# Asking you!

# About the Care and Treatment Review Policy





#### What is this about?

Care and Treatment Reviews are for children, young people and adults with learning disabilities and/or autism who are in learning disability and mental health hospitals, and for people at risk of going into one.

The Care and Treatment Policy came out in October 2015. It is part of NHS England's work on Transforming Care for people with learning disabilities and/or autism and their families.

We are asking people what they think about the Care and Treatment Review (CTR) policy. This is because we need to update the policy from time to time, so it carries on working well. We will publish an updated policy by November 2016.

#### The closing date for feedback is Monday 19th September 2016.

#### Why are we doing this?



Feedback from CTRs shows they lead to good outcomes for people and their families when the policy is followed. They make sure that people only go into learning disability and mental health hospitals when there is no other choice. They check that people feel safe and help to improve care and planning, both in the community and in hospital. They check everything is in place for people to leave hospital as soon as they can. CTRs support people to have a real say over their care and plans for the future. This leads to real change in people's lives.

But a CTR which does not follow policy often leads to fewer improvements than one that does.



We want the CTR policy to be clear and make sure CTRs are always carried out well, so they lead to real and lasting change for every person who has one.

We are asking individuals, groups and organisations we work with to comment on this document. Please feel free to invite us to events/meetings before the closing date and we will make every effort to come along.



You can email completed forms or comments before 19 September 2016 to this address: england.ctrpolicyrefresh@nhs.net



Or send by post to:

Steve Mbara, NHS England, Room 4W23, Quarry House, Leeds LS2 7UE



Thank you for your help

Anne Webster

CTR Policy Refresh steering group NHS England

1 August 2016

# Care and Treatment Review Policy

### Feedback Form



The questions ask about four areas of CTRs:

- 1. Care and Treatment Review overall policy
- 2. What should happen before the review day?
- 3. What should happen on the review day?
- 4. What should happen after a review?

It's OK if you can only answer some of the questions. There is also space at the end for you to add any other comments.

#### It will help us to know who you are. You can tick more than one box if needed:

Person or adult with a learning disability	
Family carer	
CTR Expert by Experience	
CTR Clinical Expert	
More than one person filling it in	How many?
Commissioner	
Social care worker	Job title:
Social care provider	
Health worker	Job title:
Health care provider	
Other	Job title:

# **1. Care and Treatment Review overall policy**

	Which part of the policy?	Please answer the questions in this column. It's OK if you can't answer everything.
	People who have autism and no learning disability	<ol> <li>Do you think people with autism and no learning disability need information written in a different way?</li> <li>Yes  No  Don't know  </li> </ol>
Policy	The CTR policy is for people with learning disabilities and/or autism, as it is part of the Transforming Care Programme.	If yes, in what way different? Is it clear enough that a person with autism and no learning disability can benefit from a CTR?
easy react	We have written easy read information for people with learning disabilities and/or autism and their families.	Yes No Don't know Should there be more information about when a CTR can be offered to a person with autism and no learning disability? Yes No Don't know How should the information be written?

	Do we need different kinds of expert advisers for this kind of CTR?
	Yes 🗌 No 🔲 Don't know 🗔
	If yes, who?
One day for a CTR The policy says that CTRs should take most of a day. This is so there is enough time to get to know the person and find out how they feel about their care. And have time to speak separately to families and professionals	2. Is a day the right amount of time? Yes No Don't know
The CTR challenges what care is being given The CTR is independent of other reviews and meetings. This is so it can challenge what is happening	3. Is it right to hold a Care and Treatment Review on a different day from other care meetings eg. Care Programme Approach (CPA) meetings? Yes No Don't know III If yes, is there anything which would make it easier for people to take part?

	with the person's care. The CTR says what more needs to happen eg. in CPA and planning meetings and day-to-day care.	If no, when would you hold it and how would you make sure that it was independent and challenging?
Septembe Decent in the second	The policy says CTRs should be carried out every 6 months while a person is in hospital.	<ul> <li>4. How often do you think they should happen?</li> <li>Every 6 months  Once a year  Don't know Other  If so, when?</li> <li>Should they be more or less often for different groups of people eg. children and adults, or people in secure hospitals?</li> <li>Yes  No  Don't know  If so, why?</li> </ul>
	Following up on CTR actions A CTR leads to actions or things that need to be done to improve the person's care.	<ul> <li>5. Should the policy say what follow up is needed to make sure that actions are carried out?</li> <li>Yes No Don't know If you said yes, what and who could help to make sure that this happens?</li></ul>

Contraction of the second seco	The CTR panel needs to be sure about what it is told	6. Should the CTR panel ask to see proof of what they are told eg. care plans, risk assessments, health action plan, medicine prescription chart, person-centred working? Yes I No I Don't know I
	The CTR panel is the group of people who carry out the CTR: - The commissioner who pays for the person's care - An expert by experience (person with a learning disability, autism or family carer) and - A clinical expert (health or social care)	What other things does the team need proof of? Can you give an example of when this happened or didn't happen? Did it affect how the CTR was carried out? If yes, how?
	Making sure CTRs are carried out well – Governance and Quality Assurance	7. How can you measure and record the success of a CTR?

