

# Care Programme Approach (CPA)

The Care Programme Approach (CPA) is used to plan many people's mental health care. This factsheet explains what it is, when you should get and when it might stop.



KEY POINTS

- The Care Programme Approach (CPA) is a system that says how mental health services should support you.
- Community Mental Health Teams / Recovery Teams, Assertive Outreach Teams and Early Intervention Teams are likely to use CPA.
- You may get support under CPA if you are very unwell and have complex needs. Local mental health services will have policies about who gets help under CPA.
- You should get a care coordinator who plans your care and support. You will review the plan regularly to see if your needs have changed.

**This factsheet covers:**

1. [What is the Care Programme Approach \(CPA\)?](#)
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## 1. What is the Care Programme Approach (CPA)?

Being on the Care Programme Approach (CPA) means that you will have a care coordinator. Your care coordinator might be a social worker, community psychiatric nurse (CPN) or an occupational therapist. They will work with you to write a 'care plan', which will set out how the NHS will support you.

'Secondary mental health services' use CPA. This is the term used to mean mental health services that are more specialist than your GP. The following secondary mental health services are common in most areas of England.

- Community Mental Health Teams (CMHTs), also known as 'Recovery Teams'
- Assertive Outreach Teams
- Early Intervention Teams
- Crisis and Home Treatment Teams (in some areas these teams may use CPA, but it is not common)

## 2. Who gets help under CPA?

The CPA guidance says that you should get help under CPA if these things apply to you.<sup>1</sup>

- Severe mental illness, including personality disorder
- Problems with looking after yourself including:
  - self-harm, suicide attempts, harming other people including breaking the law,
  - a history of needing urgent help,
  - not wanting support or treatment, and
  - vulnerability such as financial difficulties, physical or emotional abuse or being open to exploitation.
- Severe distress at the moment or in the past
- Problems working with mental health services now or in the past
- Learning disability or drug or alcohol misuse as well as a mental illness
- Services from a number of agencies, such as housing, physical care, criminal justice or voluntary agencies
- Recently been 'sectioned' under the Mental Health Act 1983 or you are detained at the moment
- Recently been put in touch with the Crisis Team or are getting their help at the moment

- You need a lot of support from carers
- You care for a child or an adult yourself
- You experience disadvantage or difficulties because of:
  - parenting responsibilities,
  - physical health problems or disability,
  - housing problems,
  - problems finding or staying in work,
  - mental illness significantly affecting your day-to-day life, and
  - immigration status, language difficulties, sexuality or gender issues because of your ethnicity.

Local teams do not have to follow the guidance above, and will have their own policies. Their policies are likely to be similar, but may be slightly different in parts. You may find it helpful to ask them how they make their decisions. You could ask them for a copy of their CPA policy. Sometimes NHS Mental Health Trusts will make their policies available on their websites.

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### 3. What do I get under CPA?

#### Your care coordinator

CPA means that you will have regular contact with a care coordinator. Your care coordinator should:

- fully assess your needs,
- write a care plan which shows how the NHS and other organisations will meet your needs, and
- regularly review your plan with you to check your progress.

Your care coordinator should think about all your needs.

- Your mental health needs
- Medication and side effects
- Employment, training or education
- Personal circumstances including family and carers
- Social needs
- Physical health
- Risk to yourself or others
- Problems with drugs or alcohol

Your care plan should say who your care coordinator is. This is the person who is responsible for organising and monitoring your care. Normally, you will see your care coordinator more often than other NHS staff.

Care coordinators can be social workers, community psychiatric nurses (CPN) or occupational therapists.

### **Can I choose my care coordinator?**

You cannot choose your care coordinator. But if you have specific needs then the team should try to meet them. For example, the gender of your care coordinator may be important to you if you have trust issues because of past experiences.

You should be able to choose a care coordinator that takes into account your cultural or religious needs.<sup>2</sup> Talk to the team if this is important to you.

### **What should my care plan include?**

Your care plan sets out what support you will get and who will give it to you. Your care coordinator should listen to your views about what you think you should get.

Your needs could be met in a number of ways depending on your choices. It could include:

- medication,
- therapy,
- help with money problems,
- advice and support,
- an occupational therapist to help with everyday living tasks,
- help with employment or training (perhaps through a local employment project),
- help from a 'support, time and recovery' (STR or 'STAR') worker.
- help with housing (for example, your care coordinator could put you in touch with a housing advice service or arrange practical support from a 'floating support' service), and
- 'community care services' such as support at home and help with getting out and about.

Your care coordinator should offer you a copy of your care plan. They will send a copy to your GP. Your carer or relatives can also have a copy if you want them to.<sup>3</sup>

Your care plan should include details of what to do in a crisis. This could include a crisis line number that you could ring. There should also be a review date, which should be at least once a year.<sup>4</sup>

### **Equality and Care**

Your assessments, care plan and reviews should take your needs into account. This includes your age, disability, gender, sexual orientation, race and ethnicity and religious beliefs.<sup>5</sup>

## What about my physical health?

Research has found that people with mental illnesses are at a higher risk of physical health conditions such as obesity, heart disease and diabetes.<sup>6</sup> Medications used in mental health can cause weight gain or increase the risk of diabetes.

Assessing your physical health needs should be a priority.<sup>7</sup> Your care coordinator should help you to get support for your physical health. Your care plan should look at the effect that mental health symptoms and treatments can have on your physical health. It should also look at the effect that physical symptoms can have on your mental health.

