



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



# Digital ReSPECT

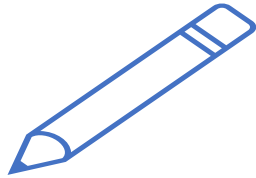
April 2024



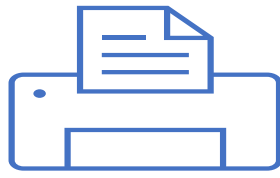
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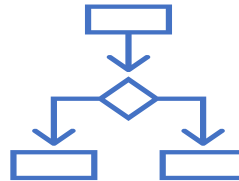
Creating



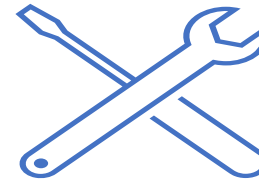
Editing



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Key Processes



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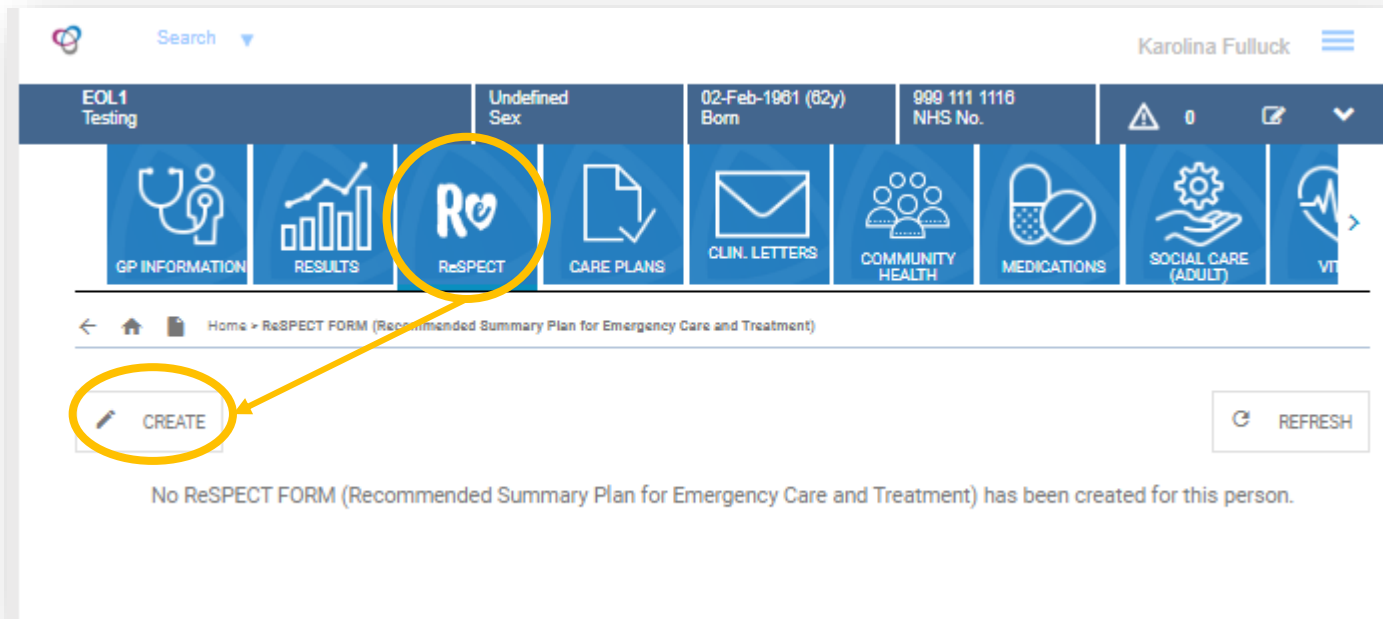
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Assessments

## 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 patient information bar with fields for EOL1 Testing, Undefined Sex, 02-Feb-1981 (82y) Born, and 999 111 1116 NHS No. A row of blue tiles represents different clinical areas: GP INFORMATION, RESULTS, ReSPECT, CARE PLANS, CLIN. LETTERS, COMMUNITY HEALTH, MEDICATIONS, SOCIAL CARE (ADULT), and VIT. The ReSPECT tile is circled in yellow. Below the tiles is a breadcrumb trail: Home > ReSPECT FORM (Recommended Summary Plan for Emergency Care and Treatment). A 'CREATE' button with a pencil icon is circled in yellow and has a yellow arrow pointing to it from the ReSPECT tile. A 'REFRESH' button is also visible. 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:   
 DOB:   
 Address:   
 NHS/CHI/Health and care number:   
 Preferred Name:   
 Form Completed:

