

Learning Disability: (Challenging Behaviour) Care and Treatment Review (CTR) & Blue Light Protocol Guidance and Policy (Adults and Children)

NHS Swindon Clinical Commissioning Group
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NHS Swindon Clinical Commissioning Group (CCG)

Policy	Care and Treatment Review (CTR) Guidance and Policy (children and adults)
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Document Control

Reviewers & Approvals

This document requires the following reviews and approvals

Name	Position		Version Approved	Date Approved
Dr Peter Mack	Chair	Commissioning for Quality Sub-Committee	0.6	28/07/16
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Acknowledgement of External Sources

List any policies or procedures from external institutions that have been used to inform the writing of this policy.

Title/Author	Institution	Comment / Link
Care and Treatment Review: Policy and Guidance	NHS England	Varying links and information
Blue Light Protocol	NHS England	Link to the Blue Light Protocol

Links or overlaps with other key documents & policies

Document Title	Version and Issue Date	Link/Document
Data Protection Act Policy	3.0 30/12/2014	SCCG Intranet
Information Governance Policy	3.0 30/12/2014	SCCG Intranet
Information Security Incidents Procedures	3.0 31/12/14	SCCG Intranet
Information Security Policy	3.0 31/12/14	SCCG Intranet
Corporate Records Management Policy	2.0 27/06/14	SCCG Intranet
Information Governance Framework	3.0 30/12/2014	SCCG Intranet
Laptop and Mobile device Policy	V2 26/01/15	SCCG Intranet
Information Governance Staff Handbook	V3	SCCG Intranet

Distribution & Consultation

This document has been distributed to the following people

Name	Date of Issue	Version
Associate Director of Urgent Care	24/06/16	0.1
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Community and Joint Commissioning Director & Group Director: NHS Wiltshire Clinical Commissioning Group Joint Commissioner Specialist Commissioning Team: Wiltshire County Council Commissioner Older People and Learning Disability (Adults): Swindon Borough Council Assistant Head of Service Disabilities Commissioning: Wiltshire Council & Wiltshire CCG	06/07/16	0.3
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Document Version Numbering

Document versions numbered “0.1, 0.2, 2.4”, are draft status and therefore can be changed without formal change control. Once a document has been formally approved and issued it is version numbered “Issue 1.0” and subsequent releases will be consecutively numbered 2.0, 3.0, etc., following formal change control.

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- Alternative languages and dialects
- Larger and smaller print options (font 8 to 18)
- Simplified versions including summaries and translation into symbols
- Audio or read versions
- Web based versions that can be zoomed into or shrunk on screen
- Braille

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Care and Treatment Review (CTR) Guidance and Policy (Children and adults)

1. Introduction

1.1 As a result of the limited progress since the Winterbourne View Concordat and continued protracted lengths of stay within Learning Disability (LD) inpatient settings, NHS England developed a model and process for reviewing people's care and treatment. CTRs were introduced in October 2014, initially for people with learning disabilities who had no discharge plan in place and were inpatients in low secure or non-secure hospitals, after testing and trialling the methodology.

1.2 The Department of Health (Winterbourne View Review Concordat: Programme of Action' December 2012) also asked that 'all primary care trusts develop registers of all people with LD who have mental health conditions or behaviour that challenges in NHS-funded care as soon as possible and certainly no later than April 2013' and that CCGs should 'maintain the local register from 1st April 2013'.

1.3 Commissioners are required to provide input to the Assuring Transformation Data collection as part of the Health and Social Care Information Centre data collection. The data is collated from all CCGs to inform the national picture of LD admissions and progress towards care outside of hospital, and to ensure that there is the highest possible level of awareness of people in the local community with a diagnosis of learning disability.

1.4 The 'At Risk of Admission Register' is required to be held locally and in accordance with the local/national CTR Policy, and will be subject to review in CCGs where it is recognised that inpatient admission rates are high. The register includes information to enable monitoring whether the individual is effectively supported and reviewed in order that contingency plans can be put in place as necessary, including support for family/carers. [At the time of policy writing, NHS Swindon CCG are awaiting feedback from NHS England for clarity regarding the children who are placed by NHS E Specialist Commissioning].

