

Appendix E - CPA and Revised Review Process

For those teams who also use Care Programme Approach (CPA) the following guidance has been received from Devon Partnership Trust.

There has always been an assumption that the service user should be at the review.

'Effective care co-ordination' refers to 'review meetings' which are formally held to review the care plan with part of the outcome being to set the date for the next review. Additionally 'Any member of the care team, the user or carer...able to ask for a review at anytime.' There is no mention of the need for 'face to face' contact other than the reference to a 'review meeting'.

The 1991 document Care Management and assessment, a managers' guide states:

'...the review need not necessarily involve a meeting of all those involved' . It qualifies this statement by saying that the '...user's views should be central to the review'. Building on strengths' talks of taking every effort to include the service user.

There appears to be no formal document that says that the service user has to be in attendance at the review, though there is clear guidance that the views of the user must be central to the review.

Within the Trust standards for review we do have a requirement that an HONOS assessment be completed, though arguably this could be completed anytime in the previous few days as HONOS is an indicator of behaviour over the last 2 weeks. The Trust standards for review are:

5. STANDARDS FOR REVIEWS

- The format, timing and setting of the review will be appropriate to the needs of the individual.
- The purpose of the review should be recorded.
- In the case of a review meeting, people involved in the personal plan should be invited to contribute. If they are unable to attend, this should be recorded and relevant comments written on the review form.
- A HONOS re-assessment will be completed.
- FACS arrangements will be reviewed.
- Transfer and discharge information will be recorded.
- The outcome of the review should be recorded and a copy of the review form sent to all relevant parties.
- The service user will sign the review form.
- The care co-ordinator will sign the review form.

The CPAA National Standards and audit tool clarifies things a bit more, suggesting that there are 4 options:

1. An informal meeting between care co-ordinator and service user
2. A series of small meetings with those involved
3. An informal meeting with service user
4. Written contributions from others or a full multidisciplinary meeting.

This is probably the definitive practice guidance at present.

I think that in Mental Health we have always considered it to be good practice to have face to face meetings, however, I think you are suggesting something that could work for a number of long term stable clients requiring elements of pure 'care management', then so long as the user and carer are formally consulted, there is evidence that the care package/ plan is working and does not require significant alteration and there are mechanisms in place to deal with differences of opinion then I can see no real objection to this approach.

Best wishes,

Doug Goodship