

Further to my last e-mail I am writing to update you as to the issue of end of life care during the COVID-19 response.

We have spoken with the practice concerned and reviewed the letter in detail. We believe that the letter was intended as preparation in advance of arranging individual virtual video conference meetings and not intended as a blanket approach. However, we fully appreciate that it may have appeared frightening and extremely concerning for people who received the letter.

I would like to assure you that colleagues across the health and care system in Somerset have drawn up plans for end of life care during the COVID-19 response that are ethically sound and completely non-discriminatory.

We have now written to all our GP practices reminding them of the importance of careful and sensitive wording when writing to patients about advance care planning.

Our GP practices have been reminded of the joint statement published by the British Medical Association, the Royal College of General Practitioners and others on 01 April 2020 and asked to make sure any communications to patients or carers reflect this. The statement highlights:

*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.*

*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.*

We sadly acknowledge that the coronavirus pandemic means that some people may die sooner, and it may mean that family can't visit their loved ones to say goodbye. Having a plan in place for the end of life can make it easier for those who are dying and their families during a difficult time.

We would like to reassure you and the people you support that we are committed to ensuring that whenever we are involved in these sensitive discussions they happen on an individual basis and involve families and carers wherever appropriate. Every conversation should be personal with the patient and their clinicians to ensure we jointly make the best possible decisions around end of life care in Somerset.