

Learning Disability & Autism programme

**Care (Education) and Treatment
Reviews (C(E)TRs) and Dynamic
Support Registers (DSRs).**





Policy Development

Co-production – we received over 300 responses from people with lived experience, professionals and stakeholders across the WHOLE system.

Consideration to wider system changes – New NHSE Operating Framework and other policy developments (Draft Mental Health Act Bill, BTRS Action Plan, SEND inspection Framework)

Learning from system reviews – LeDeR, Safe and Wellbeing Reviews and National Safeguarding Reviews



Update on publication

The combined DSR CETR policy has now been published (25th Jan 2023)

C(E)TR guidance and DSR guidance are both included in the policy

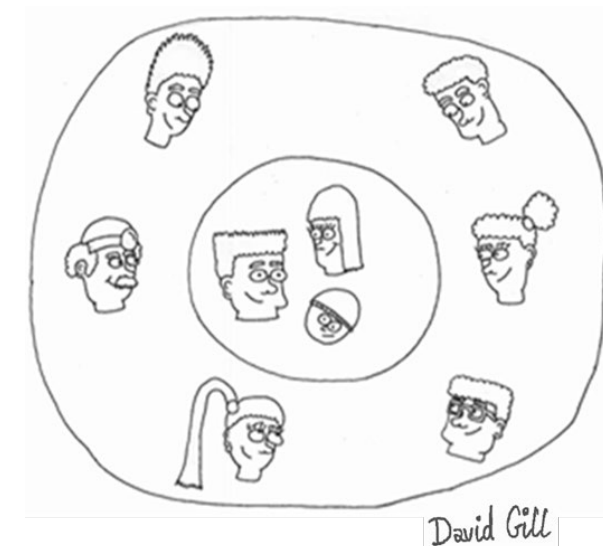
There will be a three month period between publication and implementation to allow time for the changes to be embedded.

Dynamic Support Registers

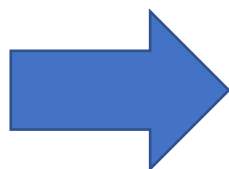
“A Dynamic Support Register (DSR) is the tool used in a local area to identify individual children, young people and adults with a learning disability, autism or both who are at risk or may become at risk of admission to a mental health inpatient setting without specific and timely Dynamic Support”

Note: the term “At Risk of Admission Register” was originally used, this term continues to be used in some areas. Similarly, the Dynamic Support Register is also known in some local areas as a Dynamic Support Database (DSD)

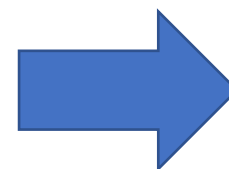
Making a DSR that is most useful to your area



DSR minimum requirements and standards



Working together to develop your local DSR



The **best** DSR for children, young people, adults & their families in your area

DSR: People told us....

There should be a consistent approach to understanding people's needs and the support they might need

