

What can carers expect from the CPA?

*It is **not** about hiding behind confidentiality*

*It **is** an important duty to recognise, inform and support carers*

- > The CPA process should recognise the importance of carers as partners in care, in providing valued care and support
- > As the needs and views of carers may differ from service users, they should always be considered separately, including the impact of their caring role on their health and well-being

Carers have a right to their own assessment of needs, and a plan of support. Even where no care co-ordinator is involved, and/or there is no contact with secondary services, and/or the person they care for refuses services or support, the carer(s) have a right to an assessment of their needs by the local council.

- > Carers should be kept up-to-date and involved in the care plan, although the service user needs to be agreeable to this
- > Wherever possible, carers should be included in reviews
- > Carers can expect to have information and training to support them in their caring role
- > Carers can expect their views to be kept confidential if they so wish
- > Service user confidentiality may be overridden if the carer is deemed to be at risk

Young carers (e.g. children of service users) have recognised needs which should be responded to with great sensitivity, particularly to reduce their levels of anxiety and responsibility about what is going on.

Will the changes to CPA mean I get less of a service?

*It is **not** about removing care from people in need*

*It **is** about removing some of the existing arguments about the different levels of CPA*

- > There have recently been changes to CPA following a national consultation that found in some cases improvements to implementing the CPA were needed.
- > Removal of Standard CPA is intended to help reinforce that the CPA is a process which applies to everyone
- > Those with more complicated needs and service arrangements will still be allocated a named care co-ordinator
- > Everyone (with or without a care co-ordinator) should expect services to adhere to the *principles* and *values* of the CPA

Even where you do not have someone called a care co-ordinator, each member of staff carries out this kind of function at a simpler level.

- > If you feel you are receiving a poor service, you should use the local complaints procedure
- > An advocate or local service user/carers group can support you in submitting a complaint
- > **REMEMBER COMPLIMENTS ARE IMPORTANT TOO**
If you find the CPA process useful, please give your positive comments back to services so they know what is working

The Care Programme Approach (CPA) is **not just an official meeting that is occasionally called by the professionals.**

CPA **is about your right to expect a good service in all the contacts you have with people providing services for you.**



Service Users & Carers and the Care Programme Approach

Making the CPA work for you

*It is **not** about how you fit into services
It **is** about how services fit with you*

For further details on what CPA is all about, and how it should work for you please see:

'MAKING THE CPA WORK FOR YOU'
Booklet and DVD

(Available from the Department of Health)

What is the Care Programme Approach (CPA)?

It is **not** about rationing care

It **is** about saying what good practice should be like

It has always been about ensuring your care and support are offered within a set of reasonable principles:

- > Assessing your needs *with you*, in relation to any given situation
- > Developing a plan *with you*, in response to the needs identified and agreed
- > Sharing responsibility *with you* (and others as needed), to put the plan into action
- > Reviewing the plan *with you* periodically, to see that it is meeting your needs and to agree any changes

It is also expected that all people providing services do so within a set of personal and/or professional *values* that:

- > Show respect for you as a person, including recognition of your personal strengths and qualities
- > Treat you with dignity at all times
- > Offer you information about reasonable choices you can make regarding your care and support
- > Demonstrate respect for equality of opportunities for all, regardless of ethnic origin, gender, sexual orientation, cultural or spiritual beliefs
- > Help you have as much control of the whole process as possible

The CPA and your GP

Whilst GPs are not strictly governed by the CPA, they should always be contacted, included and informed about arrangements for your care and support through the process of the CPA.

The principles and values of the CPA, such as respect, choice, and discussing things with you... apply to all services, including your GP.

What is meant by 'Care Co-ordination'?

It is **not** about different levels of care

It **is** about making sure you get the services you need

CPA is simply a term for describing the process of how mental health services assess your needs, plan ways to meet them and check that they are being met. You should always feel able to ask mental health workers to explain this process clearly to you.

When might I need a 'Care Co-ordinator'?

- > Where your needs have become more numerous or complex
- > When you need a range of different services
- > If a community team decides a named person needs to co-ordinate the services you receive
- > If your needs are not complex you will not have a care co-ordinator, but the *principles* and *values* of the CPA still apply

A care co-ordinator should be able to explain the different services to you.

Who will be the 'Care Co-ordinator'?

- > Usually a Nurse, Social Worker or Occupational Therapist
- > Ideally, they should be the person who knows you best and with whom you feel most comfortable to talk with
- > In some local services, the care co-ordinator could be an unqualified person or someone from a voluntary agency or the independent sector, but this will require local agreement
- > You should always be informed of the name and contact details of your care co-ordinator

You can assess and discuss your own needs if you wish. Some people find a self-assessment form helpful. Ask the person working with you for further details how to do this.

What are care plans & reviews?

It is **not** all about complicated forms and meetings

It **is** about discussing and writing down your needs and checking they are being met

What does a 'Care Plan' look like?

- > It could be as simple as a letter which sets out the agreed service(s) to meet your needs

You can put your own care plan together, if you wish to. This may include making Advance Statements to express your wishes.

- > A care plan could be a detailed form which states your needs, the range of services required, and who will provide these services

The process of CPA is also about recognising what you are able to do, and what you want to do (your strengths).

- > A good care plan should keep the services focussed on what they agreed
- > The care plan can be a useful tool for service users and carers to keep a check on the care provided

You also have the option to opt out of a care plan that you feel is not meeting your needs. However, the mental health services equally have the reasonable right to action their care plan if you appear to be at risk in any way.

What does a 'Review' look like?

- > A review should be flexible about where and when it happens, and who attends
- > Reviews can just be you and your care co-ordinator having a discussion
- > Anyone providing services, as well as you or your carer, can call a review when required
- > Reviews should recognise any progress that has been made

If you would like to find out about access to an advocate in your area, ask the person working with you, or your local Citizens Advice Bureau for more information.