



Bath and North East Somerset,
Swindon and Wiltshire Partnership
Working together for your health and care



Digital ReSPECT

June 2023



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Working together for your health and care

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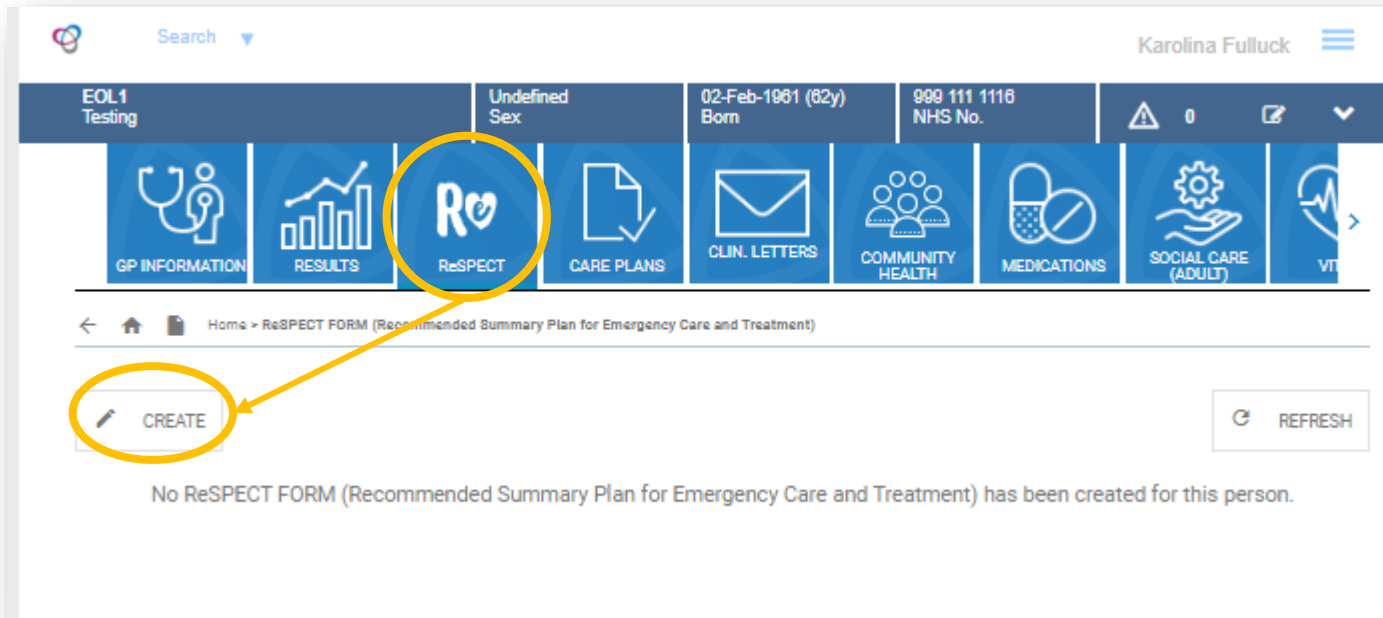
Uploading ReSPECT Capacity Assessments

Creating a Digital ReSPECT form

Open the ICR from your clinical system.

Select the blue ReSPECT tile on the landing page

Click CREATE



The screenshot displays a clinical system interface. At the top, there is a search bar and the user's name, Karolina Fulluck. Below this is a navigation bar with several tiles: GP INFORMATION, RESULTS, ReSPECT (highlighted with a yellow circle), CARE PLANS, CLIN. LETTERS, COMMUNITY HEALTH, MEDICATIONS, SOCIAL CARE (ADULT), and VIT. Below the navigation bar, there is a breadcrumb trail: Home > ReSPECT FORM (Recommended Summary Plan for Emergency Care and Treatment). In the main content area, there is a 'CREATE' button (highlighted with a yellow circle) and a 'REFRESH' button. Below the buttons, a message states: 'No ReSPECT FORM (Recommended Summary Plan for Emergency Care and Treatment) has been created for this person.'