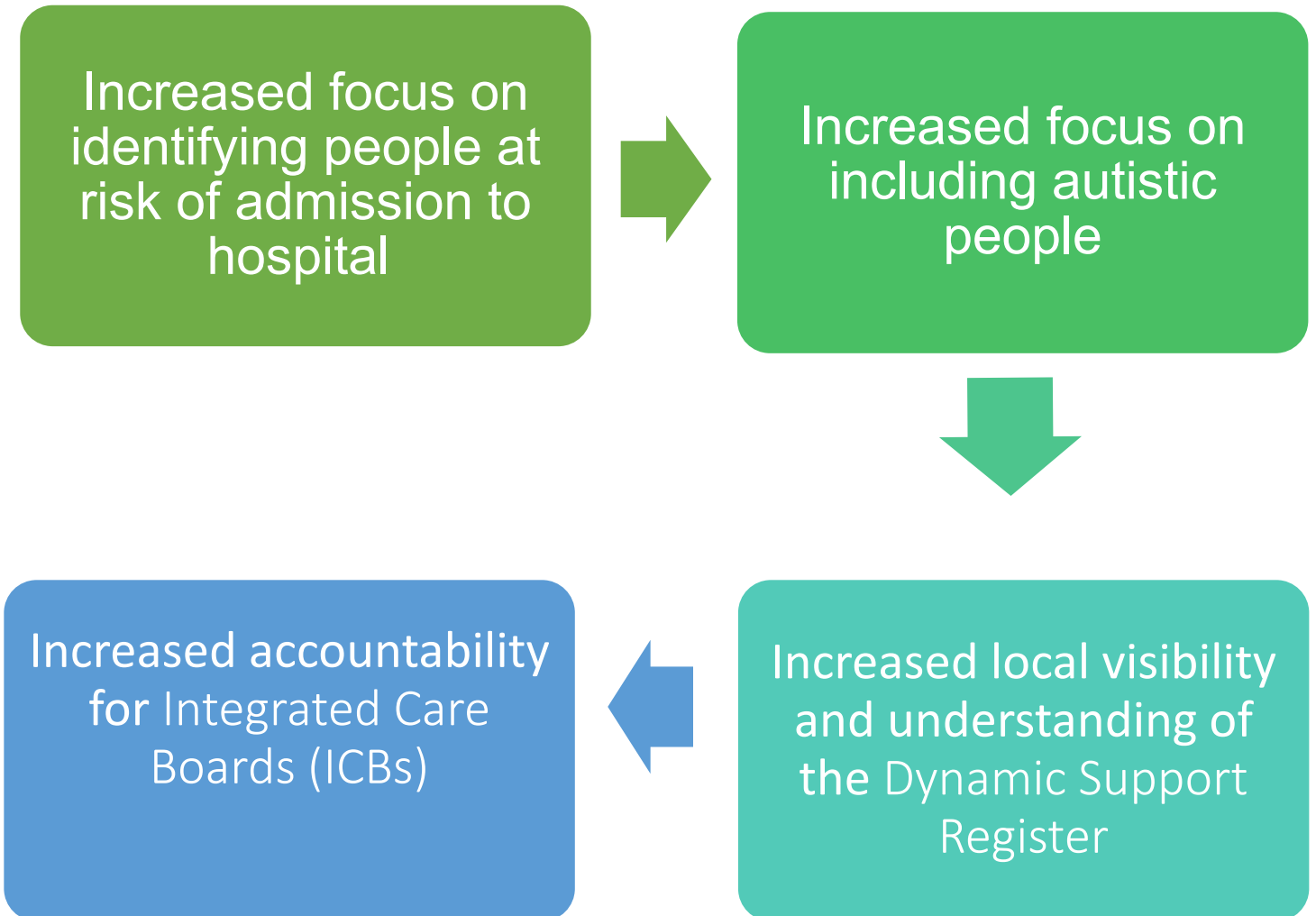
There should be no wrong door to ask for help!

It's not always clear how to find my local Dynamic Support Register?

I am not sure who is responsible for the Dynamic Support Register?



DSR: What we included in the policy...





DSR: What we included in the policy...



Greater focus on shared ownership across local systems to improve joint working.



Responsive to changing needs and risk



Dependant on co-produced local implementation



Greater focus on children and young people placed in 52-week residential schools and colleges



DSR: key changes to existing processes



There must be a clear way to stratify the needs and risks of people



A Right to Self Refer onto the Dynamic Support Register



A clear link to referrals for keyworkers, C(E)TRs and support for unpaid carers



Includes people in inpatient mental health settings and links to commissioner oversight visits

Care (Education) and Treatment Reviews

A C(E)TR is a meeting bringing together those responsible for commissioning and providing services (including nurses, social workers, local authority representatives, such as from housing and education, and health and social care commissioners) together with independent clinical opinion and those with lived experience of learning disabilities and/or autism, which includes people with a learning disability and/or autistic people and their family carers.

The aim of a C(E)TR is to check that a person who is either at risk of being admitted or who has already been admitted to a hospital setting is receiving appropriate care that meets their individual needs and that, where possible, challenges are overcome to support discharge to or continued care in the community.



C(E)TR: You told us....

Actions are often not followed up and no one is held accountable.

