



Covid-19 and the Care (Education) and Treatment Review policy



About this guide



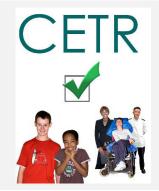


Blue words:

When a word or phrase is difficult, we have explained it in blue writing.

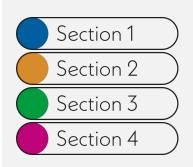


Care (Education) and Treatment Review can be shortened to C(E)TR. We say C(E)TR in this booklet when it is about children, young people and adults.



We will say CETR without brackets when it is for a child or young person.

A CETR for a child or young person always includes education.



This guide is quite long. We have split it up into different sections to make it easier to read.

You may want to read it in stages.

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1. Introduction





C(E)TRs are for people with a learning disability and autistic people who might need to go into a specialist mental health or learning disability hospital.



People with severe mental illness might need to stay at a specialist mental health hospital to get the right treatment they need.



Some of these hospitals might only be for people with a learning disability or autistic people.



C(E)TRs are also for people who are already patients in these hospitals.



1. Introduction





C(E)TRs are for children, young people and adults.



Usually in a C(E)TR the person and many other people including family members, get together face to face.



They do this to make sure the person is getting safe, good quality care, treatment and support and have clear plans for their future.



Covid-19, or coronavirus, has made it much harder for people to meet up face to face.

1. Introduction





During the Covid-19 pandemic we used new ways of meeting and supporting people.

For example, have online meetings.



As Government restrictions ease we can start to get back to more face to face meetings.



Care and Treatment Review Policy and Guidance With policy and guidance on Care, Education and reatment Reviews for children and young people Easy Read Version | 2017 The rules about C(E)TRs are in a document called a policy, and there is an easy-read version of this at: <u>www.england.nhs.uk/ctr-policy</u>



There is also information to help the person have a good review during the Covid pandemic at: <u>www.england.nhs.uk/my-ctr</u>



2. Virtual C(E)TRs: What we have learned so far





In a survey in July 2020, some people said they thought virtual C(E)TRs were not as good as face to face meetings.



For some people, having a virtual C(E)TR has been a good experience.



A virtual C(E)TR is a video meeting or phone call.

Having a video C(E)TR is often better than a phone call.



Since the Covid pandemic started in 2020, we have learned a lot about new ways of working.



2. Virtual C(E)TRs: What we have learned so far





It has meant that people do not have to travel to meetings when it is a virtual C(E)TR.



Some people find a virtual C(E)TR easier than meeting face to face, but many do not.



More young people seemed to find a virtual C(E)TR easier.



Virtual C(E)TRs can help people take part if they find it hard to go to a face to face C(E)TR. But not everyone finds it better.

3. How this learning could help C(E)TRs in the future





We will make sure the C(E)TR policy includes what we have learned.

We aim to update the C(E)TR policy by the end of 2021.



It is now safer to have meetings face to face, but people will have a choice about how they would like to take part in their C(E)TR.



There will now be a blended approach to C(E)TRs.

This means people can choose to have both virtual and face to face meetings for their C(E)TR.



It is always necessary to visit people for their C(E)TR whenever possible.



4. Returning to face to face C(E)TRs





A Virtual C(E)TR do not replace the need for face-to-face C(E)TR.



It is important to see the inside of the hospital, meet the person, and talk to staff involved in their care.



We are committed to a return to face to face reviews.



Although, we want to keep doing the good things we learned from doing virtual C(E)TRs.



5. Good quality C(E)TR





During Covid-19, it is still really important to make sure the C(E)TR is good quality.



This means the person and family, if involved, are given every chance to take part.



Actions from the C(E)TR need to be recorded and carried out well and on time.



It is important that everyone gets a chance to talk about and agree the actions from the C(E)TR.



5. Good quality C(E)TR





People in charge of C(E)TRs must keep checking on the quality of C(E)TRs during Covid-19.



The C(E)TR should happen on time every 6 months for an adult, or every 3 months for a child or young person.



If people cannot agree on what the C(E)TR says, the people in charge of C(E)TRs for that area must help sort issues out.



The C(E)TR will check if Covid-19 has changed anything for the person and what can be done to support them with this.

6. Questions about Covid -19

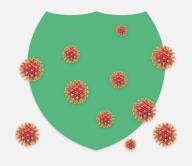




The C(E)TR will also check to find out about any extra risks because of Covid-19.



This includes the risk of catching Covid-19 and the risk of being ill with it.



The people who carry out the C(E)TR are called the panel. They must find out what is in place to support and protect the person.



The C(E)TR must look at the impact of Covid-19 on the person, such as on mental health, going out, seeing family or friends.

