

# Continuing healthcare placements policy

**Joint Health Overview & Scrutiny Committee**

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BHR CCGs

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# Aim of tonight's presentation

- ✓ Provide members with an overview of the continuing healthcare process
  - ✓ Brief members on BHR CCGs' proposed written continuing healthcare placements policy
  - ✓ Update members on the public consultation and feedback received
  - ✓ Update members on the decision-making process.
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# What is continuing healthcare?

NHS continuing healthcare, often called CHC, is the name given to a package of ongoing care that is arranged and funded solely by the NHS for adults who have been assessed as having a 'primary health need', as set out in the Department of Health and Social Care's (DHSC) national framework for CHC.

DHSC. National framework for NHS continuing healthcare and NHS-funded nursing care. October 2018 (revised). Available at:  
<https://www.gov.uk/government/publications/national-framework-for-nhs-continuing-healthcare-and-nhs-funded-nursing-care>




# CHC eligibility and assessment

- The CCGs work to the National Framework for NHS Continuing Healthcare and NHS funded Nursing Care, which sets out the principles and processes of NHS CHC. This includes:
  - Screening for CHC
  - Assessment of eligibility for CHC
  - Decision making on eligibility
  - Care planning and delivery
  - CHC reviews
  - Requests for review of CHC eligibility
- Eligibility for NHS CHC depends on the assessed needs, and not on any particular disease, diagnosis or condition.



## CHC eligibility and assessment, cont.


- Patient, their family or carer inputs into the assessment
  - Multi-disciplinary team recommends to the CCG whether a patient meets the DHSC criteria for NHS funded CHC
  - CCG decides if the patient is eligible for CHC based on the recommendation, assessment and supporting evidence
  - Eligibility reviewed at least once a year – if needs change the package of care may change.
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# Location of care


- CHC packages are provided in different settings, including:
  - In an individual's own home – the NHS will pay for healthcare, such as services from a community nurse or specialist therapist, and personal care, e.g. help with bathing, dressing and laundry
  - In a care or nursing home – the NHS will pay, along with healthcare and personal care, for care or nursing home fees, including board and accommodation.



# Who receives CHC and where?

- Approximately 530 people in BHR currently eligible for CHC
    - Barking & Dagenham – 149 people
    - Havering – 181 people
    - Redbridge – 175 people
  - 70% of eligible patients receive CHC in a care or nursing home
  - Factors considered when deciding location of care:
    - Clinical safety
    - Support available from family or friends
    - Suitability of home setting
    - Comparable costs of home versus care or nursing home care.
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# Cost of CHC

- Cost to the local NHS of a CHC package is:
    - For care at home – cost ranges from around £70 to £8,000 per week (around £3,640 to £416,000 per year)
    - For care in a local care or nursing home – cost ranges from around £868 to £6,870 per week (around £45,136 to £357,240 per year).
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# What's changing?


## Introduction of a written CHC placements policy




# Why are we introducing a CHC placements policy?

- In line with other CCGs across England, we intend to introduce a written CHC placements policy
  - The proposed policy will:
    - Support how decisions are made about the location of CHC packages
    - Balance clinical need, wishes of patients, and the limited financial resources available to the local NHS
    - Ensure consistency, fairness and transparency in the decision-making and appeals processes
  - Development of the policy is being led by our GP clinical leads and will align to the DHSC's national framework.
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# Who will the proposed policy apply to?

- **Will apply** to all new patients eligible for CHC, and in a few cases to existing patients whose care needs have changed considerably since their last review (e.g. if a person's condition has deteriorated and they require significant extra care)
  - **Will not apply** to anyone under 18 years – there is a Children's Continuing Care to adult CHC transition process that helps ensure issues over care provision or cost are identified early - or people assessed as needing 'fast-track' CHC (i.e. care which is provided to people who have a rapidly deteriorating condition and may be approaching the end of life).
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# How will the proposed policy affect patients?