1.5 In order to continue building the NHS Swindon CCG register, close working relationships are required with other statutory services and third sector community providers; who may be aware of those people not known to existing learning disability services but who are at risk of admission, e.g. Police, Accident and Emergency department or local authority.

1.6 Patient consent to information collation must at all times be sought and documented by NHS Swindon CCG too, following data protection requirements at all times. Consent will be securely stored for evidence prior to any data inputting on the At Risk Register, with a copy given to the individual.

Please follow the below CTR Policy link to access the easy read consent forms required:

<https://www.england.nhs.uk/learningdisabilities/ctr/support/commissioner/>

1.6 National Legislation and Regulations

1.7 Members of staff should also be aware of the legislation surrounding Information Governance that stipulate how organisations should safeguard information, what processes are in place to use, secure and transfer information and also how patients and members of public have access to personal/business information. The organisation must comply with the following:

- Data Protection Act 1998
- Caldicott Principles
- Freedom of Information Act 2000
- Privacy and Electronic Communications
- Environmental Information Regulations

2. Purpose

2.1 Community Treatment Reviews (CTR's) have been developed as part of NHS England's commitment to improving the care of people with learning disabilities, with the aim of reducing admissions and unnecessarily lengthy stays in hospitals and reducing health inequalities. NHS Swindon CCG are therefore adopting national policy to ensure best practice adherence and to meet national aims and objectives.

3. Scope

3.1 This policy applies to the locally coordinated management for all people with a Learning Disability (LD) who are exhibiting an escalation of challenging behaviour, and may be at risk of admission to a specialist LD unit as a result.

4. Definitions

Learning Disability:

A learning disability affects the way a person understands information and how they communicate. Around 1.5 million people in the UK have one. This means they can have difficulty:

- understanding new or complex information
- learning new skills
- coping independently

CTR:

The CTR process is triggered at the point when a person is identified as 'at risk' of being admitted to a specialist learning disability or mental health inpatient setting. The CTR facilitates a process of seeking alternatives to

admission if possible and, if not, follows them through any subsequent admission, period of assessment/treatment and towards discharge

Blue Light Protocol:

A 'Blue Light' meeting offers the commissioner advice, steps and prompts to help avoid unnecessary admissions. It recognises that where an admission request is at very short notice it is not always practical to set up a full CTR, obtain consent and involve expert advisers. Should the individual be admitted to hospital then a post-admission CTR will be held within ten working days. There is no timeframe for these meetings as they are designed to respond to escalating behavioural risks.

5. Process / Details of Policy and Guidance

5.1 In writing their CTR Policy, NHS England considered the potential effect of it on people with characteristics that have been given protection under the Equality Act 2010, with particular attention paid to their health outcomes and the experiences of patients, communities and the workforce. They have complied with the requirements of this process, and NHS Swindon CCG adopt their principles. (The policy link below in 5.8).

5.2 CTRs bring together those responsible for commissioning and procuring services for individuals who are at risk of admission or who are inpatients in specialist mental health or learning disability hospitals, with independent clinical opinion and the lived experience of people from diverse communities with learning disabilities and their families.

5.3 The aim of the CTR is to bring a person-centred and individualised approach to ensuring that the treatment and differing support needs of the person with learning disabilities and their families are met and that barriers to progress are challenged and overcome.

5.4 CTRS are being driven by the NHS but involvement of local authorities in the CTR process and its outcomes are necessary for improving care and treatment for people with learning disabilities and their families.

5.5 The 'spirit' in which CTRs are carried out is paramount and is rooted in principles of human rights, independence, person-centeredness and co-production.

5.6 Please follow the link below to further NHS England CTR information:
<https://www.england.nhs.uk/learningdisabilities/ctr/>