	The policy says that the commissioner who pays for the person's care is in charge of carrying out CTRs.	8. What helps to ensure a CTR is carried out well? Who should be able to help make sure a CTR is carried out well?
	Other people help with some of the work eg. getting the person's consent to take part and if they would like family carers to take part. Concerns can be raised if a CTR is not carried out well.	What should happen if a CTR is not carried out well and who should do it?
1 2 3	At Risk of Admission Register The CCG keeps a list of people at risk of going into hospital to try and help people stay out of hospital.	<ul> <li>9. Do people at risk and their families know about this register or list?</li> <li>Yes No Don't know</li> <li>Is the register used to help with housing needs and other plans?</li> <li>Yes No Don't know</li> <li>Some people find the name confusing and negative. What would be a better name? Community CTR register? Yes No</li> <li>CTR Crisis Care Register?</li> </ul>

FUTURE	It helps CCGs know who needs a CTR. This helps community services plan ahead so that more people get the support they need in a crisis without going into hospital.	Can you think of a better name, or anything else that will support people to use it? Would it be useful to have an easy read consent form for the register? Yes No Got one already Don't know How can the CTR policy help local areas more with the register? Can you give an example of the register working well in your area?
Hospital Community	<b>Providers</b> This includes community and hospital service providers	10. Should the CTR policy say more about the role of providers? If so, what should it include and what else would be helpful?

	The findings from CTRs should join up with other reviews and care planning	11. How can CTRs join up better with other reviews or planning?
	For example, day- to-day care and discharge planning, CPA meetings and Mental Health Tribunals, Looked After Children reviews	Can you give an example of when joined up planning has worked well?
	Making the policy work for children and young people	12. Should the policy cover other things for children and young people? Yes No Don't know I If yes, what?
1		If yes, should this be in all the document or would it be better to have a separate section about CTRs for children and young people?
		Throughout the document
		Separate section
		Don't mind

		Do you have any other ideas about how we can make the CTR policy work well for children and young people?
	Blue light protocol or community CTR?	13. Do people understand the difference between these different reviews? Yes No Don't know Have vou experienced blue light protocol meetings and/or
	'Blue light protocol' is when a crisis happens and there	Have you experienced blue light protocol meetings and/or community CTRs? Yes I No I Don't know I
Community	is no time to hold a Community CTR.	CTR feedback shows that community CTRs are better at stopping people from going into hospital than blue light meetings.
	A community CTR is a planned CTR which happens when a person's needs are increasing and they are at risk of going into hospital.	What will help more people have a community CTR in good time, rather than a blue light meeting in a crisis?

# 2. Before the Review Day

	Which part of the policy?	Please answer the questions in this column. It's OK if you can't answer everything.
	CTR Consent	<ul> <li>14. Consent is when people say if they are happy to have a CTR and if they want family carers to be invited.</li> <li>Would it be useful to have an easy read consent form?</li> <li>Yes <ul> <li>No</li> <li>Got one already</li> <li>Don't know</li> </ul> </li> </ul>
Planning 1 6 6 2 7 7 3 8 8 4 9 9 5 10 7	Getting ready for the CTR	<ul> <li>15. Do/did you get everything you need to take part?</li> <li>Yes No Don't know Do/did you get everything you needed in plenty of time?</li> <li>Yes No Don't know Don't know Don't know Do you have any ideas for making the planning better or easier?</li> </ul>
	CTR web pages www.england.nhs.uk/ctr The CTR documents are on the NHS England	16. Is it easy to find all the CTR documents you need? Yes □ No □ Don't know □

	website	Are the documents you need easy to use or understand?
	There is a page with all the documents commissioners need.	Yes No Don't know What would make them easier to understand or use?
CTRs	And a page with easy read	Would it help if documents were grouped together into booklets or do you prefer separate documents?
	documents.	Yes, booklets I No, documents I Don't know I
		Do local Transforming Care Partnerships need any CTR documents too? Eg. a standard template for recording CTR information? Yes No Don't know Anything else?
	Getting the right experts for a panel	17. Are there any problems finding the right experts for a CTR? If so, what? What would help?

