

DNACPR/allow a natural death form Escalation protocol for nurses/healthcare professionals

Issue	Immediate action	Secondary action
Wrong DNACPR form in wrong notes	<ul style="list-style-type: none"> • Inform Nurse in charge (NIC) / Consultant • Confirm patient and decision before relocating correctly 	Raise DATIX report
Patient not clearly identified (name, DOB and hospital number OR NHS number)	<ul style="list-style-type: none"> • Inform NIC / Consultant • Confirm patient and decision before completing data 	Raise DATIX report
Red bordered DNACPR form photocopied inappropriately or only grey copy available and being considered 'ACTIVE' in front of health record	<ul style="list-style-type: none"> • Inform NIC • Inform Consultant • Status defaults to 'FOR RESUSCITATION' 	Raise DATIX report New form to be completed and filed correctly
DNACPR form filed incorrectly (not in front of health records)	<ul style="list-style-type: none"> • Correctly file the card at front of patients health records 	Not applicable
Patient lacks capacity with no involvement from an appointed power of attorney, no advance decision by patient, no next of kin nor IMCA on completion of form (boxes 1,3 & 4)	<ul style="list-style-type: none"> • Inform NIC / Consultant • Ensure referral to IMCA service and referral recorded in the health records 	Ensure and record response from referral within one working day (if no response raise DATIX)
Inadequate reason for decisions based on guidance notes for completion (box 2)	<ul style="list-style-type: none"> • Inform NIC • Inform Consultant 	Consultant/team to modify/expand on reason within 24 hours
<u>Patient with mental capacity</u> No summary of discussion with patient (box 3)	<ul style="list-style-type: none"> • Check patient records for any record • Inform NIC • Inform Consultant/team 	Consultant/team to hold discussion or clearly document why this has not be held
<u>Patient without mental capacity</u> No summary of discussion with attorney if appointed or relative with no reason given for omitting to discuss (boxes 3 & 4)	<ul style="list-style-type: none"> • Inform NIC • Inform Consultant/team 	Consultant/team to hold discussion or clearly document why this has not be held
Review date expired No review date, no review criteria and 'indefinite' <u>NOT</u> stated Not signed by Consultant (box 5)	<ul style="list-style-type: none"> • Status defaults to 'FOR RESUSCITATION' • Inform NIC/Consultant 	Decision reviewed and documented Raise DATIX report
<u>Emergency decision</u> NOT signed by FY2 + NOT authorised and signed by Consultant within 96 hours (expired) (box 6)	<ul style="list-style-type: none"> • Status defaults to 'FOR RESUSCITATION' • Inform NIC/Consultant 	Raise DATIX report
Information on the nursing handover sheet in contradiction to information in health records/DNACPR form	<ul style="list-style-type: none"> • Immediate review of information and correction • Status defaults to 'FOR RESUSCITATION' if not corrected 	Raise Datix report if not able to be corrected

DNACPR/allow a natural death form Escalation protocol guidance notes

Red flags/boxes require **immediate corrective action** as they present a risk to patient safety. The immediate action is described in the red box in the middle column with secondary action in the white box in the right hand column.

Once you have taken the immediate action and you must:

- Email the Matron for the area (stating nature of issue)
- Email the Resuscitation Services Manager (for information)
- Complete a DATIX. The potential level of harm from a red flag/box could be **CATASTROPHIC** so you will take immediate action to make the patient safe and so this harm will have been avoided (so this should be a **NEAR MISS** due to your action).

Ensure that the correct DNACPR form is in the correct patient's health records and that is the red bordered copy.

If there is a specific 'Review Date' or a specific time period (emergency decision) that has passed the card is **invalid** and the patient is **'FOR RESUSCITATION'** until the patient's status is reviewed by their Consultant / Team and the outcome documented (update form/cancelled form and decision)

If there is **NO** category (review date/review criteria or indefinite) the patient is **'FOR RESUSCITATION'** until the patient is reviewed by the patient's Consultant / Team and the form amended. An emergency decision can be made and form completed as a temporary solution.

All efforts should be made take corrective action. In the event that a red flag can not be immediately corrected you must inform the Nurse in Charge, Matron for the area and the Resuscitation Services Manager (in hours) and Clinical Site Manager (out of hours). The patient will default to a **'FOR RESUSCITATION'** status until the issue is addressed

Amber boxes require **immediate corrective action** as they represent a deviation from best practice and/or policy rather than an immediate risk to the patient. The immediate action is described in the amber box in the middle column with secondary action in the white box in the right hand column.

Once you have taken the immediate action you must:

- Inform the nurse in charge:
- Email the Resuscitation Services Manager (for information)

All efforts should be made take corrective action. In the event that an amber flag can not be immediately corrected you must inform the Nurse in Charge, Matron for the area and the Resuscitation Services Manager (in hours) and Clinical Site Manager (out of hours). All efforts should be made to contact the Consultant / Team so the issue is addressed or a plan to do this made.