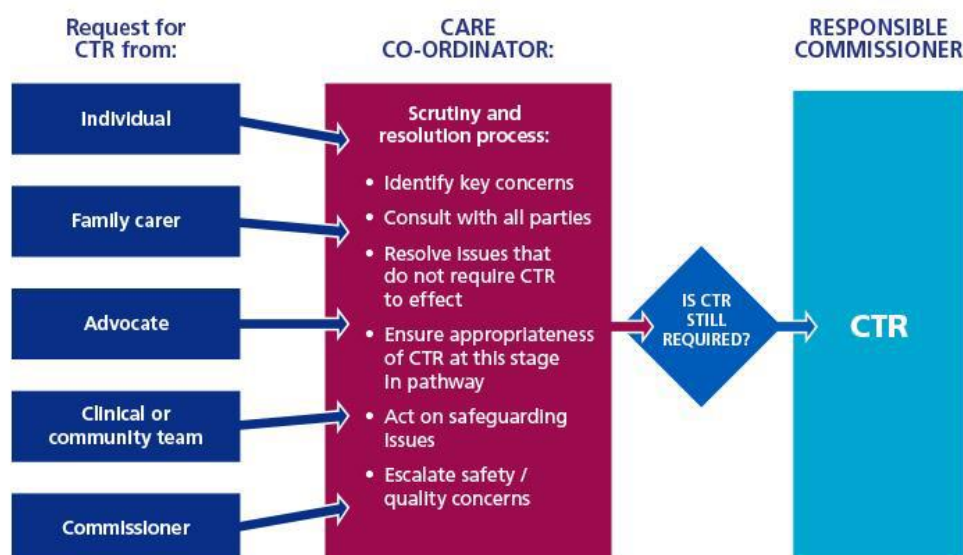
5.7 The aim is to provide a person centred and individualised approach; to ensure that wherever possible the needs of the individual are met whilst avoiding acute admission to a specialist unit. It requires all parties to work collaboratively with the individual to provide the best outcome.

5.8 NHS Swindon have formally adopted the NHS England CTR Policy and the link is:
<https://www.england.nhs.uk/wp-content/uploads/2015/10/ctr-policy-guid.pdf>

