

ReSPECT (BNSSG-Healthier Together)

1. This plan belongs to

Forename

Donotuse

Surname

Xttestpatient-Taqp

Date of Birth

04-Sep-2008

NHS Number

999 050 4741

Gender

Female

Home Address

C/O Hscic Test Data Manager, Solution Assurance, 1 Trevelyan Sq., Boar Lane, Leeds, West Yorkshire, LS1 6AE

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

2. Shared understanding of my health and current condition

Primary diagnosis relevant to this plan

Malignant neoplasm of female breast

Brief clinical summary including complications and recent treatment

bone mets in ribs and lumbar spine, liver mets

Patient's understanding of diagnosis

Patient fully aware

Other relevant care planning documents:

Has advance decision to refuse life sustaining treatment (Mental Capacity Act 2005)

Location of the Advance Decision to Refuse Treatment document

by fridge

Has Advance Care Plan

Location of the Advance Care Plan

by fridge

Lasting Power of Attorney (LPA) for health and welfare

Has someone been appointed LPA for health and welfare?

Yes

Name of LPA

John Brown

Telephone number

0777888999

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

Priorities for care and treatment:

Prioritise comfort to some extent

Additional detail about priorities for care:

keep me comfortable at home

About my values and fears ..

What I most value:

being at home with my family

What I most fear/wish to avoid:

I dont want to go back into hospital

4. Clinical recommendations for emergency care and treatment including decisions about resuscitation

Focus of care:

Prioritise extending life

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 (+/- life support). Add your reasoning for this guidance.

1. To be kept comfortable at home prioritising symptom control - does not want any life prolonging treatments

Date of these clinical recommendations:

24-Feb-2022

CPR decision

Recommendation relating to CPR:

Not for attempted cardiopulmonary resuscitation

CPR decision should be considered indefinite (usual practice)

Yes

Clinician signature - Name & Professional reg number

A Appleton 3562837

Is the Patient aware?

Yes

Date CPR decision made

24-Feb-2022

5. Capacity for involvement in making this plan

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The Mental Capacity Act (2005) requires you to assume that individuals have capacity, unless you suspect the person has an impairment or disturbance of their mind or brain. It requires any assessment to be time and decision specific. If you suspect someone lacks capacity you are required to complete a Mental Capacity Assessment.

6. Involvement in making this plan

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

7. Clinicians signatures

Grade/speciality:

GP

Clinician name:

Andrew Appleton

GMC/NMC/HCPC no.

3562837

Signature:

A Appleton

Date and time of signature:

24-Feb-2022 00:00

This clinician is the Senior Responsible Clinician

Yes

Emergency contacts and those involved in discussing this plan:

Primary emergency contact name:

John Brown

Role/relationship of person to patient:

son

Emergency contact number:

0777888999

Primary emergency contact was involved in planning **Primary emergency contact is also Next of Kin:**