Making a Recommended Summary Plan for Emergency Care & Treatment (ReSPECT)

What should happen to you in an emergency?

What is it?

The ReSPECT process creates personalised recommendations for your clinical care in emergency situations in which you are not able to decide for yourself or communicate your wishes.

Who is it for?

This plan is for anyone, with increasing relevance for people who have particular needs; who are likely to be nearing the end of their lives; or who want to record their care and treatment preferences for any other reason.

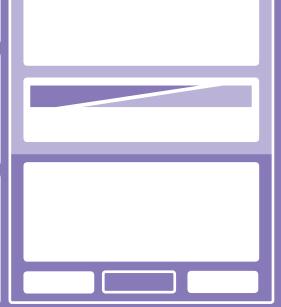
How does it work?

The plan is created through conversation between health professionals and you. You keep the plan with you and try to make sure that it will be available immediately in an emergency to health professionals, such as ambulance crews, out-of-hours doctors, or hospital staff if you are admitted.

What does it cover?

The plan guides clinicians who have to make rapid decisions for you in an emergency, so that they can choose the right balance between focusing treatment mainly on prolonging life and focusing mainly on providing comfort. It includes recommendations about specific treatments that you would want to be considered for or would not want, or those that would not work in your situation or could cause you harm. One of these is a recommendation about attempting CPR. Details of other important planning documents and of people to be contacted in an emergency are also recorded.

ReSPECT



What does it NOT cover?

The plan does not allow you to demand treatments that are clinically inappropriate for you. Although the recommendations on this plan are not legally binding, in an emergency they can help to ensure that you get the treatment that is best for you and that you would have wanted.

Why is this available?

In a crisis, health professionals may have to make rapid decisions about your treatment, and you may not be able to participate in making choices. This plan empowers you to guide them on what treatments you would or would not want to be considered for, and to have recorded those treatments that could be important or those that would not work for you. Many life-sustaining treatments involve risks of causing harm, discomfort and loss of dignity, or the risk of dying in hospital when you may have wanted to be at home. Many people choose not to take those risks if the likelihood of benefit from treatment is small. This plan is to record preferences and recommendations for emergency situations, whatever stage of life you are at.

What else can I do?

If you have any questions about ReSPECT, speak to a member of your healthcare team. There are other steps you can take to try to ensure that your wishes for your future care and treatment are known about and respected. For example, you can give legal authority to someone who you would want to make decisions on your behalf, or you can try to make sure that people close to you know your preferences, so that they can help professionals to make the best decisions for you in an emergency. In England and Wales you can make a legally binding Advance Decision to Refuse Treatment (ADRT), but clearly documenting your wishes about future care is helpful wherever you live in the UK.