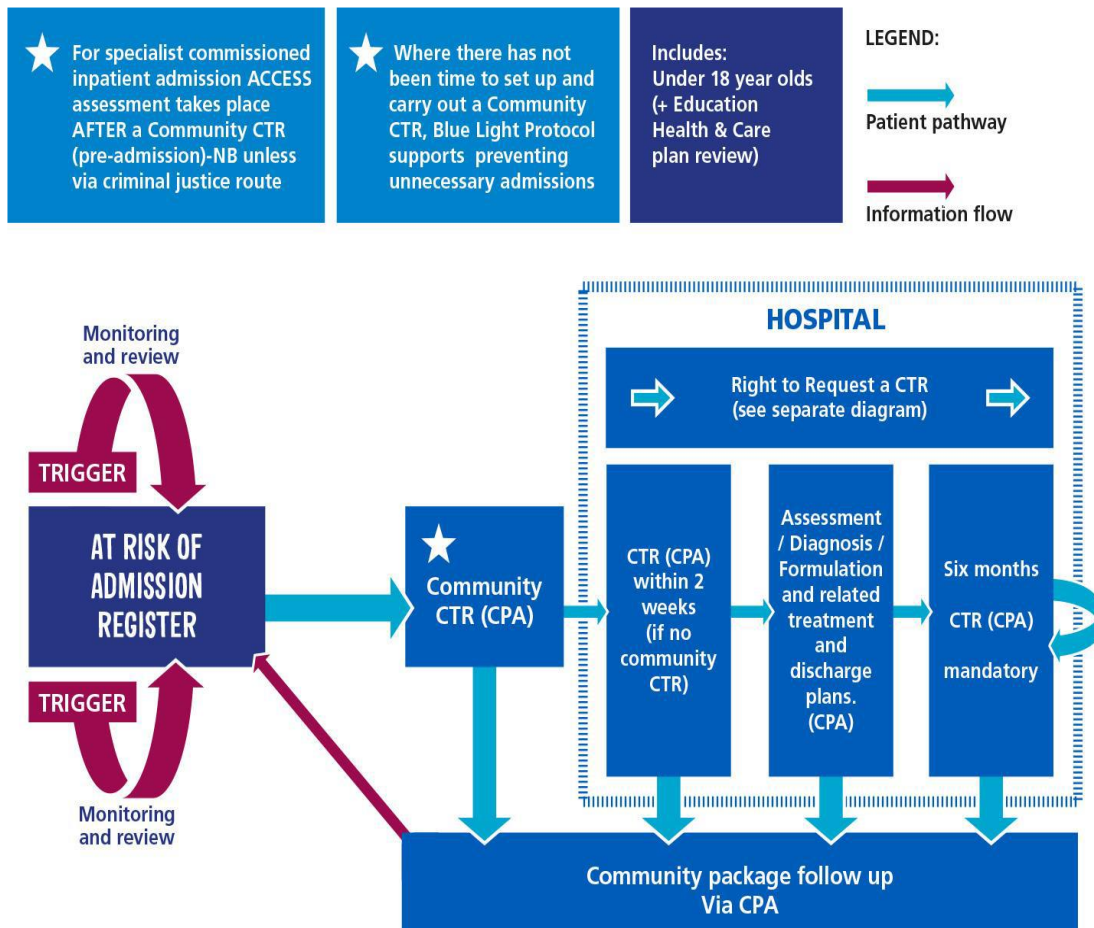
5.9 NHS England CTR Policy in Summary

5.10 The CTR process is triggered at the point when a person is identified as 'at risk' of being admitted to a specialist learning disability or mental health inpatient setting. The CTR facilitates a process of seeking alternatives to admission if possible and, if not, follows them through any subsequent admission, period of assessment/treatment and towards discharge. This process needs to be supported by the development locally of an 'At Risk of Admission' register, which enables commissioners to ensure that the appropriate support is being provided for people in the Community. The responsibility remains with the CCG.

5.11 Pathway for CTR referral: Request and Coordination



5.12 Pathway for CTR referral: Including Timelines



6. CTR Commissioner Toolkit Templates

6.1 NHS Swindon CCG staff must access and use the Commissioner CTR Toolkit (with easy read information) in regards to:

- right to request a CTR
- consent to capture patient identifiable data and outcomes
- easy read information for the person, their carer (and their parent when a child)
- support tools pre, during and post CTR
- expert specifications
- CTR Policy
- Blue Light Protocol
- the excel template for recording all the information

6.2 As per introduction, the link to all the commissioner templates is:

<https://www.england.nhs.uk/learningdisabilities/ctr/support/commissioner/>

7. NHS E: The Blue Light Protocol

7.1 In circumstances where an admission is unplanned it is recognised that a CTR may be, on a practical level, very difficult to set up due to short time scales, level of risk and the need for urgent action.

7.2 The aim of the 'Blue Light' Protocol therefore is to provide the commissioner with a set of prompts and questions to prevent people with learning disabilities being admitted unnecessarily into inpatient learning disability and mental health hospital beds. It is also intended to help identify barriers to supporting the individual to remain in the community and to make clear and constructive recommendations as to how these could be overcome by working together & using resources creatively. The Blue Light Protocol resulting support preference is graded as:

<i>1st preference</i>	<i>Support the person at home with the relevant help taking place there. Additional support packages will be considered favourably by commissioners.</i>
<i>2nd preference</i>	<i>The person is supported in a local non-inpatient unit, using residential, or short breaks services.</i>
<i>3rd preference</i>	<i>A local inpatient service in the CCG area. Please note that mental health needs should be met in acute mental health services and underlying physical health needs in acute hospitals. Inpatient LD units should not be unnecessarily used.</i>

'Out of area placements should be avoided at all costs. If an out of area placement is suggested it needs to be approved by the commissioner in line with the contracting process and would only ever be considered when the move is justified by clinical need and / or risk management and all other avenues have been exhausted.'

7.3 The format of the 'Blue Light' meeting is most likely to be a secure teleconference to allow people to participate at short notice, although NHS Swindon CCG would advocate a face to face meeting (wherever practicable) and must make every effort to involve the person with learning disabilities or their representative/advocate and family to gain their views on what would help to avoid admission into hospital.

7.4 Clear consent must be obtained from the individual/their parent/carer or independent advocate, as notes will be made and inputted into their CPA Care Plan, risk assessment and also NHS Swindon's At Risk of Admission Register (as required by NHS England, see point 1.4). Unless stipulated, there should be no need to record the call and if required this must be clearly stated for consent in addition.

7.5 The protocol describes when this response is needed, and suggests who should attend and what discussions should take place.

Organisations need to sign up to this protocol locally to support prioritising of their time and resource to respond both flexibly and at short notice to a request for a 'Blue Light' meeting.