Creating a Digital ReSPECT form

Fill out the ReSPECT form:

1. This plan belongs to:

Full Name:	Testing 80L1
DOB:	02-Feb-1961
Address:	200 Any Road, Any Town, Any County, PC12 9PC
NHS/CHI/Health and care number:	999 111 1116 / 999 111 1116
Preferred Name:	
Form Completed:	* 04-May-2022

Recommended Summary Plan for Emergency Care and Treatment

Click HERE for ReSPECT Resources

Care Centric Digital Version 3.5

The ReSPECT process starts with conversations between a person and a healthcare professional. The ReSPECT form is a clinical record of agreed recommendations. It is not a legally binding document.

2. Shared understanding of my health and current condition

Summary of relevant information for this plan including diagnoses and relevant personal circumstances:

* testing

Details of other relevant care planning documents and where to find them (e.g. Advance or Anticipatory Care Plan; Advance Decision to Refuse Treatment or Advance Directive, Emergency plan for the care):

* testing

I have a legal welfare proxy in place (e.g. registered welfare attorney, person with parental responsibility) - If yes provide details in Section 8

Yes No Unknown

3. What matters to me in decisions about my treatment and care in an emergency

Living as long as possible matters most to me

Quality of life and comfort matters most to me

What I most value:

What I most fear / wish to avoid:

4. Clinical recommendations for emergency care and treatment

Prioritise extending life or Balance extending life with comfort and valued outcomes or Prioritise comfort

<Clinician Signature>

Now provide clinical guidance on specific realistic interventions that may or may not be wanted or clinically appropriate (including being taken or admitted to hospital +/- receiving life support) and your reasoning for this guidance:

* test

CPR attempts recommended Adult or child or For modified CPR Child only, as detailed above or CPR attempts NOT recommended Adult or child

<Clinician Signature>

<Clinician Signature>

* test

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Go To Top Go To Page 2

Please note all the mandatory fields (marked with an asterisk) have to be completed in order to publish the form.

The ReSPECT form has two pages. Click here to change between the pages

Page 1 (Sections 1-4) Page 2 (Sections 5-9)

5. Capacity for involvement in making this plan

Does the person have capacity to participate in making recommendations on this plan? Document the full capacity assessment in the clinical record

Yes No

If no, in what way does this person lack capacity?

<Text Here>

If the person lacks capacity a ReSPECT conversation must take place with the family and/or legal welfare proxy

6. Involvement in making this plan

The clinician(s) signing this plan (are confirming that (select A, B, C, OR complete section D below):

* A This person has the mental capacity to participate in making these recommendations. They have been fully involved in the plan.

B This person does not have the mental capacity, even with support, to participate in making these recommendations. Their past and present views, where ascertainable, have been taken into account. The plan has been made, where applicable, in consultation with their legal proxy, or where no proxy, with relevant family members/friends.

C This person is less than 16 years old (16 in Scotland) and (please select 1 or 2, and also 3 as applicable or explain in section D below):

1 They have sufficient maturity and understanding to participate in making the plan.

2 They do not have sufficient maturity and understanding to participate in making the plan. Their views, when known, have been taken into account.

3 Those holding parental responsibility have been fully involved in discussing and making the plan.

D If no other option has been selected, valid reasons must be stated here. (Document full explanation in the clinical record.)

<Text Here>

7. Clinicians' signatures

Grade / speciality	Clinician name	GMC / NMC / HCPC no.	Signature	Date & time
<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>	<Date & time>
<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>	<Date & time>

Senior responsible clinician:

* test

8. Emergency contacts and those involved in discussing this plan

Name (select box if involved in planning)	Role and relationship	Emergency contact no.	Signature (optional)
* test	* test	* test	test
<Name>	<Role and relationship>	<Emergency contact no.>	<Signature>
<Name>	<Role and relationship>	<Emergency contact no.>	<Signature>
<Name>	<Role and relationship>	<Emergency contact no.>	<Signature>

** Please list in for primary emergency contact

9. Form reviewed (e.g. for change of care setting) and remains relevant

Review date	Grade / Speciality	Clinician name	GMC / NMC / HCPC no.	Signature
<Date & time>	<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>
<Date & time>	<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>
<Date & time>	<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>
<Date & time>	<Grade / Speciality>	<Clinician name>	<GMC/NMC/HCPC no.>	<Clinician Signature>

