ReSPECT

Recommended Summary Plan for Emergency Care and Treatment

ACT & ADOPT — Dissemination and implementation checklist (version 1.0)

Regional Actions

A — **Acknowledgement**
Secure organisational sponsorship in the geographical area and ensure it understands the need for ReSPECT and is willing to promote its dissemination and implementation in that area.

Acknowledge that a national communication strategy exists for ReSPECT but that each health and care community needs to consider how and when to implement ReSPECT. ☑

C — **Communication**
Establish an implementation group (this needs to span the implementation and continue beyond in a monitoring role).

Appoint implementation lead(s) and champions from local health and care communities (e.g. NHS Trust CEOs, ambulance service, resuscitation officers, critical care, paediatricians, main medical and surgical specialties, social care, palliative care, learning disability, patient advisory groups, nursing homes, ethical and legal representatives, Clinical Commissioning Groups, GPs, clinical information systems). ☑

T — **Tactics**
Develop and agree an implementation plan, including roles and responsibilities, time scales, resources, risks, interdependencies and funding.

Secure project management and support for audit and service improvement.

Ensure that information and resources link to the ReSPECT website.

Consider the impact of implementing ReSPECT on partner agencies in local health and care communities. ☑

Organisational Adoption*

A — **Adoption**
Formal adoption of ReSPECT by a lead group (e.g. Trust board).

Consider making ReSPECT an organisational goal with associated metrics. ☑

D — **Dissemination**
Presentations to all clinical and organisation groups (see overleaf for more details).

Develop a communication strategy appropriate to the organisation that takes advantage of the nationally developed ReSPECT communication materials. ☑

O — **Organisational issues**
Identify how ReSPECT will impact on supplies for new forms, print strategy (e.g. ability to print in colour) and electronic records. ☑

P — **Policy revision**
Identify which policies can be modified or replaced (e.g. resuscitation, advance care planning, policies relating to capacity legislation). ☑

T — **Training**
Identify the existing training gaps and overlap and concentrate on filling the practice gap rather than setting up additional layers of training.

Consider using ReSPECT as a descriptor for all training relating to MCA, advance care planning and advance CPR decisions. ☑

*Detailed organisational checklist overleaf

Adoption

Sponsorship group (e.g. Trust board) has formally agreed to adopt ReSPECT having understood the principles embodied in ReSPECT, including the terms of use.

Dissemination

Large organisation dissemination checklist (e.g. NHS Trust): clinical policy group; lead nurse groups; resuscitation committee; all relevant departments (e.g. all medical specialties, all surgical specialties, chaplaincy, critical care, emergency department, gynaecology, maternity, mental health, ophthalmology, musculoskeletal, paediatrics, psychology, social work,); patient advisory group; legal lead; capacity/safeguarding lead; learning disability liaison lead; discharge lead; education and training teams; IT teams; quality assurance and audit teams; reception and clinical secretarial leads.

Small to medium size organisation dissemination list (e.g. hospice, nursing home, GP practice): clinical management committee or group; policy group; documentation group; education/training group; medical and nursing staff; social worker, psychologist, chaplain; rehabilitation team (physiotherapists, occupational therapists); volunteer lead; receptionists; clinical secretaries.

Promotion: Use national ReSPECT communication materials to develop organisational materials   (e.g. patient and professional leaflets, letters, posters, presentation materials for PowerPoint, intranet and website)

Liaise with IT about promoting ReSPECT on the organisation's intranet and with communication teams about internal promotion

Organisational issues

Identify systems and documents impacted by ReSPECT

Review and identify how various processes and systems might be impacted by ReSPECT (e.g. other care plans, discharge letters).

Consider and agree on plan to incorporate ReSPECT into paper and electronic patient health records and other relevant information systems. Agree print and digital strategy.

Transitioning from DNACPR to ReSPECT

Ensure that the resuscitation committee/group has agreed to implement ReSPECT.

Develop a plan to introduce ReSPECT and phase out DNACPR policy and documents.

Inform and work with regional ambulance services to enable recognition and use of ReSPECT.

Inform and work with all linked health and care communities to enable recognition and use of ReSPECT.

Set a date for full transition to ReSPECT.

Policy revision

Identify which policies are impacted by ReSPECT and can be modified or replaced.

In particular address the unification policy on DNACPR, advance care planning, policies relating to capacity legislation. Embed ReSPECT in these policies.

Teaching and training

Consider auditing any practice gaps in compliance with capacity legislation, shared decision-making, communication, advance care planning and consent.

Consider using ReSPECT 'badge' to re-launch training to fill any practice gaps identified. Adapt mandatory training to include ReSPECT, rather than adding more mandatory training.

Draw up a training plan that reflects the needs and roles of different groups and takes advantage of the knowledge of what works well in the organisation.

Implementation

Agree plan for implementation. This may be a phased implementation or pilot period.

Testing out the process first before full implementation is an option at this stage.

Ensure the communication plan is in place, drawing on the national ReSPECT resources.

Monitoring and review

ReSPECT is a change in policy and culture that may disrupt existing practice and ways of working.

Adapt existing data tools to access and monitor relevant data for analysis and reporting, including audit. Agree these before ReSPECT is embedded.

The ReSPECT team wants to receive feedback from those involved in implementing ReSPECT.

Please visit www.ReSPECTprocess.org.uk to get information about how to submit your feedback.