

THINK...... When calling for assistance

What can the hospital do that the care home can't?

YES Do you REALLY need to call 999? NO / NOT SURE



Is there a valid uDNACPR (lilac form) in place or valid ADRT for CPR?

YFS



Is your resident for active treatment?

(Check if there is a valid ADRT in place)

NO 🔀

CALL 999 if you believe this to be an Emergency Situation

Commence CPR if NOT Breathing and NO uDNACPR

(As per your organisations resuscitation guidance)



Is there a change in your residents condition you are concerned about?





Call GP / 111 / OOH service for advice and give these details



Call GP / 111 / OOH service to request advice or to visit



YES

Include the details below when making the request for assistance

- Your name and location, include postcode
- Residents personal details
- Diagnosis
- Explain symptoms and change in condition
- If your resident is on the Supportive Care Register or GSF-

Months to Live – Advanced disease

Weeks to live - Unstable and deteriorating

Days to live - Terminal care

- Advance Care Plan and / or valid ADRT in Place
- Anticipatory drugs in place
- If resident is on the Integrated Care Pathway for the dying
- What do you need from the service you are calling?



Support Resident

Give anticipatory drugs if prescribed

Complete admission form if needed

Advise Next Of Kin

Advise GP and other HCP's of admission or condition change

Discuss with resident their future wishes for care / ACP if not completed previously



This is for guidance only; if in doubt use your own professional judgement when referring for assistance

Glossary

ADRT – Advance Decision to Refuse Treatment UDNACPR – unified Do Not Attempt CPR CPR – Cardio Pulmonary Resuscitation OOH - Out of Hours ACP - Advance Care Plan

HCP - Health Care Professional
GSF – Gold Standards Framework