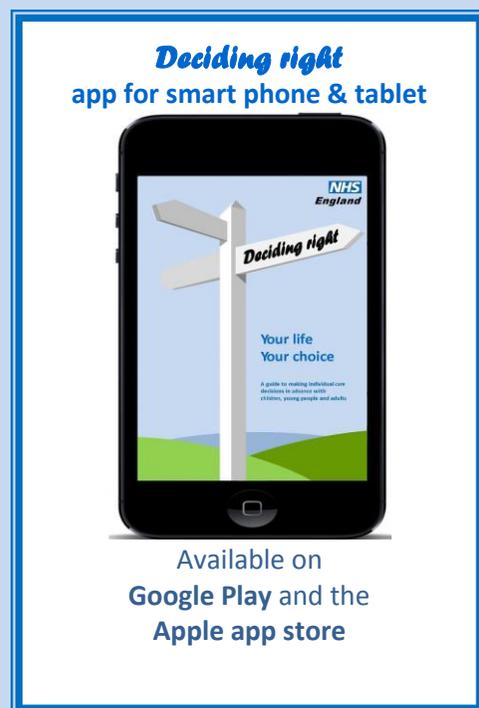


How can I "decide right"?

- If you would like more information go to www.nescn.nhs.uk/deciding-right
The website contains all the regional forms and many other resources including frequently asked questions for patients and professionals.
- An app for smartphones and tablets is available to help you understand the process of making the right decisions.
- If you need more information you are welcome to contact the implementation team c/o claudregnard@stoswaldsuk.org



Deciding right

If you would like more
information see

www.nescn.nhs.uk/deciding-right



Deciding right

Your life Your choice

A guide to making care decisions
in advance with children, young
people and adults

Ralph's story

Ralph had been ill for some time. He had made it clear that he did not wish to be readmitted to hospital or receive cardiopulmonary resuscitation (CPR).

However, when he became breathless and collapsed, his care home staff called an ambulance. Because Ralph's wishes were not written down in a suitable format, the paramedics had no choice but to start CPR and admit him to hospital. He died soon after arriving.



Deciding right

- Individuals have the right to make decisions in advance about their care and for that to happen as a shared partnership with health and social care professionals.
- Individuals who lack capacity to make specific decisions have the right to have decisions made in their best interests in the way required by the Mental Capacity Act.
- Health and social care professionals have a duty to follow national legislation and guidance. They also need clear instructions about what the individual wants to happen.

Deciding right empowers the individual and the professional to make the right decisions

Two key frameworks

- 2005 Mental Capacity Act (MCA)
- 2013 BMA/RC/RCN joint statement on cardiopulmonary resuscitation decisions

Deciding right enables professionals and organisations to be compliant with these legal and clinical frameworks. It does this by

- Centering care decisions on the individual rather than the organisation
- Strongly endorsing the partnership between the patient, carer or parent and the health or social care professional
- Ensuring that decisions made for people who lack capacity follow the requirements of the MCA
- Providing the same decision documentation (DNACPR and ADRT) for use in all settings
- Introducing Emergency Healthcare Plans (EHCP) to tailor care to the individual
- Ensuring that choices about treatment are agreed and honoured
- Create principles and documentation suitable for all ages



Two key conversations

Shared decision making

This is a partnership between two experts. Clinicians are the experts about treatment options but it is the individual who is the expert about his or her own circumstances. Shared decision making enables both to understand the issues and make the decision that is best for the individual.

Mental Capacity Act (MCA)

Capacity

The decision of an individual with capacity is should always take priority. For an individual who lacks capacity the MCA requires any decision to be made in their best interests by taking all issues into account and making the decision the individual would have made.

Deprivation of Liberty Safeguards (DoLS)

This exists to protect individuals who lack capacity to ensure they receiving the least restrictive care.