

Can the TEP be changed?

Yes. The TEP is used as a guide to treatment and will be reviewed if either your condition changes and/or your senior doctor changes. Please let a doctor or nurse know if you have any concerns about your TEP.

How long does the TEP last for?

The TEP only applies to your current stay in hospital. Should you be discharged from hospital and readmitted in the future, your condition will be reviewed with you and a new TEP completed.

Contact telephone numbers

Resuscitation Practitioners

Monday to Friday, 8pm - 5pm

☎ 01438 285115

Critical Care Outreach Matron

☎ 01438 286437

Recommended further information

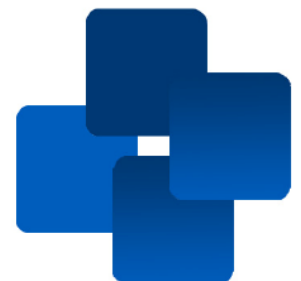
<https://www.gov.uk/make-decisions-for-someone>

<https://www.gov.uk/power-of-attorney>

Patient Information

Treatment Escalation Planning (TEP)

Resuscitation Service



What is a Treatment Escalation Plan (TEP)?

A Treatment Escalation Plan (TEP) provides the opportunity for you and the doctors and nurses caring for you, to discuss and come to an agreement on your overall plan of care. The TEP details the treatment options you may or may not benefit from should your health condition deteriorate (get worse).

The TEP includes a range of treatments to be considered, such as:

- Blood transfusion
- Supported breathing
- Kidney dialysis
- Drug administration
- Feeding through a tube inserted into the stomach
- Cardio-pulmonary resuscitation (CPR)

Who decides what treatment options are available?

The most senior doctor responsible for your care will have the overall responsibility for deciding what treatment options are available in the event that your health condition worsens.

It may be that there are treatments that will clearly not improve your condition; these should be sensitively explained to you. There might be treatments that may or may not improve your condition, but could potentially impact your longer term quality of life.

Your views and wishes are essential when deciding on these treatment options. If you are unsure or need more information, please ask the nurse or doctor.

After the discussion, the doctor will complete the TEP form and it will be placed in your medical notes so that any member of the team involved in your care can easily access your TEP at any time.

Where can I find more information on decisions relating to cardio-pulmonary resuscitation (CPR)?

These can be discussed with your doctor and/or you can be provided with an information leaflet explaining these decisions in more detail. Please feel free to ask a member of staff.

Can my family/carers/friend be involved in discussions about the TEP?

Yes, your family, carer or advocate (e.g. a friend) can be involved with your permission.

What happens if I am not well enough to discuss my treatment options?

If nursing or medical staff think that you do not have the ability to make decisions about your care, they will carefully assess your capacity. This assessment is based on the requirements of the Mental Capacity Act 2005.

If you do not have the ability to be involved and you have given us an 'Advanced Directive' document or previously discussed your TEP during this hospital stay, we can use these to guide us as to your wishes. Unless you have told us that you do not want your family, carer or advocate involved in your TEP, we will involve them in these discussions.

Your family, carer or advocate will not be able to decide on treatment options unless they can present a registered 'lasting power of attorney for health and welfare' document, but they can assist us by providing information about you and your likely wishes. These will be used to support the doctors caring for you in making a decision in your best interests.

If your ability to make decisions improves, your TEP will be discussed with you to ensure your views and wishes are understood and you understand your plan.