7.6 If an individual is at risk of admission and they are not part of the Care Programme Approach pathway, it is likely that they now meet the criteria for CPA and a care co-ordinator is to be allocated to follow up the agreed care plan. For an under 18 year old, this may trigger a review of their Education, Health and Care Plan (ECHP) and education should be involved in discussions.

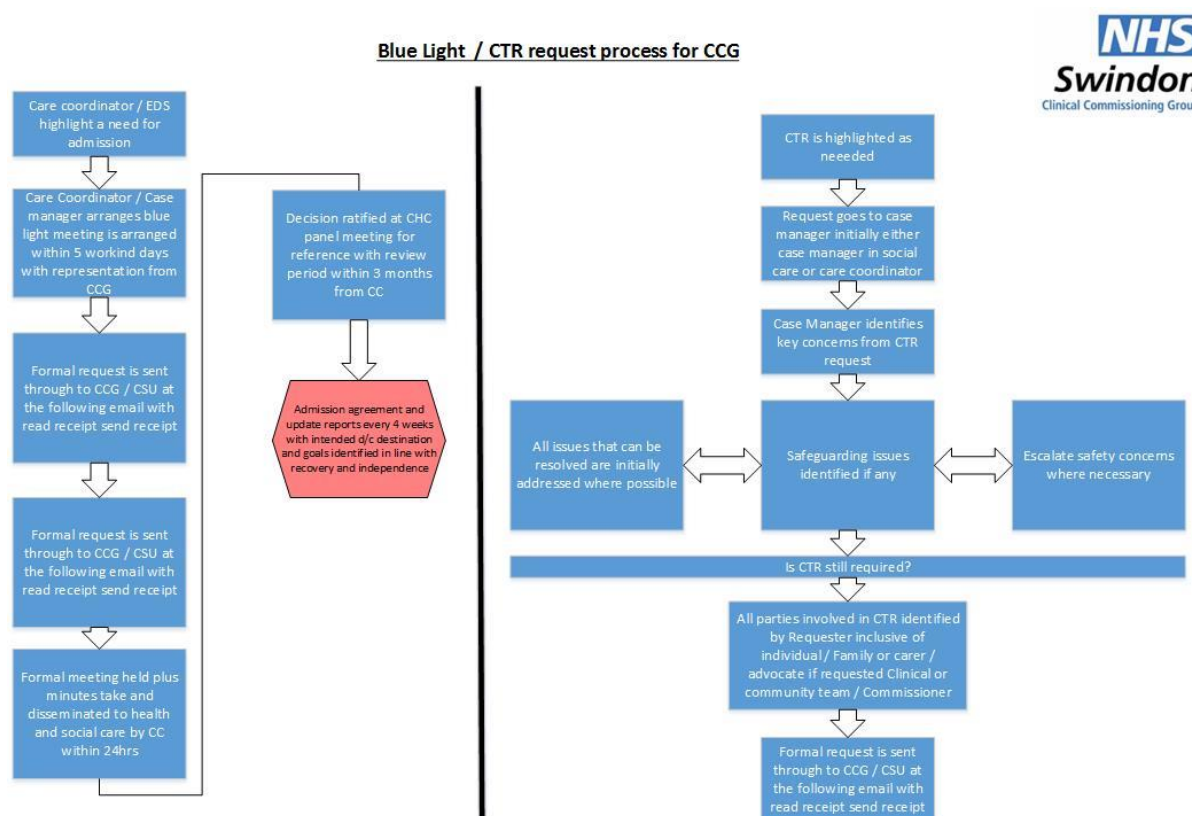
7.7 The revised care plan will require regular review in line with the local CPA Policy by the care coordinator to ascertain effectiveness and quality. The individual will now be placed on the 'at risk of admission' register if they are not already on it.

7.8 Should admission take place following a 'Blue Light meeting' a full CTR will need to take place within ten working days.

