

Reviewing the Care Programme Approach 2006

A summary of consultation questions and proposals

Section 1 Background

No proposals or questions

Section 2 Values and Principles Underpinning the Care Programme Approach

Proposal: The Care Programme Approach should be underpinned by an explicitly stated set of values and principles

Q. Are the values and principles set out in this section the right ones?

Q. Are they set out in a way that is meaningful to service users and providers?

Q. In what ways might the current systems of operating the CPA be improved to ensure that these values are met?

Section 3 Who should the CPA be for?

Proposals:

- There will only be one level of the CPA.
- The system of co-ordination of care and support for service users currently defined as “standard” will be for local determination, guided by CPA values and principles.

Q. If there is no longer standard CPA, how do we best support partnership working between primary care, secondary care and the voluntary sector to ensure the needs of those previously on standard CPA continue to be met?

Proposal: The definition of who should be on the CPA in the future will be clarified to ensure it supports those with the highest care co-ordination and most complex needs.

Q. How can the current description of characteristics of who should be on enhanced CPA be improved for the future to describe those with the highest needs for care co-ordination and risk management?

Q. Would considering the degree of “complexity” of both individual need and service response together, aided by guidance on these concepts, help to define more clearly those for whom CPA is appropriate in the future?

Proposal

Services should review a number of key groups to ensure that they are not missed currently from enhanced CPA.

Consultation Questions

Q. What are the barriers to identifying and meeting the needs of the key groups described above and at Annex B and how may they be overcome?

Q. Are there other groups that should generally be considered to be included in the definition for enhanced CPA that services are currently not identifying and who should be on enhanced CPA?

Section 4 The Care Co-ordinator

Proposal:

National competencies to be developed for the role of care co-ordinator

Q. Is there more that needs to be done to clarify and support the role of care co-ordinator?

Q. What kind of training would enhance the care co-ordinator role?

Section 5 Continuity of care

Proposal:

Services should review CPA procedures to ensure pathway approaches to CPA and improved continuity of care - particularly with in-patients and prisoners.

Q. Are there other key transition points that have an adverse impact on the continuity of care for someone on the CPA?

Q. What can services do to ensure that service users and their carers are better informed about what action to take, and who to contact, in a crisis?

Section 6 Service User and Carer Engagement and Involvement

Q. Is there more that should be done locally or nationally to improve service user and carer involvement and engagement in the CPA?

Section 7 Physical Health and Social Outcome Needs

Q. What more should be done to ensure that the physical and social outcome needs of services users are considered and met?

Section 8 Choice in Mental Health

No proposals or questions

Section 9 Clinical Risk Assessment and Management

Proposal

The Department of Health is developing a framework on the evidence of effectiveness of risk assessment tools. Services should consider this when reviewing systems and approaches to assessing and managing clinical risk.

Q. Is there more that can be done to embed positive risk and safety management within the CPA?

Q. How can the balance be struck between the need to record risk and decisions (defensible practice) yet avoid over-recording which can alienate service users and add to bureaucracy?

Q. Is there further support that professionals or others need to enable them to make better decisions around risk assessment and management?

Q. Is there further support that service users and carers need to be better involved in decisions about, and managing, risk and safety?

Section 10 Tackling Bureaucracy

Q. What should services do to reduce bureaucracy in the CPA process?

Q. Are there any national policy requirements that unintentionally encourage an overly bureaucratic local approach to the CPA?

Section 11 Measuring and Improving Quality

Q. Are there other ways that quality improvements in the CPA process and outcomes should be measured - either nationally or locally- without adding unnecessary bureaucracy?

Q. Are there ways in which current systems could be better aligned or organised?

Please send comments to cpareview@londondevelopmentcentre.org