2. Shared understanding of my health and current condition

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

\*

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):

\*

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>  <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:

\*

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>

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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:

\*

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)
* <input type="text" value="test"/>	<input type="checkbox"/>	* <input type="text" value="test"/>	<input type="text" value="test"/>
<Name>	<input type="checkbox"/> <Role and relationship>	<Emergency contact no.>	<Signature>
<Name>	<input type="checkbox"/> <Role and relationship>	<Emergency contact no.>	<Signature>
<Name>	<input type="checkbox"/> <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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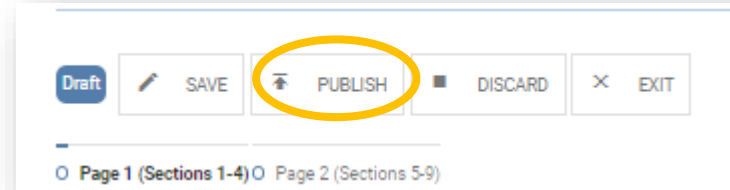
Go To Page 1

## Creating a digital ReSPECT form

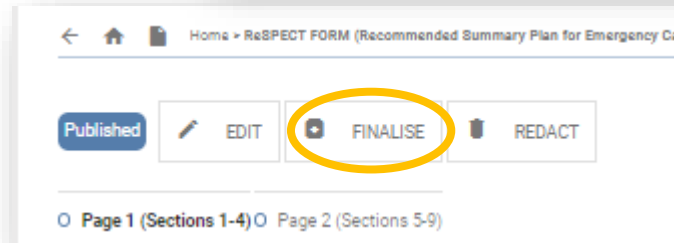
Once you have finished adding information to the ReSPECT form you will need to:

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

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

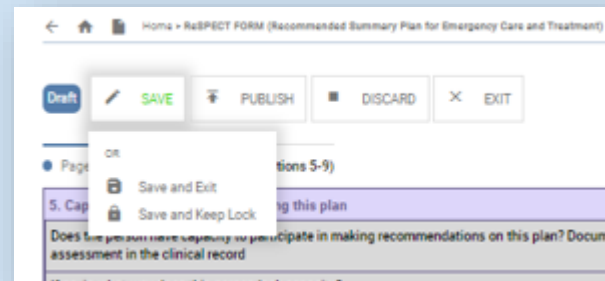


You can now decide to **FINALISE** the form



When you Publish or Finalise a newly created ReSPECT you will see a pop-up window with the PDF generator which will enable you to print it. See further slides for printing instructions.

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.

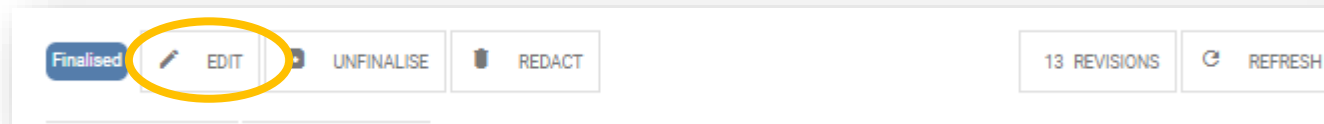
## Editing a published ReSPECT form

Open the ICR from your clinical system.

Select the blue ReSPECT tile on the landing page

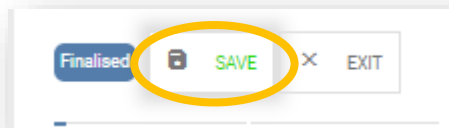


Click **EDIT**



Make the required changes to the form

Click **SAVE**



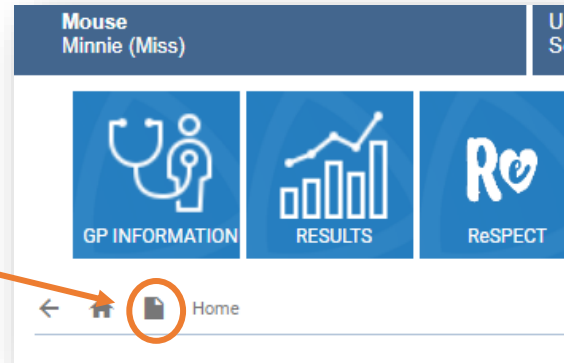
Saving a published form will open the PDF generator to print the new version of the form (see slides relating to printing digital ReSPECT form).