7. Standards for C(E)TRs during Covid-19



These standards are the things that should always happen in a C(E)TR during Covid-19.



Advice and rules on Covid-19 should be carefully followed to keep people safe.



When meeting face to face, this includes wearing masks and other personal protective equipment as needed.



When it's not possible to meet face to face, a video meeting should be offered so people can still take part.

7. Standards for C(E)TRs during Covid-19



It is important to make sure that everyone can join the C(E)TR virtually or in person. The chairperson should talk to people who cannot take part on the day.



Chairperson is the official title of the person in charge of a C(E)TR.

Standards for C(E)TRs in the community



Services must work together so that information about people at risk of going into this type of hospital can show who might need a C(E)TR.



They can do this through something called a Dynamic Support Register, or DSR. It helps people get extra support in the community. This can help stop people from needing to go into hospital.

Standards for C(E)TRs in the community



If community support cannot meet the person's needs, the C(E)TR should look at why.



If hospital is needed, the C(E)TR should think about the plan for this, how long the person will be in hospital and how it will help them.

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Children and young people





During Covid-19 we have found that children and young people are more likely to go into this sort of hospital.



In particular, this includes autistic children and young people.



Children and young people should be included on the Dynamic Support Register.



This will help make sure they get the support they need in the community.

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Children and young people





They should always have a community CETR before deciding if hospital is needed.



If this does not happen, a CETR must happen within a week of going into hospital.



Extra community support may be needed for autistic children and young people in to stay at home.

Standards for hospital C(E)TRs





Visiting the hospital and seeing the person is really important.



If Covid-19 makes visiting difficult, this might mean one or two panel member visit the person rather than the whole panel.





A mixture of some people joining virtually and some meeting face to face may be a good option for some C(E)TRs.



It is really important for everyone to prepare well for a virtual C(E)TR.

Standards for hospital C(E)TRs





The chairperson must make sure the person has given consent and should know how they want to take part.



The chairperson must make sure that the advocate and family are invited if they are involved.



C(E)TRs need to be prepared for. Paperwork needs to be organised before the day.



Everyone should know the timetable for what will happen on the day of the C(E)TR.

Standards for hospital C(E)TRs





There should be time for everyone to meet and talk about actions at the end of the day of the C(E)TR.



Regular breaks should happen during the C(E)TR as some people have said that they find virtual reviews tiring.

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8. Sharing personal information





There are strict rules about sharing personal information that have to be followed in every C(E)TR.



During Covid-19, the chairperson needs to decide what information will be needed before the C(E)TR.



This might be information from the person's notes, a one page profile, or the actions from the last C(E)TR.



The chairperson may decide to send this information to the C(E)TR panel members. The panel must not let other people see it.

8. Sharing personal information





All information sent by e-mail is confidential and should be kept safe and secure.



We have given C(E)TR panel members equipment such as NHS laptops and NHS email addresses.





Panel members who go to a face to face review must be given the right personal protective equipment during Covid-19.

This is sometimes called PPE.



Experts by experience and clinical experts on panels should be paid for preparation time as well as time spent at a C(E)TR.



It is important that the person is given support to plan for their C(E)TR meeting.



Panels should think about how confusing or difficult it can be for people and their families to see lots of new people on a screen.





Everyone should introduce themselves clearly at the start of the C(E)TR.



Family or staff can support a person at their C(E)TR. This should happen if the person chooses this.



The C(E)TR panel should help people feel comfortable and not use difficult words.

The panel should offer choice about:







Panel members need to carry out a virtual C(E)TR in a quiet room without being disturbed by other people.



Other people should not be able to see or hear what happens in a virtual C(E)TR.



Other people should not be able to read handwritten notes or computer documents.



C(E)TR panel members should use a password on laptops.





C(E)TR documents should be deleted when they have finished with them. The chairperson can help if people are not sure.



Panel members should shred any handwritten notes after they have finished with them. The chairperson can help if anyone is not sure.

Virtual C(E)TR tips





Screen backgrounds: backgrounds can be good for some, but very difficult for others.

Remember to check your background.



In a big meeting, ask all people to use the 'raise hand' button on Microsoft Teams if they want to speak.



Let people know they can use the raise hand button if they need a break during the C(E)TR too.



Remind people not to share personal or confidential information in the chat box. Other people might see it.



Offer to turn cameras off, if the person finds it upsetting to see lots of people or strangers on a screen.





This guide was made in co-production with:

Experts by experience: **people with a learning disability** Experts by experience: **people with autism Ace Anglia:** info@aceanglia.com **Thinklusive NHS England/Improvement**

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