

Safety Guidance: Do Not Attempt Resuscitation (DNAR)/RESPECT forms

Due to the impact of COVID-19 in the wider community on particular groups of people, doctors are being encouraged to have conversations about resuscitation at an early stage with those who are likely to have a poor prognosis, should they become infected. On the most part the elderly and those with multiple underlying health conditions are having such discussions.

It is not clear how many prisoners this will apply to. However, it is essential that **ALL** staff are aware that these conversations are taking place, and that there is effective communication with colleagues when decisions not to be resuscitated have been taken by prisoners.

Whilst the principles are the same everywhere, the details of the approach adopted vary between different part of the country, with some areas using a ReSPECT form which includes discussions around treatment and DNAR decisions, and others using a Treatment Escalation Plan and Resuscitation Decision Tool.

Therefore, the prison should work with the healthcare provider to ensure that the guidance below is followed using the forms that have been adopted locally.

It is essential that DNAR/RESPECT forms are accessible and known about by all staff so that a prisoner's decision not to be resuscitated is followed. These forms are vital in ensuring appropriate care for people for whom resuscitation would be futile and distressing both for them and all staff involved.

Once completed forms should be stored in such a way that they can be made available in the event that a prisoner is transferred to hospital or elsewhere, therefore;

- **A copy of the form should be retained by the prisoner**
- **A sealed copy should be placed in the wing office, secure but accessible by all staff, and the presence of the forms must form part of daily handovers.**
- **Where there is 24 hour healthcare cover the original should be held along with other medical notes.**
However:
- **Where 24 hour healthcare cover is not available, the original should be sealed and held at the gate, to be handed to emergency medical staff in the event that the prisoner is transferred to hospital***

* The fact that a DNAR form has been completed does not mean the prisoner is not to receive active treatment (i.e. admission to hospital if unwell) but simply that in the event of their heart stopping no attempts to resuscitate should be made.

It is also necessary for the details of those who have completed such forms to be recorded in the control room, as staff will need to share this information when requesting an ambulance.