		Is it better to choose different panel experts depending on the person's needs or to have the same experts who can build on their experience? Different experts depending on need? Yes $\Box$ No $\Box$ The same experts? Yes $\Box$ No $\Box$
Application Form Asme Address Education Tetraction	The right experts	18. What happens locally to make sure the right clinical experts and experts by experience are found? Any other suggestions?
CTR CTR	Repeat CTRs The policy says people should have a CTR every 6 months while in hospital. People can request one at other	<ul> <li>19. If someone needs another CTR, should the same experts carry out further reviews for that person, or should it be new experts?</li> <li>Different experts? Yes No</li> <li>The same experts? Yes No</li> <li>Why?</li> </ul>
	times too.	

# 3. On the Review Day

Which part of the policy?	Please answer the questions in this column. It's OK if you can't answer everything.
The Panel Chair The policy says that the commissioner should chair the CTR.	20. Should the commissioner always chair the CTR? Yes No Don't know Why?
	Should the commissioner always attend a CTR, if not as the chair? Yes $\Box$ No $\Box$ Don't know $\Box$ If no, when should the chair be someone else and who should it be?
	Would it help to produce a job description & specification for the role of chair? Yes No Don't know I If yes, what are the most important skills or experience for the job?

	Welcome meeting at the start	21. The welcome meeting brings people together at the start of the day, to hear about the person and their care, and agree how the day will run. Can you think of how to make it better?
	Meeting people It is important to meet people separately too, so that people feel happy to say what they think. You can't always do this in a big meeting.	22. Should the policy give the panel more advice about meetings? Yes No Don't know I If yes, what should that advice be?
1       6       1         2       7       1         3       8       1         4       9       5         5       10       10	Template for the review The template is the document where the CTR findings are recorded. The chair of the panel fills it in. The report is based on this.	23. What would be the easiest and most useful format for the templates? <i>If you have made improvements to your template, please send us a copy.</i> Is the RAG rating method OK (Red Amber Green)? Yes No Don't know I Is there any other way the template can help in the CTR process?

		For example, should the template make it easier to flag up areas of concern about the person's care or the provider? How? Would you add or remove anything from the template?
Mental Health Act	Use of Mental Health Act People in secure services can be subject to restriction orders under the Mental Health Act.	<ul> <li>24. If someone is in secure care, should the policy offer more advice about leaving hospital?</li> <li>Yes □ No □ Don't know □</li> <li>If yes, what should it say?</li> </ul>
	Advocates in CTRs	25. Should the policy include the role of advocates in the CTR process? Yes No Don't know I If yes, what should it say?

		Has advocacy been used in CTRs for children and young people? Yes No Don't know I If yes, how was this done and did it help?
Goals	Being positive about risk How can the CTR policy support a positive approach to risk?	26. How can the policy support people to reach their goals and be as independent as possible when they leave hospital, and still be safe?
easy read	Panel experts - information and sign-posting	27. Should the experts be given more tools and information to help people? For example, easy read leaving hospital planners, information on people's rights, where to go for peer support? Please add any ideas on this.

### 4. After the review day

	Which part of the policy?	Please answer the questions in this column. It's OK if you can't answer everything.
Report	Writing and sharing of report The policy says the report must be shared with everyone who took	28. Should the policy give more advice about how to write the report? Yes No Don't know What should that be?
	part in the review. The report says what needs to happen by when and by who.	How can you make sure that everyone who took part gets a copy?
	It needs to be followed up to make sure the actions are happening.	Does it need to be clearer who will do what by when, and whose job it is? Yes No Don't know C Can you give an example if this is happening already?
		Should experts be told about the outcomes of CTRs afterwards? Yes No Don't know How? Can you give an example if this happens already?

	Raising concerns Any concerns from a CTR should be	29. Should the policy be clearer about who can raise concerns and how? Yes I No I Don't know I
	followed up appropriately eg:	Is it clear who is responsible for handling all concerns? Yes 🔲 No 🗌 Don't know 🗌
	<ul> <li>Safeguarding</li> <li>Quality of CTR</li> <li>Quality of care</li> </ul>	Should this person make sure concerns are resolved and people are told about the outcomes?
	Anyone can raise a concern	Yes I No Don't know I I If the concern is about the quality of the CTR, where should the complaint be made and what should happen next?

# 5. Any other comments?

