

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 7 October 2024
Title:	Patient Experience: Ann's Story - ReSPECT
Responsible Director:	Craig McArthur, Director of East Ayrshire Health & Social Care Partnership (EA HSCP)
Report Author:	Laura Harvey, QI Lead, Patient Experience

1. Purpose

This is presented to the Board for:

- Discussion

This paper relates to:

- Government policy/directive
- Local policy

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

Ann wished to share her story to highlight the work of the ReSPECT Project and to let others know how this has enabled her to make plans for any healthcare emergency that might arise as a result of her life limiting conditions. It is important to Ann to know that her preferences and values are known in advance of any healthcare emergency.

2.2 Background

ReSPECT is the Recommended Summary Plan for Emergency Care and Treatment and is a national approach created by the Resuscitation Council UK. This has been adopted by a number of areas across the UK including some Scottish NHS Health Boards, of which NHS Ayrshire & Arran is one.

A ReSPECT Plan lets healthcare staff know what matters to a person when in a health crisis, and who may not be able to speak up for themselves. Once the plan is completed, professionals such as ambulance crews, out of hour's health professionals, care home staff and hospital staff will be better able to make

immediate decisions about a person's emergency care and treatment whilst ensuring their wishes are at the forefront of those decisions.

Following a local pilot earlier this year, feedback is being evaluated by the ReSPECT Team to enable the smooth rollout to additional areas across the organisation on a gradual basis during 2024.

To date, 79 ReSPECT plans have been carried out in Ayrshire and 142 staff have completed the LearnPro module. More information on ReSPECT can be found on the [AthenA page](#)

2.3 Assessment

Ann was made aware that she had Idiopathic Pulmonary Fibrosis at a time when she was already emotionally vulnerable. Ann was grieving for her husband, Bill, who had taken unwell and passed away in hospital just after the COVID-19 pandemic.

Ann recalls a feeling of abandonment at that time.

Ann has researched her condition and explained that she could cope with whatever was thrown at her as long as she understood her disease and knew what to expect. Ann knows that her condition is life limiting.

As her condition progresses, Ann wishes to go to hospital only if her condition is reversible and does not wish to die in hospital. Ann chooses comfort over extending her life and wishes to die at home. However, if this is not achievable Ann may consider a care home.

Ann's biggest fear is dying alone.

2.3.1 Quality/patient care

When Ann met the Respiratory Team at the initial ReSPECT planning meeting, it brought back the feelings of abandonment that she had felt previously. However following the meeting Ann realised that she had been empowered to make her own decisions. Ann felt cared for following the meeting and she was reassured that her thoughts and wishes would be followed.

Ann's story highlights the significant positive impact that can be made involving patients in decisions about their healthcare. A ReSPECT Plan is intended to put the individual at the heart of decisions about their future emergency healthcare.

Many people approaching the end of life undergo emergency medical interventions and hospitalisations that do not hold value for them. A ReSPECT Plan allows healthcare professionals to understand the patient's preferences and values as expressed in advance of a healthcare emergency.

2.3.2 Workforce

Using healthcare stories to share good and bad feedback with staff across the organisation demonstrates an open honest and transparent approach to improvement and this encourages other teams and individuals to adopt a similar approach in their improvement journeys.

2.3.3 Financial

No financial impact

2.3.4 Risk assessment/management

No identified risk

2.3.5 Equality and diversity, including health inequalities

An impact assessment is not required as the individual sharing the story has given consent and any impact on others will be individual.

2.3.6 Other impact

- **Best value**

Demonstrates the importance of listening to, and working with, patients to ensure the best possible patient experience for patients with a life limiting condition.

- **Safe, Caring & Respectful**

Ann's story fully complies with our corporate objectives and highlights the importance of applying them to every patient throughout their care journey.

2.3.7 Communication, involvement, engagement and consultation

This patient story will be shared across all Services to highlight this patient's positive experience.

2.3.8 Route to the meeting

This story has not been heard at any other meetings but has been shared with the service involved.

2.4 Recommendation

Members are asked to listen to Ann's story, note the advances made by the ReSPECT Team and take assurance on how this initiative is being progressed across the organisation.