

RED-MAP Guide to talking with people about Care Planning using ReSPECT

R E D steps build: ‘Shared understanding of my health and current condition’.

M explores: ‘What matters to me in decisions about my treatment and care in an emergency’.

A is actions that can work or help: ‘Recommendations for emergency care and treatment’.

P includes cardiopulmonary resuscitation (CPR) as part of wider care planning discussions.

 RED-MAP	
R eady	Can we talk about why thinking and planning ahead helps people get better care?
<p>Plan these conversations in advance so everyone is prepared, and the right people are involved.</p> <p><i>*We’d like to hear about what is important to you, and talk about what we can do to help you.</i></p> <p><i>*Can we make a time to talk about planning your treatment and care?</i></p> <p><i>*Should anyone close to you be involved? What is the best way for us to do that?</i></p> <p><i>*Do you have any kind of care plan or Power of Attorney already?</i></p> <p><i>*We can think about what (person’s name) would like to happen and what will be of help to them.</i></p> <p><i>*Talking about what is happening and thinking ahead is important in case people get less well.</i></p>	
E xpect	It would help to hear what you know about your health and think might happen.
<p><i>*Can I ask what you know about your health problems and how you are now? How have you been doing recently, and has anything changed? Is there anything you think we should know about?</i></p> <p><i>*Has anyone talked with you about planning ahead if you are less well or very ill?</i></p> <p><i>*You may have thoughts or ideas, questions or some worries we can discuss.</i></p> <p><i>*Have you thought about what the Coronavirus situation might mean for you (and your family)?</i></p>	
D iagnosis	There are things we know about your health, and things we are not sure about.
<p>Share information; tailored to people’s understanding and how they are feeling.</p> <p>Explain what we know in “short chunks with pauses” to check for people’s reactions or questions.</p> <p>Acknowledge and share uncertainty. Use clear language that supports shared decision-making.</p> <p><i>*You are less well than you were because... *It is possible he’ll not get better if...</i></p> <p><i>*We hope you will stay well/improve with..., but I am worried about...</i></p> <p><i>*We don’t know exactly what will happen or when, but we can plan for how to manage...</i></p>	
M atters	Can we plan care for you if you were to get very unwell and needed help urgently?
<p><i>*Can we talk about how you would like to be cared for, and any things you do not want to happen?</i></p> <p><i>*Can you tell us what you think (person’s name) would say in this situation, if we could ask him?</i></p> <p><i>* What matters more for you: comfort and quality of life or having any available tests/treatments?</i></p>	
A ctions	Let’s talk about what we can do to care for you, and things that may not help.
<p>Talk about realistic, available options for treatment, care and support for this person/family.</p> <p>Be honest and clear about what can help or will not work. Options depend on place of care.</p> <p><i>*Going to hospital has benefits and risks so can we talk about what that might mean for you?</i></p> <p><i>*I wish we were able to give you that treatment (or care). The options we do have are...</i></p> <p><i>*Can I ask if you know anything about cardio-pulmonary resuscitation or CPR?</i></p> <p><i>CPR is treatment to restart the heart/breathing. CPR does not work when a person is in very poor health or dying, so we plan good care. With these health problems, CPR may work but can leave a person in much poorer health. Any other treatments that can help are given.</i></p> <p><i>*We have treatments that help us manage any symptoms like breathlessness, pain or distress.</i></p>	
P lan	<p>Use ReSPECT and online systems to record and share care plans and DNACPR decisions.</p> <p><i>*We record and share plans we make for treatment and care so everyone knows about them.</i></p>