7.9 Further information and guidance on arranging and conducting a Blue Light Meeting can be found as follows:

<https://www.england.nhs.uk/wp-content/uploads/2015/10/ld-blue-light-protocol.pdf>

7.10 NHS Swindon CCG Process Map for CTR and Blue Light Protocols



8. Roles and Responsibilities outlined within Clinical Commissioning Group

8.1 Joint Children's Commissioner and Community Commissioning Lead:

- To comply with this policy and national guidance
- To nominate an appropriate representative of the CCG to attend CTR meetings where necessary and who has delegated authority to make immediate agreement on placements and funding as per guidance
- Population and management of the locked down and secure 'At Risk' Register with Quality Team support when required

- Ensure that consent has been received by the patient, and securely saved within their dedicated folder in the NHS Swindon CCG IT M Files
- Liaison with NHS England as required (for CTR coordination)
- To provide quarterly update reports to the Commissioning for Quality Meeting
- To report any concerns directly to the Executive Nurse who is also the Caldicott Guardian for the CCG.
- To report any Blue Light Meetings to the SCCG LD email: UrgentLD@nhs.net
- Reporting of all impending Blue Light and CTR's to the Quality Lead for Projects, Quality Support Manager and also the Associate Director of Urgent Care for monitoring and reporting requirements
- To ensure that all patient data is handled in line with NHS Swindon CCG Information Governance Policies and Procedures
- To report any breaches as per NHS Swindon Information Security Incidents Procedure, Information Governance Policy and also Information Security Policy.

8.2 Quality Lead for Projects and Quality Support Manager:

- Supporting the population of the At Risk Register via the email alerting system set up for UrgentLD@nhs.net
- Submission of weekly and regional data to NHS England (by protected and secure access to the At Risk Register) –NHS Swindon link only: [NHS SCCG At Risk of Admission Register template](#)
- To ensure that all patient data submitted to NHS England is in line with the NHS Swindon CCG Information Governance Policies and Procedures

8.3 NHS England

8.3.1 CTR Governance and Coordination as per NHS E letter dated 26 May 2016 as an NHS Swindon CCG link only:

[2016 05 FW CTR Process for comment by 2nd June and MOJ process](#)

9. Training

9.1 Training would be bespoke and only for staff directly responsible for the management of the CTR process, in accordance with their needs.

10. Equality and Diversity

10.1 Positive Equality implications of the policy are anticipated to ensure that individual needs are met.

10.2 NHS Swindon CCG is aligned to NHS England's review and findings at the time of writing this policy:

10.3 NHS England 'Equality and Health Inequalities Statement:

Promoting equality and addressing health inequalities are at the heart of NHS England's values. Throughout the development of the policies and processes cited in this document, we have:

Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and

Given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.'

11. Monitoring

11.1 Policy compliance remains the responsibility of the relevant NHS Swindon CCG Commissioner and ultimately with the Executive Nurse.

11.2 Regular Information Governance spot checks will be carried out; to ensure compliance with the NHS Swindon CCG Information Governance Policies and Procedures.

11.3 All Information Governance breaches will be reported to the CCG Corporate & Information Governance / Risk Manager; who will assess and report (according to the national requirements) and all breaches will be monitored by the NHS Swindon Information Governance Steering Group. Providers are expected to follow their own policies and procedures.

11.4 Further NHS Swindon guidance and policies can be found on the intranet:

<http://nwww.swindonccg.nhs.uk/index.php/corporate/information-governance#policies>

12. Review

12.1 The policy is to be reviewed in accordance with national changes mandated by NHS England, and also in alignment with any identified issues or concern. It may also require review once the new Community Commissioning Lead and Joint Children's Commissioner Post holders have commenced. The responsibility will be delegated by the Executive Nurse

13. Dissemination

13.1 Distribution of the policy to relevant staff will be led by the Quality Lead for Projects, by varying methods to ensure delivery and understanding. Wider provider dissemination will be the responsibility of the Associate Director for

Urgent Care, the Mental Health Commissioner and the Community Commissioning Lead.

14. Implementation

14.1 The Executive Nurse is ultimately responsible for making sure that the policy is enacted and monitored, and will be supported by the Director for Urgent Care and the Quality Lead for Projects.

15. References to other documents

15.1 References and links are within the relevant sections for ease of access and signposting for the reader:

- NHS England Care and Treatment Review: Policy and Guidance
- NHS England Blue Light Protocol
- NHS Swindon CCG Information Governance Policies and Procedures

Appendix A

Management Flow Chart for People with a Learning Disability and or Autism Who Are Displaying Escalating and Challenging Behaviour that Requires Urgent Review