## Editing an unpublished ReSPECT form

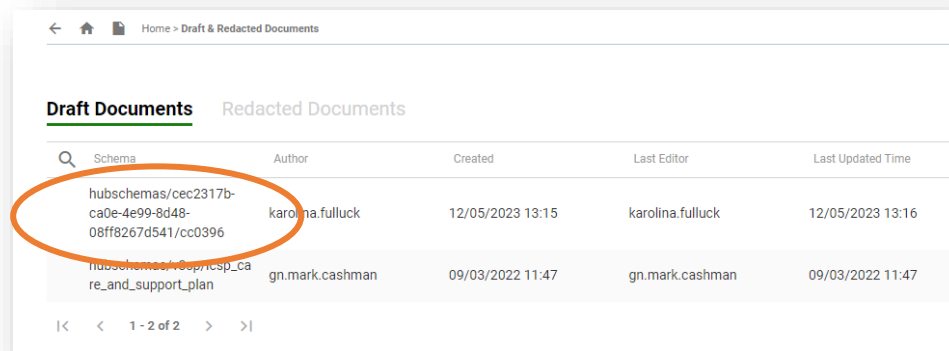
When you have started to create a Digital ReSPECT form but it has not yet been published only you will be able to view it. In order to make it viewable for your colleagues you need to retrieve it from the Drafts.

Open the ICR from your clinical system.

Click on the Drafts Icon.



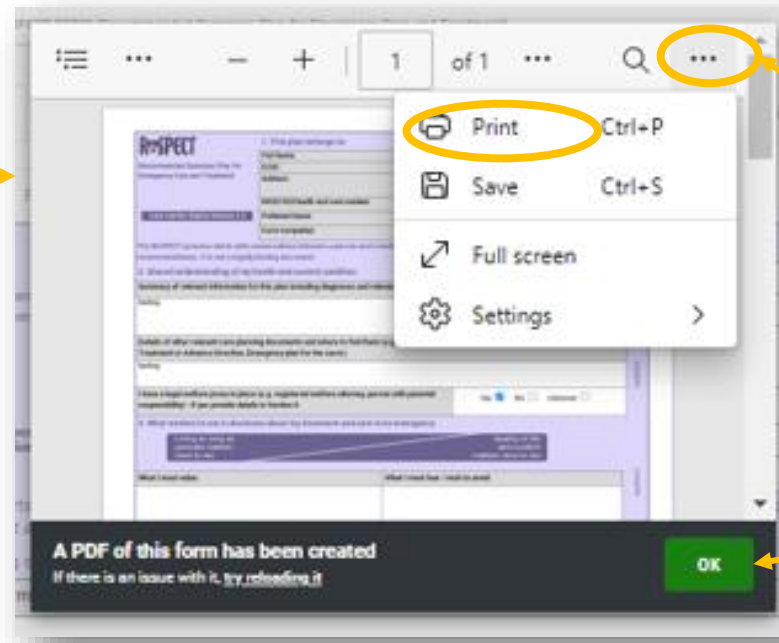
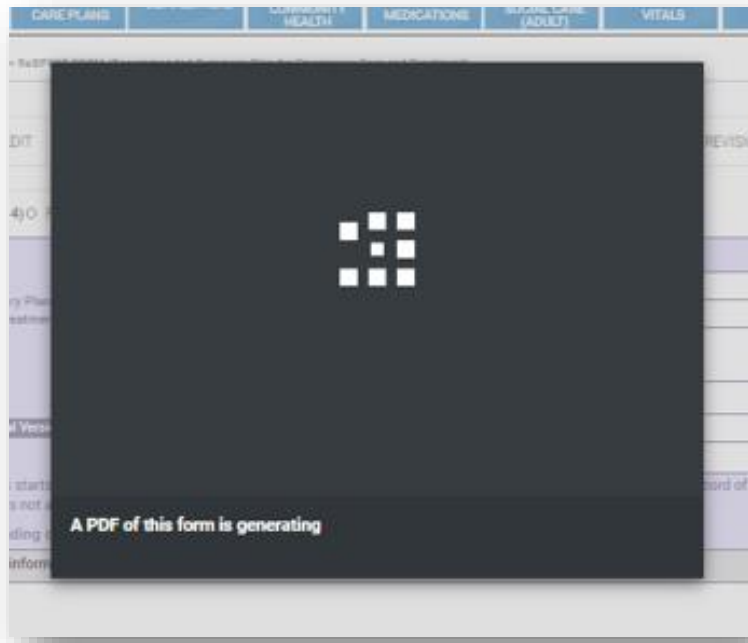
Select the draft Respect form from the list and once it opens you will be able to continue with your edits then click **PUBLISH**



