

Once for Wales and Digital

Mark Taubert



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Healthcare ethics and communication

'Do Not Attempt CPR': how the pandemic changed perceptions and practice

Mark Taubert, John Idris Baker, Anna Hudson, Elin Harding

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Health

Covid-19: Concern over 'do not resuscitate' decisions during pandemic

18 March 2021



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More can be done in Wales to improve do not resuscitate decision making processes

Published 23 May 2024

Today, a report has been published by Healthcare Inspectorate Wales (HIW) setting out the findings of a review of Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) decisions for adults in Wales.

Cardiopulmonary Resuscitation, commonly known as CPR, is an emergency lifesaving procedure, performed when a person's heart and lungs stop functioning. DNACPR decisions are an important part of end-of-life care, and during the course of our lives many of us will be involved in these discussions, either on a personal level or in relation to a loved one. It is important that these discussions, and the decisions made, happen in a sensitive and effective

Related

[All Wales Review of Do Not Attempt Cardiopulmonary Resuscitation \(DNACPR\)](#)



Ms Judith Paget

thematic reviews as well. So those are the three: the HRW report; the mortality review, thematic review; and the end of programme report.

Lady Hallett: I'm sorry to intervene, but – so you obviously got plenty of evidence that things aren't going right and you need to do something and you've had the recommendation Mr Mills has put to you that that you say has been accepted by the Welsh Government about an electronic repository which might avoid these things happening and make life a great deal better for the families of people upon whom these notices have been put and indeed for the patients themselves. But when Mr Mills asked you what's been done to create it, you said the Welsh Government's accepted it but then you used this expression "Work has begun to understand how that might be developed". That doesn't sound very specific to me. And what I'd like to know is, what do you mean by "Work has begun to understand how that might be developed"? What has happened, as opposed to having reviews, meetings, plans? I want to know what's actually happened to make a repository happen.

Ms Judith Paget: So, as far as I know, my Lady, it's our policy team, who are supporting all the work on DNACPR and related matters – is working alongside our digital team to work out how they can make that system happen, how it can link across NHS Wales, how it will link into existing data systems, so patient administration systems, et cetera, and how we can develop something that we can put in in a reliable basis.

What I don't know, my Lady, is where we are in terms of that progress to be able to report to the Inquiry today.

Lady Hallett: And we have no suggested timeline?

Ms Judith Paget: I don't. But if it would be helpful, I can determine that after the session today and drop a note to the committee in writing.

Lady Hallett: Thank you.



Health and Social Care Delivery Research

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Using the Recommended Summary Plan for Emergency Care and Treatment in Primary Care: a mixed methods study

*Anne-Marie Slowther, Jenny Harlock, Celia J Bernstein, Katie Bruce, Karin Eli,
Caroline J Huxley, Jacqui Lovell, Claire Mann, Angela Noufaily, Sophie Rees, Julia Walsh,
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on the form is how to ensure that these are valid and accessible when needed. There was general consensus that a digital version of the form was the preferred option to ensure accessibility but there is a risk that this could disempower patients who would have less access to or control over their plan than with a patient-held paper copy. Concerns about version control were also raised.

Key messages/recommendations

- Planning conversations need to be open and honest, person centred and realistic.
- There needs to be sufficient time to have the conversation(s).
- Good conversations require effective communication, including appropriate language and alternative formats to written documentation. Use of videos could be considered for recording conversations for people with learning disabilities.
- Digital records of plans can increase access to the plan when needed but people may feel less in control of their plan if it is in a digital format. Problems with version control need to be addressed.

"Sharing and involving online"- Outline Business Case for a national electronic Advance and Future Care Planning solution, accessible to care providers and patients

Posted on [July 14, 2022](#)