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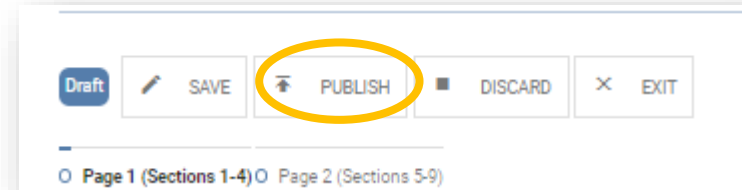
Go To Page 1

Creating a digital ReSPECT form

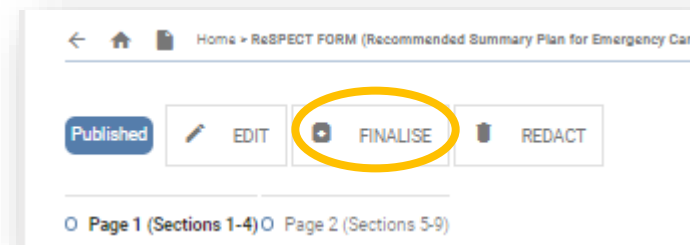
Once you have finished adding information to the ReSPECT form you will need to:

You must click **PUBLISH** to make this form available for other users to view

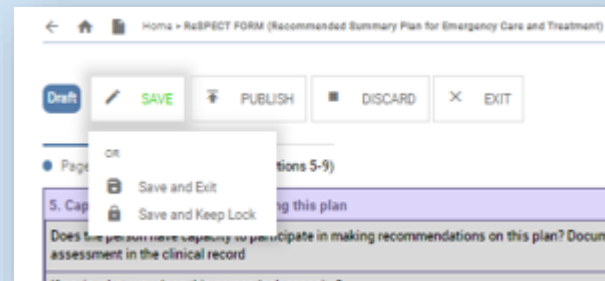
PUBLISH it (this will make it visible to clinical colleagues)



and then **FINALISE** it (this enables printing – see slide 7)



If you are unable to finish the form you can **SAVE** it to be able to come back to it later:



Please note **SAVING** a form without publishing it first locks it for other users so only use this option if you will be able to go back to it imminently.

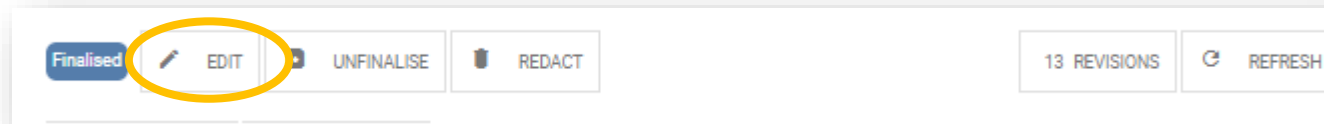
Editing a published ReSPECT form

Open the ICR from your clinical system.

Select the blue ReSPECT tile on the landing page

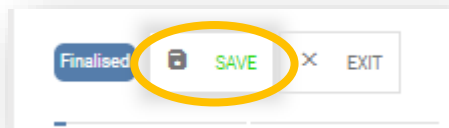


Click **EDIT**



Make the required changes to the form

Click **SAVE**



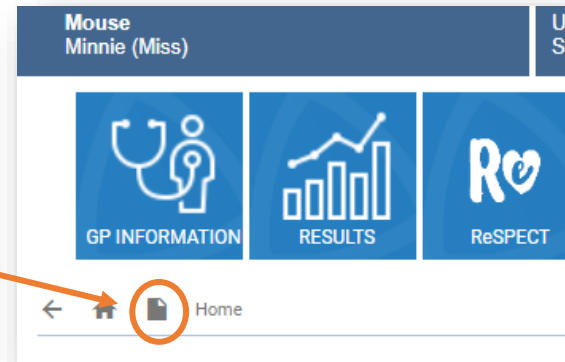
As the form has been previously finalised you will now see a PDF generator to print the new version of the form (see slide 9). If you do not see this window appear you will need to click **FINALISE**.

