an Advance Directive to Refuse Treatment nor a 'consent form'. It does not require signature by the person themselves. It is the responsibility of the health professionals completing the form to sign it as they would sign any clinical documentation or record of discussion. By so doing, the clinician confirms that they have both complied with capacity law and also complied with best practice in communication and shared decision-making or where the latter was not practicable or appropriate to state the reasons.  For more information refer to: <a href="https://www.resus.org.uk/respect/faqs/">https://www.resus.org.uk/respect/faqs/</a>
Can an Advance Care Plan(ACP)/Emergency Health Action Plan be used alongside the form?	ACPs/EHAPs/ECAPs/Escalations plans and ReSPECT are entirely complementary. An ACP document is usually longer and more detailed than ReSPECT. It is not restricted to planning for an emergency, and is likely to contain information about preferences such as self-management plans, place of care preferences, funeral plans, understanding of prognosis, details of financial and welfare power of attorney.  Emergency Health Action Plans (EHAPs) Emergency Care Action Plans (ECAPs) and Escalation plans are all the same thing and enable a more detailed description of what should and shouldn't happen in an emergency situation. These are not essential but can be supplementary and support complex decision making. EHAPs and ECAPs are being used in different areas of Worcestershire and were implemented prior to the ReSPECT process commencement. They remain a useful adjunct.  A ReSPECT form is a very specific type of Advance Care Plan that summarises the emergency care aspect of a wider Advance or Anticipatory Care planning process. ReSPECT records that information to make it accessible rapidly to professionals who need to make immediate decisions about care and treatment in time of a crisis.



## Language Matters!

Remember the ReSPECT form will be used in many different settings in Health and Care. For that reason it is very important we ensure the language used in completing the form is as universal as possible. The terminologies you use matter – they must be meaningful to all. For example please do not use 'ward based care' in the recommendations section of the ReSPECT form: this is considered to be common jargon in the acute sector but this is information that is not transferable and does not apply to all settings.

## Question time

*Q: The form is great but some of the boxes are too small. Is there anyway you can change it form and make the boxes bigger?*

A: We are unable to change the form at local level. The ReSPECT form has been designed by a National team who constantly receives staff feedback. The National Team is aware of this feedback and are currently developing version 3 of the form.



## ReSPECT is for anyone and everyone!

It is not an end of life form, nor is it just for older adults. ReSPECT will have more relevance to those with life limiting conditions, those who are at risk of sudden deterioration and those with existing health conditions.



- A person with a ReSPECT form can be for resuscitation.
- All health and care professionals across the county are utilising and supporting the ReSPECT process from 1st July including both Worcester Health and Care & Worcester Acute, Primary Care, West Midlands Ambulance service, hospices, Worcestershire County Council, domiciliary care providers, nursing homes, the voluntary sector and Care UK; Out of Hours services.
- From 1st July 2019 no new DNACPR forms will be issued.
- All resus decisions must be recorded on a ReSPECT form following the ReSPECT process.
- All relevant professionals should access either authorship or awareness training modules electronically if you have missed the face to face sessions delivered by the ReSPECT team.
- ReSPECT is a nationally recognised form of which our geographical neighbours are already using.

## ReSPECT Ambassadors - we need you!

If you are interested in getting involved more with ReSPECT whether that is being the point of contact for your team for ReSPECT questions, ensuring your patients and service users are introduced to ReSPECT, supporting your organisation by encouraging feedback and patient stories, we want to hear from you!

We are also considering the possibility of training volunteers in some organisations who may be able to support patients and their loved ones in understanding what ReSPECT is. Please contact us if you are interested to know more.

## Case Studies, Staff Feedback and Patient stories

We need you! Could you spare a few minutes to email/call the ReSPECT team and tell us about your experience of ReSPECT so far?



## Thank you for reading...

Don't forget to follow us on Twitter and contact us with any queries and training requests

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