What about staff and visitors?

Staff and visitors who suffer a cardiopulmonary arrest in the Hospice will be given basic life support, a defibrillator will be used if necessary and an emergency ambulance will be called to take them to an Accident and Emergency Department, in the same way as people who collapse in the community.

If you wish to discuss this further please speak to a member of the medical or nursing team or contact Peter Ellis - Nursing Director, on 01892 820507 or peter.ellis@hospiceintheweald.org.uk

Hospice in the Weald provides compassionate, individualised, holistic and supportive care to patients with a terminal illness, their families and carers in West Kent and North East Sussex.

Our Hospice care, in people’s home or at the Hospice itself, provides comfort from emotional and physical pain and emphasises quality of life as well as dignity in death.

Our services are free of charge to patients, their families and carers. The services are provided on the basis of need rather than ability to pay. We are not part of the NHS. We rely heavily on those from and in our community who give their money and time to help reach the £7 million we need to raise every year to provide our vital services.
What is CPR?

Cardiopulmonary resuscitation (known as CPR) is the attempt to restart the heart and/or breathing after someone has collapsed. It involves chest compressions and rescue breaths to try to get the heart and lungs working. This is known as basic life support and patients then need to be transferred to the Accident and Emergency department in the local hospital for further management.

You may well have seen CPR on television for example on Casualty; sadly these programmes are not always like real life and CPR can be an invasive and potentially unpleasant procedure.

When is CPR useful?

Resuscitation is most likely to be successful when someone seemingly and usually fit and well suddenly collapses or if it happens in a hospital intensive care unit or a casualty department. If someone has advanced age or illness it is much less likely to be successful.

CPR in Palliative care

The majority of Hospice patients have advanced disease and when their heart stops this is part of the natural progression of their disease. CPR is very unlikely to be successful in these circumstances and patients and their healthcare professionals may make the decision not to attempt CPR and to allow a natural death.

What about patients for whom attempting CPR may be beneficial?

For a small number of patients CPR may offer some benefit and the Hospice offers the same level of facilities as are found in the community. Our staff are trained in basic life support and use of a defibrillator which monitors heart rhythm and provides an electric shock to the heart when appropriate. Transfer to hospital would normally be necessary.

Are there problems with CPR?

After successful CPR the patient’s condition may not always be before. Patients may be left with a degree of brain damage, fractured ribs, or even some bleeding around the heart.

Discussions

It is very important to us that we look after you in the way that you want at all times. In order to do this fully, one of the staff in the Hospice may ask you about CPR and what your wishes would be should your heart stop suddenly.

This does not mean that they think this is likely to happen they just want to record your wishes. You are free to refuse CPR for the future at any time although it is best to do this in the context of an Advance Decision to Refuse Treatment. Your doctor will always talk to you about your best interests and this includes CPR. Those patients for whom CPR is not felt to be appropriate or who have refused it, can have a patient-held document detailing the decision to keep at home.

What happens if it is decided that CPR won’t be attempted?

The doctors and nursing staff will continue to give you the best possible care. They will also make sure that you and those you wish to be involved in the decision know and understand why the decision was made.