Editing an unpublished ReSPECT form

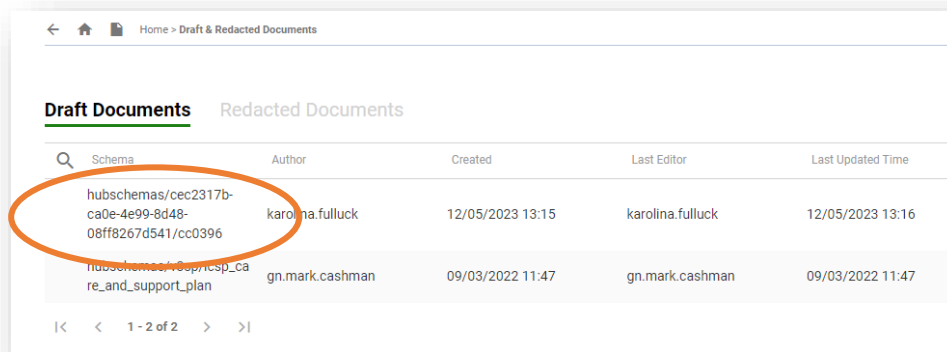
When you have started to create a Digital ReSPECT form but it has not yet been published only you will be able to view it. In order to make it viewable for your colleagues you need to retrieve it from the Drafts.

Open the ICR from your clinical system.

Click on the Drafts Icon.



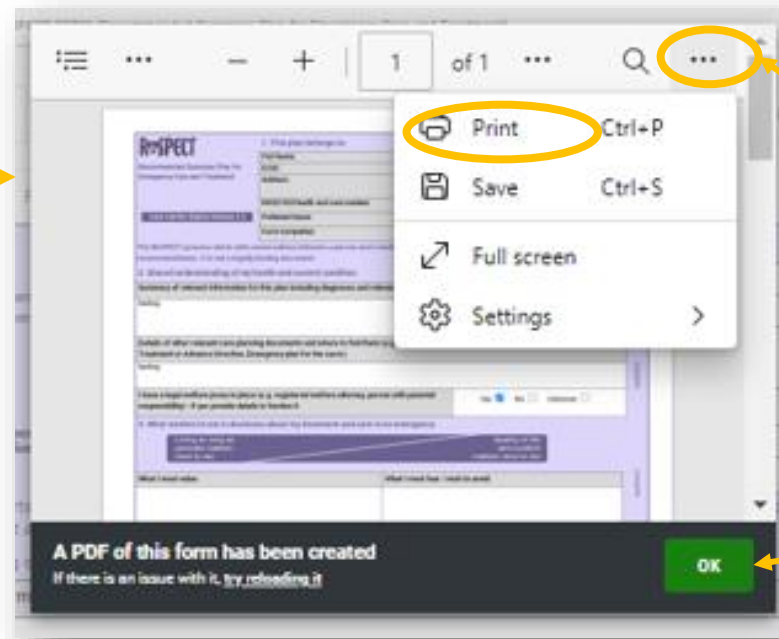
Select the draft Respect form from the list and once it opens you will be able to continue with your edits then click **PUBLISH**



Schema	Author	Created	Last Editor	Last Updated Time
hubschemas/cec2317b-ca0e-4e99-8d48-08ff8267d541/cc0396	karolina.fulluck	12/05/2023 13:15	karolina.fulluck	12/05/2023 13:16
hubschemas/gn.mark.cashman_re_and_support_plan	gn.mark.cashman	09/03/2022 11:47	gn.mark.cashman	09/03/2022 11:47

◀ Printing a digital ReSPECT form

In order to print the respect form you need to click FINALISE (for new forms) or UNFINALISE and then FINALISE for existing forms – this opens a PDF generator:

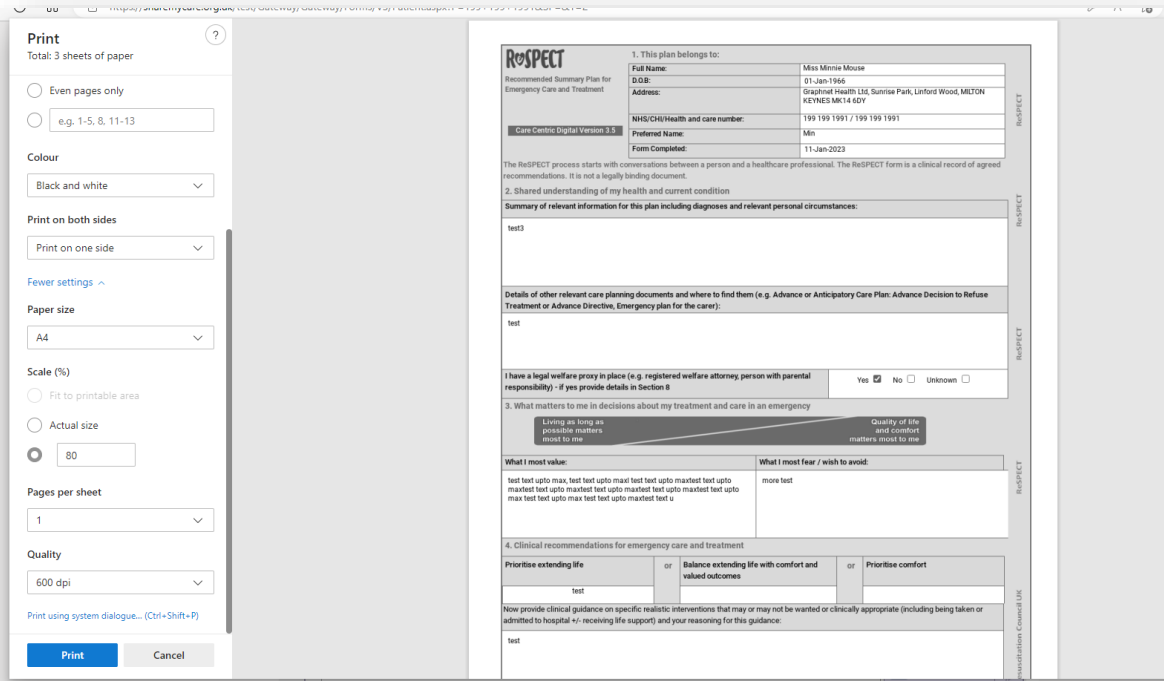


Click on the three dots and then on Print

(If you click on OK this will close the pdf without printing)

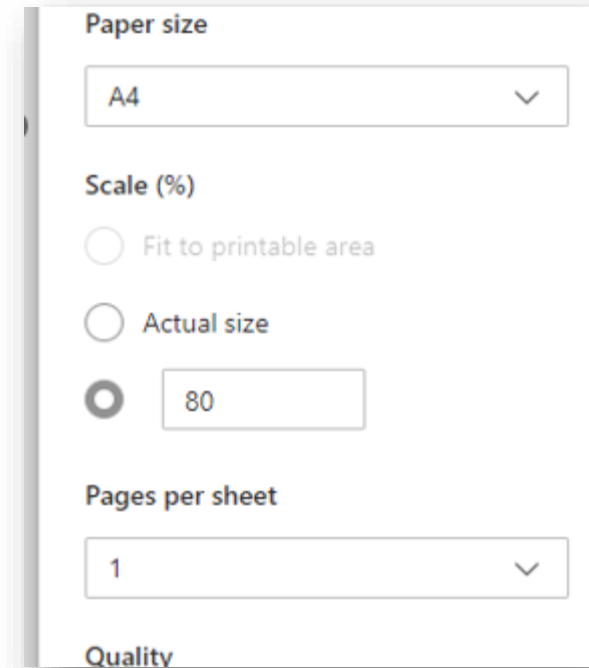
Printing a digital ReSPECT form

You will then see a Print preview screen where you can print your form as required:



NB we suggest changing the scale to 80% in print settings for optimum sizing of the document.

Click 'More Settings' and type 80 under the 'Scale (%)' field:



While patients are on the ward place the form in the purple ReSPECT folder but do not send the folder home with the patient when discharged

