

Offering Future Care Planning using the ReSPECT approach to care home residents: insights and reflections

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Introduction

Future care planning (FCP) is recognised to offer benefits for individuals, families and health services.

Care home residents have been identified as a population for whom FCP may be useful.

However, approaches are typically opportunistic. Here we share experiences of offering FCP, using the ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) approach.

Methods

A large urban care home with a higher rate of conveyance and hospitalisation was identified and a Geriatrician connected with the home.

She worked with care home staff, families and residents to offer future care planning, and where agreeable, complete ReSPECT document.

Conclusions

Our experiences highlight both the benefits of structured FCP, but also reflect the practical challenges and concerns among the population and those who support them.

Empowering staff and family members to advocate in the event of a health deterioration was a powerful consequence.

Equally, respecting individual preferences and tailored conversations avoided blanket approaches. ReSPECT discussions often enabled more timely hospital discharge when an admission occurred.

Practical challenges, including the lack of care home access to NHS digital systems can be overcome, but reflect structural barriers to information sharing which integrated systems should avoid.

Results

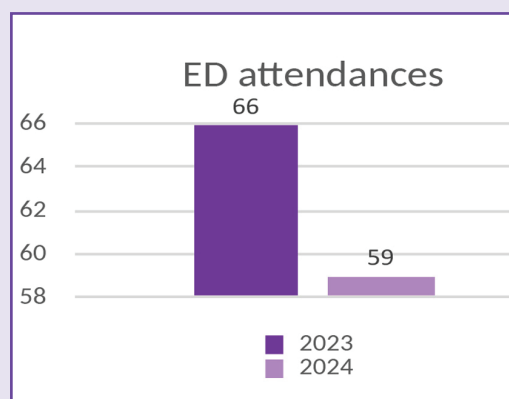
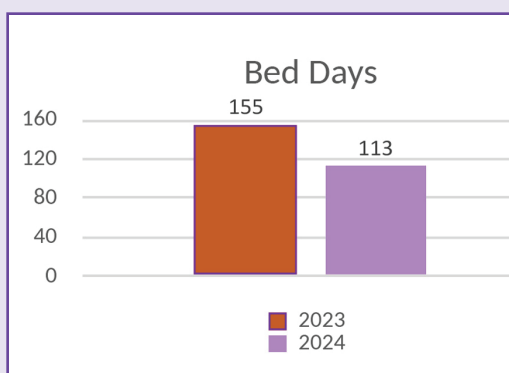
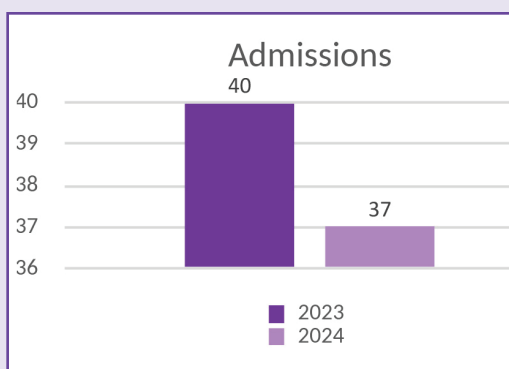
Over a 6-month period, all 92 residents were offered the opportunity to have an FCP conversation and 86 accepted.

In addition to families/legal representatives, advocacy services were used to enable equitable participation.

Digitally-facilitated communication tools were also offered.

The vast majority responded positively, and a mutually agreed ReSPECT form was completed. These were stored electronically on NHS systems and shared with the care home in paper format.

However, even when offered all available information some residents chose not to have a ReSPECT placing limitations on their care. Some



family members objected strongly to what was being suggested.

Analysis on the impact of unscheduled care has demonstrated a reduction in ED attendances, reduced admission rates and reduced bed occupancy for residents from this care home.

Opportunistic review also resulted in reduction in polypharmacy and referral to other specialties for optimised disease or symptom management.