### Direct payments

If you have community care needs, such as needing help in social situations, your care coordinator may talk to you about the option of getting 'direct payments'. This means you can choose how you get the support you need.

You can find out more information on [www.rethink.org](http://www.rethink.org) about:

- Direct Payments
- Social care – eligibility and assessment

Or call 0121 522 7007 and ask us to send you a copy.

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## 4. When will my CPA stop?

Every time you have a review, your care coordinator will think about whether you still need CPA. If your mental health team thinks that you no longer need help, your CPA will end.

Your CPA should not stop too early just because your health seems to be stable. They should think about whether the extra support you are getting from CPA is keeping you well. The care coordinator should do a thorough risk assessment before taking you off CPA.<sup>8</sup>

Before the team ends your CPA, your care coordinator will need to do the following.

- Do an assessment of your needs
- Hand over your care to another professional. This will normally be your GP or psychiatrist
- Share information with professionals and your carer if you want them to know
- Write plans for review, support and follow-up if needed
- Tell you what to do and who to contact if your health gets worse

If your CPA stops, you can still get help from the NHS and social services. For example, you could still get help from a psychologist who works at the mental health team. These services should not stop helping you just because you are not on CPA.

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## 5. What support can I get if I am not on CPA?

If your CPA stops you can still get the following support.

- Treatment from a psychiatrist or GP
- Talking therapy
- Support from charities
- Emotional support
- Support in a crisis
- Help from social services
- Hospital treatment if necessary
- Help from advocates

Some charities or advocacy services might only help you if you are under CPA. There may be other criteria that you need to meet in order to receive the above services.

### **Help from social services**

Help from social services is sometimes called 'community care' or 'social care'. It can include getting help at home and support getting out and about.

Getting social care can be complicated. Social services may not assess you. They may ask you to speak to someone in a mental health team instead. Staff should not prevent you from getting social care just because you are not on CPA. You are entitled to an assessment if it seems that you might need help because of your illness.

You can find more information about '**Social care – assessment and eligibility**' at [www.rethink.org](http://www.rethink.org). Or call 0121 522 7007 and ask us to send you a copy.

### **Free public transport - 'concessionary travel'**

You do not have to be on CPA in order to get free or reduced fares on public transport. If your local council refuses you 'concessionary travel' on the grounds you are not on CPA, you can complain. You could also contact your local councillor or MP to see if they could support you with this.

### **Benefit entitlement**

The Department for Work and Pensions (DWP) will not turn down or reduce your benefits just because you have been discharged from CPA.

If you were discharged from CPA because your health has improved then your entitlement to certain benefits might be affected. This is because some benefits are based on how your illness affects you.

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## 6. What if I am not happy with the help I am getting?

There are several reasons why you may be unhappy with the help you are getting. You may feel that:

- you should be getting help under CPA when you aren't,
- your care plan doesn't cover all of your needs,
- the services you get don't help you,
- your CPA stopped before it should have, or
- your relationship with your care coordinator could be better.

You might be able to resolve these problems by talking to your care coordinator or with the team manager. An advocate might be able help you with this. You could try searching for local advocacy services online.

You may decide that you would like to make a formal complaint about the issue you are unhappy about. The team should have a complaints policy.

You can find out more information on [www.rethink.org](http://www.rethink.org) about:

- Advocacy
- Complaints

Or call 0121 522 7007 and ask us to send you a copy.

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<sup>1</sup> Department of Health. *Refocusing the Care Programme Approach: Policy and Positive Practice Guidance*. London: Department of Health 2008. Page 13-14

<sup>2</sup> As note 1 at page 36

<sup>3</sup> As note 1 at page 19

<sup>4</sup> As note 1 at page 16

<sup>5</sup> As note 1 at page 21

<sup>6</sup> Disability Rights Commission. *Equal Treatment: Closing the Gap*. London: Disability Rights Commission 2006. Page 4.

<sup>7</sup> As note 1 at page 22

<sup>8</sup> As note 1 at p. 15

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This factsheet is available  
in large print.

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## Rethink Mental Illness Advice Service

Phone 0300 5000 927  
Monday to Friday, 9:30am to 4pm  
(excluding bank holidays)

Email [advice@rethink.org](mailto:advice@rethink.org)

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### Did this help?

We'd love to know if this information helped you.

Drop us a line at: [feedback@rethink.org](mailto:feedback@rethink.org)

### or write to us at Rethink Mental Illness:

RAIS  
PO Box 17106  
Birmingham B9 9LL

or call us on 0300 5000 927.

We're open 9:30am to 4pm  
Monday to Friday (excluding bank holidays)



Leading the way to a better  
quality of life for everyone  
affected by severe mental illness.

For further information  
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### Need more help?

Go to [www.rethink.org](http://www.rethink.org) for information on symptoms, treatments, money and benefits and your rights.

### Don't have access to the web?

Call us on 0121 522 7007. We are open Monday to Friday, 9am to 5pm, and we will send you the information you need in the post.

### Need to talk to an adviser?

If you need practical advice, call us on 0300 5000 927 between 9:30am to 4pm, Monday to Friday. Our specialist advisers can help you with queries like how to apply for benefits, get access to care or make a complaint.

### Can you help us to keep going?

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