Digital ReSPECT Troubleshooting

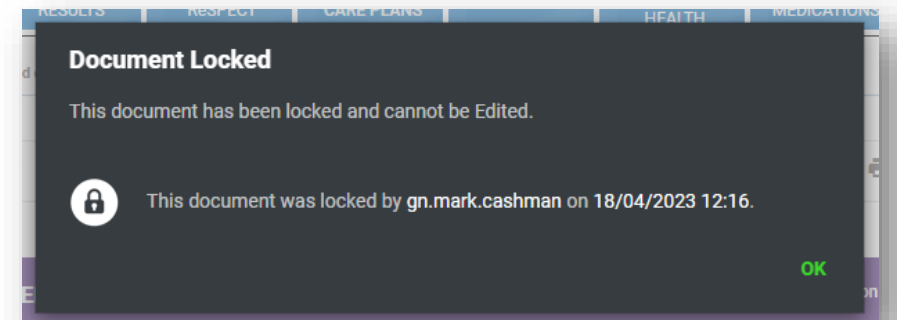
I can't see a Print button

To print the form you will need to unfinalise and finalise it – this opens a pdf generator which can then be printed

I get 'Document Locked' window

This is when another user is/was filling out the form and has not published/finalised it.

If the form has last been updated a while ago, you should contact your IT team/ICR support team (bswicb.icrsupport@nhs.net) to request it to be REDACTED to enable you to make necessary updates.



The ReSPECT form has been filled out in error / patient has requested deletion

Contact your IT team/ICR support team (bswicb.icrsupport@nhs.net) to request deletion of the form.

Digital ReSPECT Troubleshooting

Senior Decision Maker / Next of Kin information not available at the time of creation

If you do not have this information at the time of creating a form, enter the following and publish the form:

SDM: *Signature Awaited*

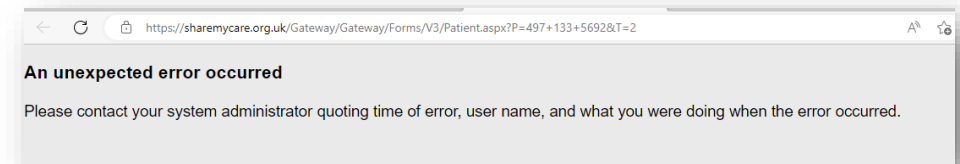
NoK: *N/A*

When upon opening the ICR you see a grey screen with a message 'An unexpected error occurred'

This message usually appears when a patient has dissented from having their data shared. When this occurs, contact bswicb.icrsupport@nhs.net / Dr Danno Turk - we will check if this is the reason for the message. Please complete a paper Respect plan while awaiting reply.

If the patient wishes to be opted in, they will need to speak to their GP to add the relevant opt in code (XaKRv) into SystemOne.

The GP should add the code using the consultation screen or adding directly via the read code browser in SystemOne. The new code will override the previous so they don't need to remove the existing opt out code



Uploading ReSPECT Capacity Assessments

SCAN


- Scan ReSPECT capacity assessment to either email or folder
- Advanced Settings - Change file type to JPEG

EPR

- Open the patient in your clinical system (SystemOne / Millenium etc) and then open their Integrated Care Record

ICR

- Select **Care Plans** blue tile
- Select **Care Planning: Supporting Documents**



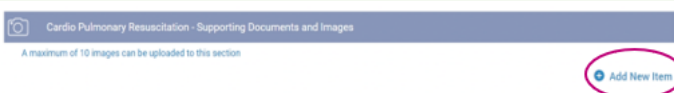
ICR

- Select **Create** (if uploading a document for 1st time)
- Or select **Edit** (if uploading an updated document or if forms already exist in this part of ICR)

ICR

- Scroll down to Cardio Pulmonary Resuscitation - Supporting Documents and Images Section
- Select **Add New Item**

ICR



ICR

- Select **Add Image**




ICR

- Choose your scanned file & select **open**

ICR

- In the image preview box, rename the file from 'My uploaded image' to e.g. Joe Bloggs ReSPECT form Pg 1

ICR

- Drag mouse & click on: Display Name
My uploaded image to do this 

ICR

- Select **Upload Image**

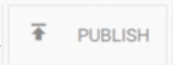


ICR

- Repeat the Add New Item & Add New Image Steps for the 2nd page as above

ICR

- Scroll to the top of the page
- Select **Publish** to complete the process



NB

- If uploading an updated form please ensure you make this clear in the 'Display Name' e.g. 'Updated J Bloggs Repect Capacity Assessment ' & consider including date of upload.

NB

- If uploading an updated form in 'edit' mode
- Select **Save** to complete the process (Publish won't be an option)