

# HPFT's First Episode Psychosis (FEP) Carer Pathway-draft

For FEP Care-Co-ordinators to be used in conjunction with the Trust's Carers' Care Pathway

All FEP carers identified at the point of initial assessment

1. Their knowledge, perspective about the service-user and needs will be sought throughout the assessment process
2. Will be offered individual time to meet with professionals separately with the service-users' consent but this is not essential depending on situation
3. Will be provided a 'Carers Information' pack
4. If there is **non-engagement** of the service user at point of assessment and there is 'suspicion' of FEP, an **indirect service** will be offered to the service-user by the engagement of the service-user's carers
5. Will be offered a formal carer's assessment

Following initial assessment carers will:

1. Have contact with the service-user's care co-ordinator at **least once a month** or more frequently depending on need
2. Have an **annual review** of their needs
3. Be invited to CPA reviews with service-user's consent
4. Be offered a formal carers assessment if their needs change
5. Be offered a choice of **all of the four interventions** below:

'Peer' support  
by another FEP  
carer

Signposting to a  
'Carer-led'  
support group  
held every month

Referral to a  
Structured 'Carer  
Education and  
Support'  
Programme (runs  
twice/year)

Family  
Interventions i.e.  
at least 10 planned  
sessions

Discharge from the FEP pathway

Discharge **back to GP**  
after **completing**  
**treatment?**

1. Invited to the CPA discharge meeting with service-user's consent
2. Contingency plan agreed with carers to enable rapid re-assessment

Transfer to **another**  
**HPFT team?**

1. Invited to the handover/CPA meeting with service-user's consent
2. Provided information about the new team and contacts

Transfer to **another**  
**area?**

1. Carer needs are addressed and a carer support plan considered during the transfer process
2. Invited to the handover/CPA meeting with service-user's consent

Discharge due to **non-**  
**engagement?**

1. Only through prior agreement with the carer and/or referrer
2. Contingency plan agreed with carers to enable rapid re-assessment