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/00000000-0000-0000-0000-000000000000/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 a digital ReSPECT form you need to click **PUBLISH** or **FINALISE** (for new forms) or **EDIT** then **SAVE** (for existing forms) – this opens a PDF generator from which you can print the form:



Click on the three dots and then on Print

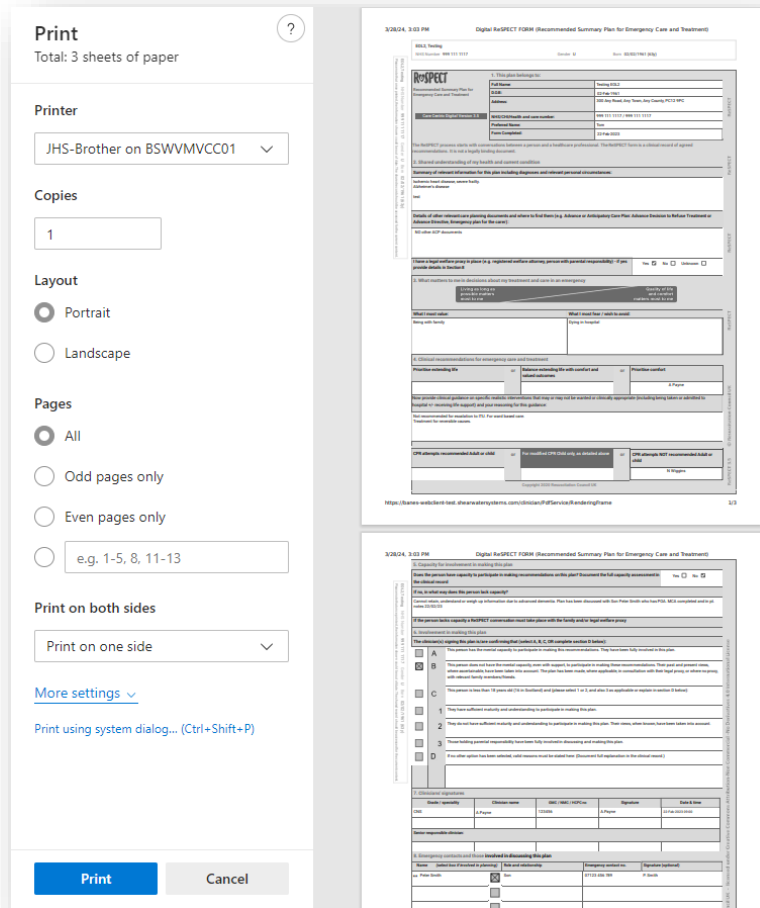
(If you click on OK this will close the pdf without printing)





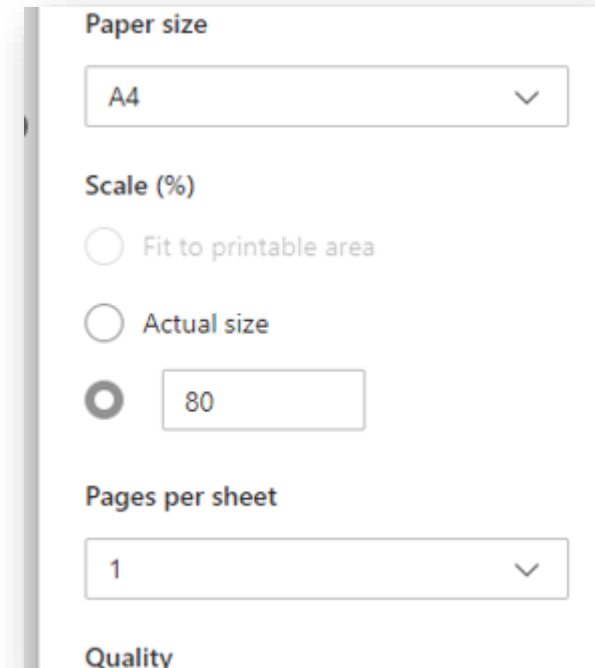
# Printing a digital ReSPECT form

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, and to print in colour if possible.**

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



**WHERE AVAILABLE:** 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 – key processes (1)

- If a patient needs a ReSPECT plan completing, you should complete a digital plan. This includes when records indicate they have had a ReSPECT/TEP form in place at some point but is not immediately available for you to review.
- Any time a digital plan is updated it is the responsibility of the person updating the plan to ensure a paper copy is printed out and put in the notes / given to patient, and removing any countersignatures if they pre-date the updated information.
- If a patient has a current paper ReSPECT plan that needs updating, then you should create a new digital plan and strike out the existing paper plan.