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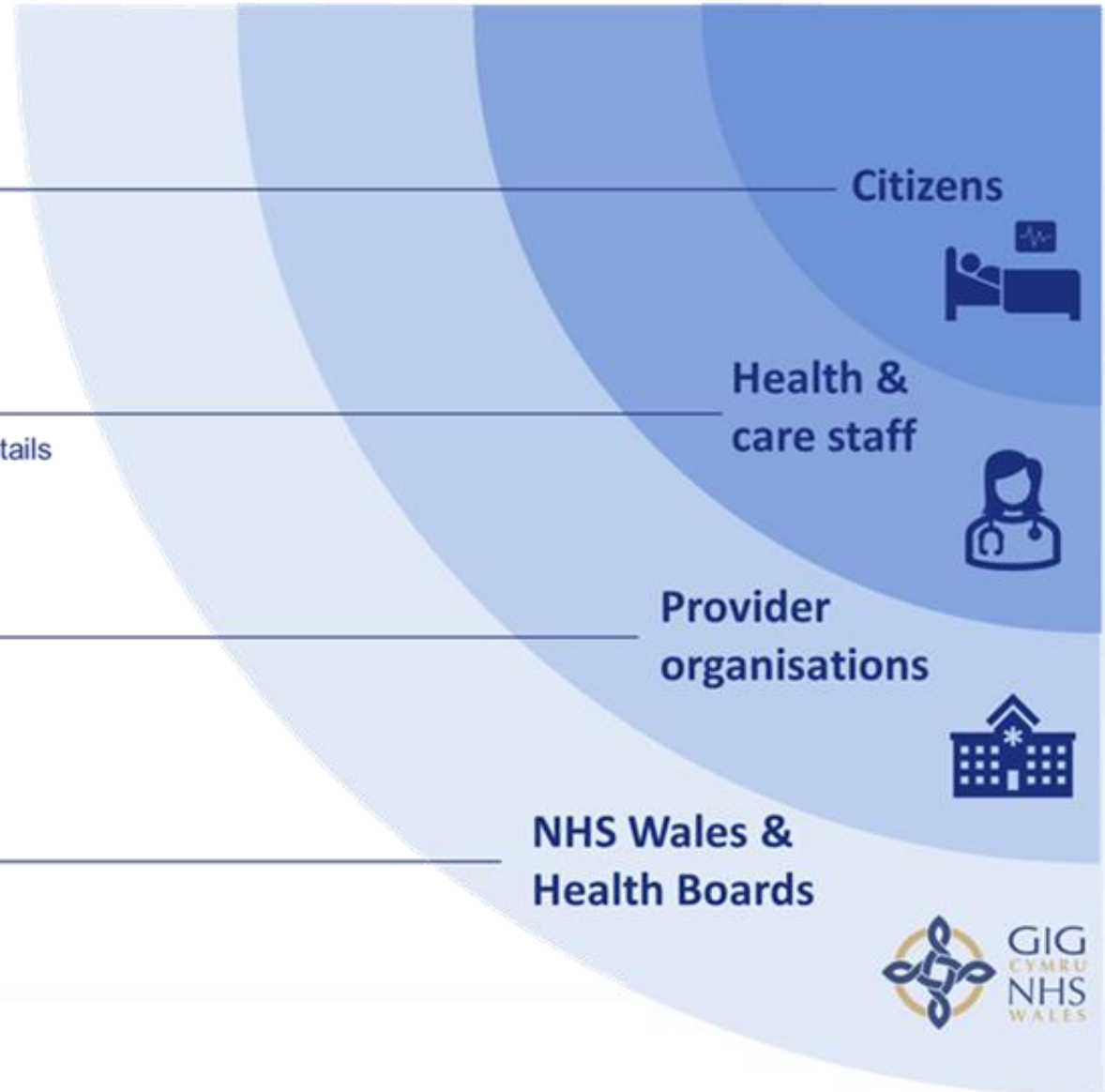
Steve Ham, Chair, National Programme Board, End of Life Care, [NHS Wales Executive](#), Gwaelod y Garth, Cardiff, UK

Mark Taubert, Chair of Advance & Future Care Planning Strategy Group, Cardiff, NHS Wales

The authors summarise the content of a recently completed Outline Business Case (OBC) to develop an electronic patient record for future care planning documents in Wales. This process involved comprehensive engagement across all health boards and trusts, patient representatives and the voluntary sector, technical reviews, and supplier market engagement activities. Through a series of virtual workshops and one-to-one interviews, over one hundred stakeholders were consulted as part of this detailed OBC engagement. An electronic patient record with Advance & Future Care preferences and decisions represents a value-based healthcare intervention with significant economic benefits.

Case for change

- ✓ Greater confidence their wishes known & followed
- ✓ Ability to review in their own time
- ✓ Ability to share with friends and family
- ✓ Easier to identify if a patient has a AFCP and access details
- ✓ Time saving as record available via end-user systems
- ✓ Consistent process & support
- ✓ Reduced clinical risk through version control
- ✓ Audit & outcome monitoring
- ✓ Integration across organisation
- ✓ Standardised, all-Wales solution
- ✓ Audit & outcome monitoring
- ✓ Enables cross-border integration








To-Be

- All-Wales approach
- Strategic any-to-any interoperability layer to allow access by all organisations
- Patient ownership of record and patient-facing digital solution
- Support for health and care professionals in having ACP discussions with patients
- Population health approaches to encourage uptake

Principles

- Individual at the centre of care planning, individually owned and led
 - Ability for care professionals to access data from a central location on demand
 - Interoperable and open-standards basis
 - Leveraging existing platforms (e.g. WCP, NDR, DSPP, Vision)
 - Patient identifiers - NHS Number and PDS
- 

Next Steps

- WCP FCP Flag and Uploader
- Distribute national resources, forms, policies
www.wales.nhs.uk/afcp
- EMIS
- Drive to using same systems across NHS Wales