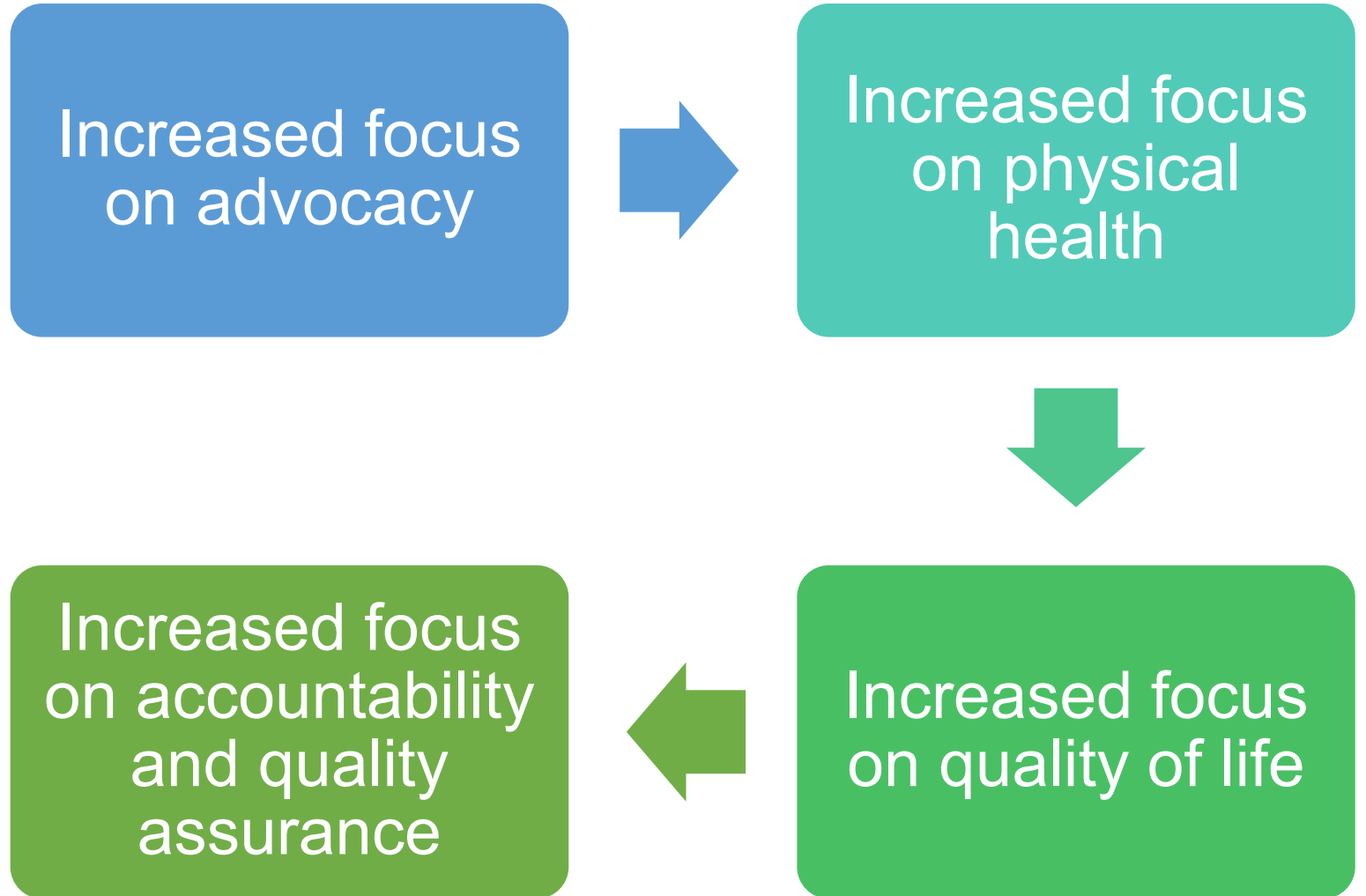
Physical health checks are often not happening or are not good enough.

Agendas can be too rigid and not created based on the person and their circumstances

Advocates do not always attend and where they do their knowledge and relationship with the person is limited.



**C(E)TR:
What we
included in
the policy...**





C(E)TR: What we included in the policy.....



Greater focus on all panel members having an equal voice.



Improved clarity on the escalation process



Greater focus on matching of panel to the person.



Links to other processes (Care Programme Approach, Commissioner Oversight visits, Independent C(E)TRs, keyworkers, Senior (Children's) Intervenors)



C(E)TR: key changes to existing processes



Clearer on how to request a C(E)TR sooner than minimum timescales.



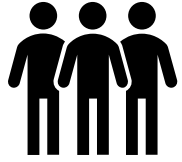
C(E)TRs to be undertaken for any person moving from one hospital to another.



C(E)TRs to be undertaken within 6 weeks of admission if community C(E)TR has taken place



C(E)TR to be undertaken prior to any removal of a diagnosis of Learning Disability or Autism.



C(E)TR: key changes continued

Payment structure
for EbyEs and
Clinical Experts

Mandatory
Training for panel
members

Option for same
panel to undertake
follow up review

Recommendation
for a community
follow up C(E)TR
post discharge

New oversight
process through
Oversight Panels

DSR & C(E)TR policy next steps



National information sharing events being planned following publication

Talking with partner organisations to support communication of the new policy.

Training being developed with Health Education England.

National research being commissioned into the effectiveness of C(E)TRs

Refresh of the CETR Code of Practice, Toolkit and DSR Audit Tool to support the new policy.

CETR Key Lines Of Enquiry document being updated based on stakeholder feedback

Regions supporting systems to prepare for implementation from May 1st 2023

