

ReSPECT: COVID 19 Update

What you need to know

Over upcoming weeks we will be caring for increasing numbers of patients who are at risk of life threatening clinical deterioration

Why it's important

This is a worrying time for patients, relatives and clinical teams. It is important to recognise not all patients will benefit from, or want, increasing levels of treatment.

Agreeing a treatment escalation plan (TEP) in advance can:

- Reduce the distress caused by making difficult decisions at the time of life-threatening clinical deterioration
- Support patients and family to understand the realistic outcomes of treatment
- Support colleagues to deliver the right care at the right time; ensuring that we offer effective treatment consistent with a patient's goals

- 1) Discuss & develop a TEP, as early as possible, with patients who are at risk of life threatening clinical deterioration including those with:
 - All acute medical and surgical admissions
 - Incurable, life-limiting illnesses
 - Frailty and multi-morbidity
 - Conditions with life-threatening exacerbations
- 2) Recognise, clinical features associated with worse ITU & CPR outcomes:
 - An advanced progressive life limiting illness
 - Irreversible organ impairment requiring organ support, prior to acute illness
 - Multiple complex long-term conditions
 - Clinical Frailty Score* 5 or more (mild to severe frailty) prior to the acute illness (*CFS may not be accurate in long term, stable learning disability)
 - Irreversible functional decline prior to acute illness
 - Significant unplanned weight loss
- 3) Hold sensitive, realistic conversations with patients & relatives about their goals & the likely outcomes of interventions
 - If the healthcare team judge that a treatment is of no clinical benefit this should be explained to the patient & family
 - Avoid presenting this treatment as a choice to patients & relatives
 - If there is disagreement seek a second opinion
- 4) Document TEP using ReSPECT ensuring that it includes recommendations regarding:
 - CPR
 - Referral to ICU
- 5) **Inform** colleagues in handovers and huddles that the patient has ReSPECT.

See: COVID-19 rapid guideline: critical care NICE guideline [NG159] Published date: March 2020 Frailty links: https://rise.articulate.com/share/deb4rT02lvONbq4AfcMNRUudcd6QMts3#//
https://www.bgs.org.uk/sites/default/files/content/attachment/2018-07-05/rockwood_cfs.pdf
https://www.bgs.org.uk/resources/covid-19-geriatric-basics-for-non-specialists