

Pre-Admission and Blue Light Care, Education and Treatment Reviews

Information for professionals



Care, Education and Treatment Reviews (CETRs)

As part of the Transforming Care commitment made by NHS England, Care, Education and Treatment Reviews (CETRs) are offered to young people under 18 who have Learning Disabilities and/or Autistic Spectrum Conditions who are in mental health hospital placements, at risk of admission or are receiving Day Patient care.

CETRs work to ensure that a young person is not admitted to hospital unnecessarily or if the young person requires admission to ensure that their stay is as short as possible.

The local Clinical Commissioning Group (CCG) work with local providers to identify those children and young people who are at risk of admission. The aim of the CETR is to bring a person-centred and individualised approach to ensuring that the care, education and treatment needs of the young person are met and barriers to progress are challenged and overcome.

Locally the CCG chair Community (pre-admission) and Day Patient CETRs. NHS England chair inpatient CETRs.

Community CETRs

- The CETR process is triggered at the point when a person is identified as being 'at risk' of admission to a specialist learning disability or mental health inpatient setting. The pre admission CETR facilitates a process of seeking alternatives to admission if possible and, if not, follows the person through any subsequent admission, period of assessment and treatment and towards discharge. This process is supported by the Risk Factor Thresholds which are available from the Children's Continuing Care Team.
- A Blue Light meeting will take place if a young person is at high risk (Red threshold) and at the point of admission to hospital and a CETR has not occurred. The aim will still be to prevent admission as far as possible.
- Blue Light meetings and CETR's are subject to the express consent of the individual (or when appropriate someone with

parental responsibility for them), or if they lack capacity, assessed to be in their best interests applying the Mental Capacity Act 2005 and its Code of Practice.

- The Community CETR is arranged by the relevant community team. This involves providing information to the young person and their parent/carer regarding the CETR purpose and process, seeking the young person's consent, ensuring the relevant people are invited, booking a venue, date and time
- The Community CETR is chaired by the CCG and usually lasts between one hour and ninety minutes. The chair will ensure that the minutes and action plan are distributed within 2 weeks of the meeting.
- Sometimes the meeting may be held in 2 parts. This may occur to avoid the young person having to repeat their story. In this case the professionals involved may meet first and the young person and parents join for the second part of the meeting. This decision is led by the young person and parents.
- With the young person's consent it can help the commissioner to understand the young person's needs if they are provided with a current report before the meeting.
- The chair will ask someone who knows the young person well to provide a brief pen-picture, a summary of the current situation and why the young person is at risk of admission.
- The chair needs basic personal information such as date of birth, address, parents name and contact details, siblings, GP details.
- Unlike inpatient CETRs we do not have an external panel of Expert by Experience and Clinical Expert. This may change in the future.
- Should the CETR find that additional assessments or interventions are required, that are not available via commissioned services, additional funding may be sought

- The CPA co-ordinator will be asked to ensure that any agreed changes/additions to care, education and treatment are incorporated into the persons care plan
- The clinical team is asked to ensure that the CETR outcomes are discussed with the young person after the meeting and any questions or concerns addressed

CETR principles

CETRs are based on a set of principles that are summed up in the word PERSONAL.

CETRs are:

1. Person centred and family centred
2. Evidence based
3. Rights led
4. Seeing the whole person
5. Open, independent and challenging
6. Nothing about us without us
7. Action focused
8. Living life in the Community

Who should be invited to the CETR?

It is important the young person and their parent(s) are able to invite who they wish to the CETR to support them and this may include family members or friends. The CETR needs to consider the views of a wide range of people who know the young person in a personal and professional capacity. The care co-ordinator and other relevant clinicians from the community and hospital team need to be present. Education and social care should also be represented. If the young person has an advocate they should also be asked to attend.

Further information

Children's Continuing Care Team
NHS Bristol Clinical Commissioning Group (CCG)
5th Floor, South Plaza, Marlborough Street Bristol, BS1 3NX

Tel: 0117 984 1656 Email: bnssg.cetr@nhs.net