

Giving our patients the **ReSPECT** they deserve

Changes from a medical approach to a more person-centred one

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Abbreviated abstract:

ReSPECT was developed by the Resuscitation Council UK to provide a standard framework for emergency care planning. This project aimed to empower patients to be part of anticipatory care planning and the focus lay in ensuring clinicians were supportive of the ethos of care and reaching out to all stakeholder groups through awareness, coaching and training. The NHS Institute for Innovations Sustainability Model was used to multiply the benefits and accelerate the improvement.

Related publications:

Maher L, Gustafson D, Evans A. NHS Sustainability Model and Guide. NHS Institute for Innovation and Improvement; 2010

The ReSPECT Process and approach to adoption

Why should we consider ReSPECT?

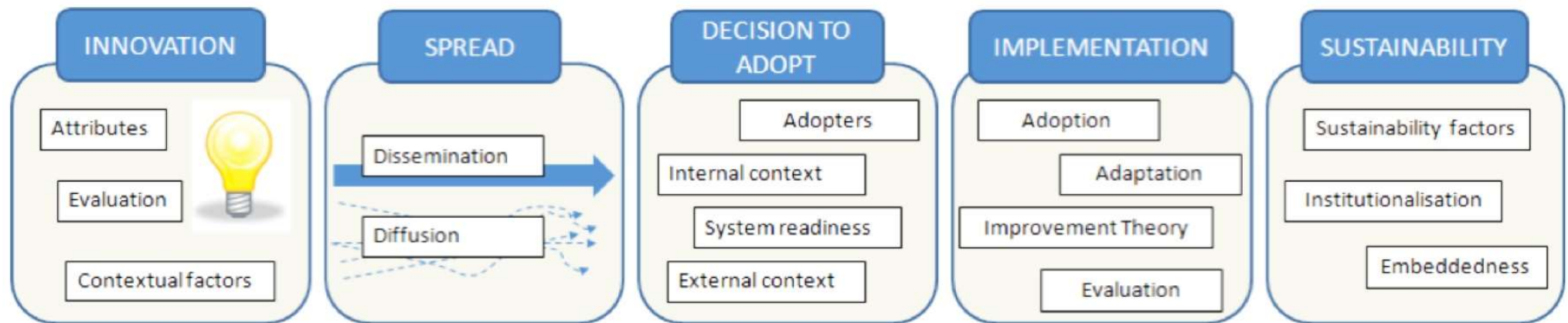
- The ReSPECT process guides clinicians to provide appropriate care at the right time, and encourages discussion with patients and those important to them to facilitate a realistic approach for their future care.
- For the wider community and those supporting carers and providing voluntary services, it offers an opportunity for two way communication centred on the wishes of the patient and those important to them

Approach to implementation

- The approach to implementation was to assess the task using the 5 steps of the NHS Institute for Innovations Sustainability Model.
- Leadership, staff involvement and staff behaviours to sustain the change were all key areas of focus and defined the process to deliver training and support, in order to multiply the benefits and accelerate the improvement.

NHS Institute for Innovations Sustainability Model

- Innovation and spread - developed and undertaken by the national team
- Decision to adopt – Clinical and Senior leadership ensured high level support for the project
- Implementation – Staff and stakeholder involvement including development of a set of competencies and training schedule to ensure clinicians, nurses and AHPs were confident and competent to complete a ReSPECT document.
- Sustainability - Ongoing clinical support with dedicated sessions from Medical team and ReSPECT nurse to embed the process



Expected Benefits and Conclusions

Expected benefits

- Increased participation in care management decisions for patients and those important to them
- Improved transfer of information and communication between care settings
- Improved documentation of shared decision making
- Increase in the importance of a multi disciplinary approach to patient care
- Reduced re admissions for patients who prefer to be cared for at home or a homely setting
- Reduced length of hospital stay for patients who wish to be cared for at home or in a homely setting
- Increased number of patients achieving their wish of dying at home or in a homely setting

Conclusions

Our quantitative (audits of DNACPR forms and ReSPECT forms) and qualitative evidence (staff perceptions, patient and family feedback) points towards the ReSPECT process being superior to existing processes, primarily DNACPR documentation. The feedback received from the pilot has been overwhelmingly positive, both formally and informally. The process prompts conversations which may or may not have taken place and ensures clear documentary evidence that appropriate planning is in place in the event of a health crisis.