

ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) is a process that creates personalised recommendations for a person's clinical care in a future emergency in which they are unable to make or express choice. It provides health and care professionals responding to that emergency with a summary of recommendations to help them to make immediate decisions about that person's care and treatment.

- ✓ **1.** The process is based on one or more conversations between a person and their clinicians. It is supported by a form, which acts as a summary of the discussion and is retained by the person (patient). Always sign and date the form.
- ✓ **2.** The conversation(s) aims to establish a shared agreement about the person's main clinical problems and needs, and the ways in which these could change to create an emergency. Record the outcome in Section 2 of the form.
- ✓ **3.** The patient's preferences for their future care and treatment in any such emergency are a key part of the discussion. Use Section 3 of the form to record these.
- ✓ **4.** Take care to be specific when recording in Section 4:
 - a) care or treatments to be considered (e.g. treat supraventricular tachycardia with adenosine)
 - b) care or treatments that are not recommended (e.g. not for invasive ventilation).
- ✓ **5.** Complete sections 5, 6 and 7 fully and carefully to confirm that the process has been followed and that the recommendations are lawful (e.g. compliant with capacity and human rights legislation). If a person lacks capacity to contribute to the ReSPECT process, this must take place with their legal proxy (e.g. Welfare Attorney) if they have one, or otherwise with a close family member.
- ✓ **6.** Ensure that their ReSPECT conversations and form are documented in the person's records and that an alert is registered showing they have a ReSPECT form.
- ✓ **7.** Make sure section 8 records those involved in discussing this plan and essential emergency contacts.
- ✓ **8.** Ensure all entries on the form are legible and unambiguous. Make sure that the wording used is appropriate for all community, ambulance and acute hospital staff to read, understand and be guided by.
- ✓ **9.** The patient holds the form so they need to know:
 - a) what's on it
 - b) what they should do with it.
- ✓ **10.** Remember to review the entries on the form with them whenever a person's condition changes or when they move from one care setting to another (e.g. Hospital to Nursing Home).

The ReSPECT Subcommittee of the Resuscitation Council UK is grateful for the help of Dr Hazel Blanchard with the development of this document.