



Care and Treatment Reviews

Guidance to help you on the day

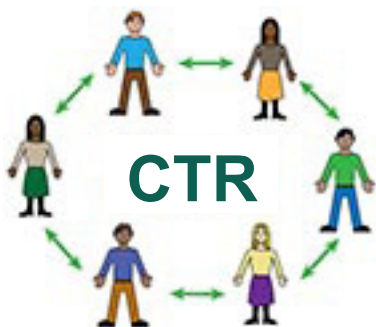
For families,
professional and
people living with a
learning disability.



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1. About Care and Treatment Reviews



This guidance is to help people when carrying out a Care and Treatment Review (CTR). It tells you about the main aims of a CTR and offers tips and advice to help you on the day.

CTRs are for people who are in mental health and learning disability hospitals, and people at risk of going into hospital.

They work alongside the Care Programme Approach (CPA).

CTRs help to test and challenge how care and treatment are provided. They help stay in their communities if at all possible, and they help people get the support they need to leave hospital as soon as it is safe to do so.

2. When does a CTR happen?



CTRs should be carried out before a person goes into hospital or within 10 days of arriving. After that they happen every 6 months.

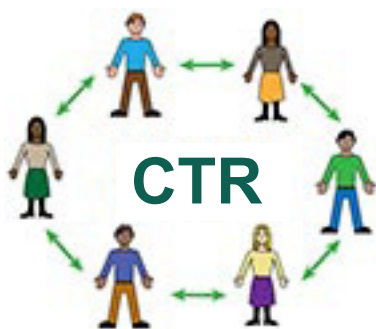
A CTR should take about one day to complete.

It is the person's right to ask for a care and Care and Treatment Review at any other time. Requests go through the person's care co-ordinator.

Who can ask for a CTR?

- The person
- Family carer
- Advocate
- Clinical or community team
- Commissioner

3. What is a Care Treatment Review?



A CTR helps to find out 4 big things:

1. Is the person safe?
2. Is the person getting good care now?
3. What are their plans for the future?
4. Can care and treatment be provided in the community?

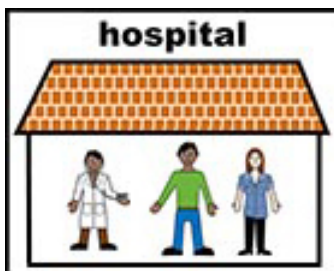
4. Community CTRs



A community CTR is about making sure that people only go into mental health and learning disability hospitals when it is absolutely necessary. Some of the things you can think about are:

- Which local services can help?
- How much extra care is needed?
- Can the person carry on living in the same place with more support?
- Is crisis care available?
- Does the family carer need more support?

5. Hospital CTRs

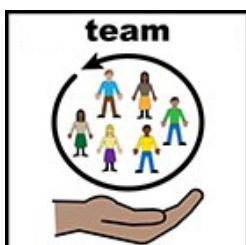


If the person goes into hospital without a community CTR, they must have a CTR within 10 days of arriving.

People should then have a CTR every 6 months.

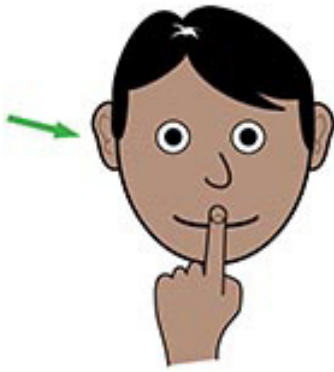
People can ask for a CTR at other times.

6. Carrying out a CTR



1. It's all about team work!
2. Treat everyone with respect.
3. Listen to and support everyone to have their say.
4. Avoid jargon and communicate clearly.
5. Remember that the CTR chair person has the final say.

7. Private and Confidential



Everything you see or hear is confidential.

This means you cannot discuss anything with other people outside of the CTR.

Please do not take any notes away with you afterwards.

8. Asking Questions



Some people will need a bit of help in their review and some people won't! The questions are just to help you and them. It is not a test. The main thing is to help the person have their say. You are there to listen and support them. Make notes and capture the person's own words if you can.

TOP TIPS



1. When you speak to people:

- It can help to interview people in pairs.
- Always keep it friendly and informal.
- Help the person feel OK to say what's working and not working.
- Ask the person for their ideas about making things better.
- Try not to express your own opinions.