- **Eligibility to receive CHC will not change** - all new and existing patients will continue to receive the most clinically appropriate care for their assessed needs
  - Where a patient's care needs are very high it's likely the clinical decision will be that their care would be most appropriately provided in a care or nursing home, rather than in their own home
  - For a small number of patients this might not be with the provider or in a location of their choice. It's expected this would be the case for around 20-25 patients a year which amounts to: 6-7 people for Barking & Dagenham and 7-9 each for Havering and Redbridge.
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# Personal Health Budgets (PHBs)

- All people in receipt of a CHC home care package are now offered a PHB
  - Three types of PHB – notional, third party or direct payment
  - Notional budget is the default option – everyone will have a personalised support care plan and know how much their package costs
  - Part of the NHS personalisation agenda which includes other areas such as social prescribing
  - BHR CCGs to support an increasing number of direct payment and third party PHBs where possible.
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# What's included in the proposed policy?

- Key content of the proposed policy includes:
    - Considerations taken into account when deciding the most appropriate location for a CHC package
    - Exceptional circumstances taken into account when deciding the most appropriate location for a CHC package
    - How CHC packages are funded
    - Review process for CHC packages
    - Appeals process for when patients and/or their families/carers disagree with a decision.
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# Funding of CHC packages


- The proposed policy explains that BHR CCGs will generally not fund a CHC package in a person's home if the cost of doing so is more than 10 per cent higher than providing the same care in a care or nursing home
  - Where exceptional circumstances may apply, the local NHS will consider whether it should fund a placement that will cost more than the 10 per cent limit
  - During the public consultation we asked for views on what a reasonable upper cost limit is.
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# Appeals process


- The proposed policy explains how patients or their family/ carers can appeal decisions made about the location only of their CHC package
  - Appeals about CHC eligibility are subject to a separate process set out by the DHSC
  - Appeals will be heard by a panel consisting of lay members and clinicians
  - During the public consultation, we asked for views on the membership of the appeals panel and the amount of time individuals have to make an appeal.
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# Public engagement

- 12 week public consultation held: 8 July to 30 September 2019
  - Pre-engagement briefings held with the Chairs of the BHR Health Scrutiny Committees and Healthwatch organisations
  - People currently receiving CHC in their own home were written to and invited to attend an engagement workshop
  - E-copies of proposed policy, consultation document and questionnaire sent to GP practices, care/nursing homes, trusts, councils, MPs, Healthwatch, community and voluntary groups, and Patient Engagement Forums
  - Worked closely with Healthwatch and community and voluntary groups
  - Three engagement workshops held (one in each BHR borough) – attended by 31 representatives from local patient, community and voluntary groups.
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# Public engagement, cont.


- Email sent to scrutiny officers, Healthwatch and Councils for Voluntary Services (CVS) requesting suggestions of additional community groups to invite to the engagement workshops
  - Articles included in council, Healthwatch and CVS newsletters, promoting the consultation and engagement workshops
  - Article and dedicated webpage included on CCGs' websites
  - Regular tweeting to promote consultation and encourage responses
  - Questionnaire distributed to 470 BHR members of the East London Citizens' Panel
  - Presentations to B&D HSC and HWBB and at GP educational meetings
  - Received 100+ consultation responses.
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# Engagement themes

Many of the key themes and suggestions raised during the engagement workshops focused on the wider CHC process:

- Signposting of support and information for families/carers
- Advocacy essential for patients/families/carers
- Potential impact of CHC decisions on and inclusion of family's needs
- Importance of maintaining personalised care
- Importance of holistic care
- Inclusion of VCSE organisations within the CHC process
- CHC policy and process must be transparent and fair.

All feedback from the engagement activity, including specific feedback on the policy content, will be included in the engagement report and considered as part of the decision-making process.



# Next steps

- Development of an engagement report, which will include:
  - Analysis of all questionnaire responses (online and postal) received
  - Inclusion of all written responses received (e.g. emails, letters and phone calls)
  - Feedback and themes from the engagement workshops
- Development of a Final Equality Impact Assessment (EIA)
- Development of a decision making business case (DMBC), including the recommendation of the final content of the placements policy
- BHR joint committee of governing bodies will consider the DMBC, engagement report, Final EIA and other supporting information before making a decision about the final content of the policy
- Decision-making meeting to be held on 28 November 2019
- Final decision and the documents considered by the joint committee will be published on the CCGs' websites.

**Any questions?**

