

## Covid 19 URGENT CPR ADVICE

**Updated 31<sup>st</sup> March 2020 to include - Joint statement on advance care planning**

Where a service user suffers respiratory or cardiac arrest we must continue to take all emergency resuscitation measures where the individuals does not have a DNR in place.

If resuscitation is required YOU MUST NOT administer mouth to mouth resuscitation even with a protective mask.

If staff are trained in Intermediate Life Support (ILS) they can use ambu bag for manual resuscitation but should wear PPE.

In an emergency continue to dial 999.

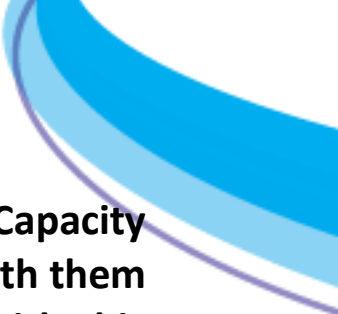
### Actions Required:

- Please ensure all DNA / advance directives are up to date for service users and that staff are aware where these are in place should they need to seek medical advice in an emergency.
- Please ensure all staff are aware of the instruction regarding mouth to mouth resuscitation

### [Joint statement on advance care planning](#)

The importance of having a personalised care plan in place, especially for older people, people who are frail or have other serious conditions has never been more important than it is now during the Covid 19 Pandemic.

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**Where a person has capacity, as defined by the Mental Capacity Act, this advance care plan should always be discussed with them directly. Where a person lacks the capacity to engage with this process then it is reasonable to produce such a plan following best interest guidelines with the involvement of family members or other appropriate individuals.**

**Such advance care plans may result in the consideration and completion of a Do Not Attempt Resuscitation (DNAR) or ReSPECT form. It remains essential that these decisions are made on an individual basis. The General Practitioner continues to have a central role in the consideration, completion and signing of DNAR forms for people in community settings.**

**It is unacceptable for advance care plans, with or without DNAR form completion to be applied to groups of people of any description. These decisions must continue to be made on an individual basis according to need.**

**This is a joint statement from the following organisations:**

**British Medical Association (BMA)**

**Care Provider Alliance (CPA)**

**Care Quality Commission (CQC)**

**Royal College of General Practice (RCGP)**

**Dated 30<sup>th</sup> March**