## Digital ReSPECT – key processes (2)

- If a patient has a currently valid ReSPECT plan in the community, this should be updated at an appropriate time e.g. at annual review or during conversations about advance care planning. These updates should be completed on the digital plan, and the existing plan crossed through.
- If there is a discrepancy between the digital ReSPECT plan and a traditional paper plan, you must find out the patient's preferences as soon as possible, and the digital ReSPECT plan must be updated accordingly. The paper plan should be crossed through.
- If you are at an inpatient facility and a patient is registered with a GP that does not share to the ICR, you should complete a digital ReSPECT plan as normal. However you must ensure that the clinical recommendations are included in discharge documentation so that community providers are made aware of the plan.



## Digital ReSPECT – key processes (3)

- *You must not wet sign a printed copy of a digital plan using pen and ink.*
- The ‘Senior Responsible Clinician’ section should ideally be signed by the relevant clinician on their own login. However, it is acceptable for these details to be entered using another member of staff’s login as long as it is clearly documented in the summary box of section 2 that it has been signed electronically on behalf of the Senior Responsible Clinician.
- If you work in the community and need to fill in plans in patient’s homes, please treat these copies as the paper ‘printout’, and then fill in a digital ReSPECT plan on the ICR back at base to ensure that the single source of truth is preserved, and this plan is available for others to view.
- ReSPECT capacity assessments should be scanned as JPEG/PNG and uploaded to the ‘Care Planning – Supporting Documents’ section in ICR Care Plan tile – please see the process at the end of this guide for more information



## Digital ReSPECT – how to transcribe a plan

- If a patient has a traditional paper/Ardens ReSPECT plan that is currently valid and no changes are required then this should be transcribed to a digital plan, following the advice below, and the existing plan crossed through.
  - Please transcribe the plan word-for-word and clearly document the following **in Section 2 (Summary of Important Information)**:  
*‘This plan has been transcribed from a paper plan completed by [main signatory of form] on [date plan originally completed] and electronically signed on their behalf by [your name] on [today’s date]’.*
- This this will help show that the plan has been transcribed and provide an audit trail for the electronic signatures.
- N.b. this process should only be followed where no changes are being made to the content of the form, and as such you do not need the original signatories to sign the form again.

# Digital ReSPECT Troubleshooting

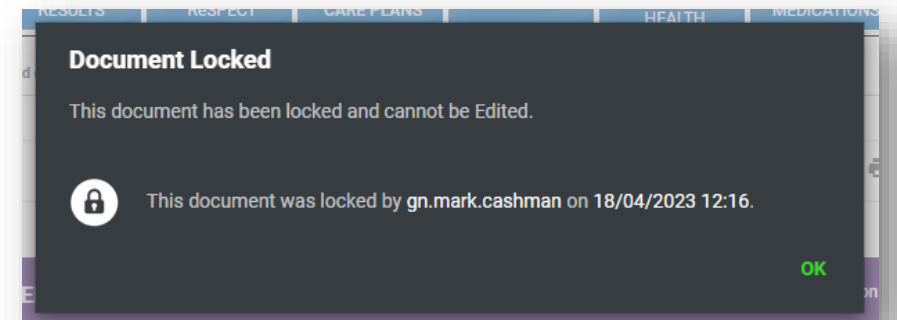
## I can't see a Print button

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](mailto: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](mailto:bswicb.icrsupport@nhs.net)) to request deletion of the form.



## Digital ReSPECT Troubleshooting

### **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:

NoK: *N/A*

**When upon opening the ICR you see a red text saying: Patient declined to have an electronic record**

This message appears when a patient has dissented from having their data shared.

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 SystmOne.

The GP should add the code using the consultation screen or adding directly via the read code browser in SystmOne. The new code will override the previous one, 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**

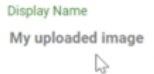
- Choose your scanned file & select **open**

**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**

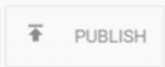


**ICR**

- 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)





## Further info

For more information about how to use our other platforms (such as the EoL ICR) and integrate these systems into primary care admin processes, please check the guides [here](#) (under the EoL ICR tab at the bottom of the page).

If you have any further questions, concerns that the above processes don't fit in to how you currently work, or feedback about any positive or negative experiences with Digital ReSPECT plans then please contact us below:

**Karolina Fulluck** – BSW ICB Project Manager – [karolina.fulluck@nhs.net](mailto:karolina.fulluck@nhs.net)

**Dr Natasha Wiggins** - Palliative Medicine Consultant, and BSW Digital Lead for Palliative and End of Life Care - [natasha.wiggins1@nhs.net](mailto:natasha.wiggins1@nhs.net)