2. Interviews with professionals

The 4 big questions will help you find out what's working and not working:

1. Is the person safe?
2. Questions about the person's care and treatment now?
3. What are the person's plans for the future?
4. Can care and treatment be provided in the community?



You will need to look at notes and speak to people about things like:

- Treatment
 - Psychology
 - Psychiatry
 - Medication
- Is the person healthy or could this be better?
- Day to day care
- How is the person involved in making decisions?
- How can the person best communicate?
Eg. speech and language, easy read.
- How is the person supported with managing behaviour?
- Family contact
- Choice and range of daily activities
- Access to the community
- Care plans
- Discharge plans
- Barriers to any of these



TOP TIPS



3. Before you meet the person:

- At the main meeting, ask staff if the person understands what the CTR is about. Ask staff for a copy of the consent for the CTR
- Check it it's OK to ask the person to show you their room, and/or to show you round the ward. What does this tell you?
- Give the person time to decide if and how they want to meet you.



4. When you meet the person being reviewed:

- Be friendly and help the person feel relaxed and happy.
- Do say it's OK if they want to go on to something else or stop.
- Make sure the person understands what the CTR is about.

A CTR helps to find out 4 big things:

1. Are you safe?
2. Are you getting good care now?
3. What are your plans for the future?
4. Can care and treatment be provided in the community?

TOP TIPS



5. More about meeting the person being reviewed:

- Start off by just chatting eg. who you are, where you are from.
- Don't rush
- Try to see things through the person's eyes.
- Praise the good things you see and hear.
- A few short meetings can be better than one long one.
- Look out for things about where the person is living. Could this be improved



6. About my care

It's OK if you can't ask all these questions!

If staff say it is OK, ask the person if they are happy to show you the ward and their room. What are they like?

- What do you like or dislike about your room or ward?
- What would make them better?
- Can you go outside?
- Are the staff nice? Favourite member of staff?
- Is the food nice? (Tasty/healthy/choice)
- What happens during the day or week?

TOP TIPS



7. More about the person's care

- Do you get a choice about the things you do?
- And the chance to do anything you like?
- Do you get out and about - what do you do?
- Could it be better?
- Do you speak to or see your family? How often?
- What would make this better?
- Do you get on OK with other patients?



8. Feeling safe

The next questions are about feeling safe.

Everybody should feel safe. When you are safe it means you do not get hurt by anyone or anything. You feel happy when you are safe.

Safety questions

- Is it easy to talk to staff or family if you are worried or need to talk about something important?
- Who do you talk to if you are worried?
- Is it easy to speak to them?
- Are you ever restrained or placed in seclusion? What happens?
- What is your advocate's name?
- Do you know what advocacy is?
- Do you feel safe -
a. All of the time **b.** Some of the time **c.** I don't feel safe

Only explore this if the person is relaxed and happy to do so.
If the person does not feel safe, talk to the CTR chair in private.



9. Do you have a plan for the future?

- Have you got a person-centred plan?
 - Have you got a discharge date?
 - What is the plan for leaving the hospital?
 - What would you like to do in the future?
 - Where would you like to live?
- What kind of place?
 - Who with?
 - What support will you need?
 - What are the most important changes you want to happen?
 - Is anyone helping you plan for the future?

10. Interviews with family carers

If the person says it is OK, it is really important to involve family carers. If the person cannot answer your questions, a family carer might be able to help. These questions are to help you support the carer, if needed.



About your relatives care:

- Are you happy with your relatives care?
 - What would make it better?
 - How often do you get to see your relative?
- How do you feel about your visits?
 - Do staff keep in touch about your relatives progress?
 - What would make it better?
 - Are you involved in meetings such as CPAs?
 - Is there anything else you'd like to talk about?

TOP TIPS



11. About your relatives safety

- Do you feel that your family member is safe? Why?
- Have any issues come up? If so, what happened?



12. Plans for the future

- Do you know what the future plan is for your family member?
 - Do you feel you have been listened to?
 - What do you think about the planning process?
- Is there anything that would make it better?
 - Is your family member ready to leave hospital?
 - Are there any problems with this?

Feedback and Report



Make time to get together to decide what your recommendations are.

Agree together who needs to do what by when, who will make sure this happens, and agree who gets a copy of the report.

Remember to avoid jargon and communicate clearly.

Does the person reviewed want to be included in the feedback?