Did services support people to make decisions about re-starting their heart if they got very ill?

How we will look into this

December 2020

Easy read version of ‘Review of Do Not Attempt Cardiopulmonary Resuscitation decisions during the COVID-19 pandemic: methodology’
About this booklet

We are the Care Quality Commission. We check services like hospitals and care homes to make sure they give good care to people.

We were asked by the government to look into how well services supported people to make decisions about re-starting their heart if they were to get very ill (called DNACPR).

We were asked to look at this year (2020), when a lot of people got ill with a new disease called coronavirus.
The local services we will look at include hospitals, community nurses, ambulances, GP surgeries and care homes.

We will look into:

- whether these DNACPR decisions supported the needs of people and protected their human rights

- what helps and stops services agreeing the best way to make good DNACPR decisions

- whether services work together and are able to make the best decisions
• how well staff and people are helped to talk about any worries they have about DNACPR.

We will write two reports. The first was published in December 2020 and you can read it on our website.

The second report will be published in early 2021. It will include actions that we think need to happen to make DNACPRs better.

This rest of this easy read talks about the different ways we will look into this issue.
Looking at other reports, guidance and information

We will look at what is already known about the use of DNACPR before and since coronavirus.

This includes understanding what is the best way to care for someone who becomes very ill or gets near to the end of their life.

Talking to experts

We have already talked with 47 experts about DNACPR.
These included people from organisations that speak up for the public, family carers and care staff.

Sending out surveys

We are sending out a survey to 25,000 adult social care services (including care homes and homecare) that asks them questions about:

- the number of DNACPR decisions made this year that may have been wrong
• what made them wrong

• if they are still in people’s care plans and records.

We are also sending out a survey to people who use services and their families and carers to ask about their experiences of DNACPR this year.

We will help people who may need help to fill out the survey.
Looking closely at services

We will look closely at 7 areas in England to see how services are working together on DNACPRs.

The areas are different, so we think they should show what care is like across all of England. For example, some will have lots of towns and cities and others less so.

In this work, we will:

- Look at a few people's actual experience of care, by speaking with the person and the different health and care staff who looked after them
• Look at more people’s care plans and records. This should help us build up a good idea of how people have been affected by DNACPRs across England.

• Speak with people in charge of health and care in an area, local groups that speak up for people, and health and care staff.
Find out more

Find out about our work on our website at:

www.cqc.org.uk

Please tell us about your experiences of DNACPRs in 2020, by filling out our survey before 6 January 2021. Click on this link:


If you want to give feedback on your care at any time – it can be good or bad – fill out our form at: www.cqc.org.uk/givefeedback

Or you can call us on:

03000 61 61 61