

# Pre-Admission and Blue Light Care, Education and Treatment Reviews (CETRs)

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 at risk of being admitted to a CAMHS inpatient unit or any other restrictive practices.

The aim of a CETR is to ensure that a young person's care, education and treatment is delivered in the least restrictive way. This includes ensuring 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 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 Integrated Care Board chairs Community (preadmission) and Day Patient CETRs. NHS England chair inpatient CETRs.

# Identifying children and young people eligible for the CETR process

The CETR process is triggered at the point when a person is identified as being 'at risk' of family/placement breakdown or admission mental health inpatient setting. The Community CETR facilitates a process of seeking additional means of support to avoid an admission to hospital, if not, follows the person

through any subsequent admission, period of assessment and treatment and towards discharge.

The local Integrated Care Board (ICB) works with local providers to identify those children and young people who are at risk of restrictive practices such as hospital admissions or residential care. If a child or young person is deemed to be at risk of hospital admission or placement or family breakdown, they are

be added to the local 'Dynamic Support Register'. Consent needs to be sought from the family/young person in order for them to be added to the register. If a child meets the amber or red risk threshold and is added to the register, this will trigger the CETR process. Children and young people on the register will also be tracked and discussed at a local multiagency meeting to ensure all potential support and resources are available to the family.

# **A Community CETR**

- CETRs 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 ICB and usually lasts between one hour and ninety minutes. The chair will ensure that the minutes and action plan are distributed within two weeks of the meeting.
- Sometimes the meeting may be held in two 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 ofbirth, 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.
- A Blue Light CETR (also known as Local Area Emergency Protocol meeting) will take place in an emergency situation.
- if a young person is at high risk (Red threshold) and at the point of admission to hospital and a Community CETR has not occurred previously. The aim will still be to prevent admission as far as possible.
- Once a CETR is completed, the Complex Case Manager is responsible for checking that actions are/have been carried out.

## **CETR** principles

#### 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)/carers are able to invite who they wish to the CETR to support them. 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**

Mental Health, Learning Disability and Autism team BNSSG Integrated Care Board 5th Floor, 360, Bristol, BS1 3NX

Email: bnssg.cetr@nhs.net