Lincolnshire COUNTY COUNCIL Working for a better future		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE		
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Council	Council	Council	Council	
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District Council	District Council	District Council	Council	

Open Report on behalf of NHS Lincolnshire Clinical Commissioning Group

Report to	Health Scrutiny Committee for Lincolnshire		
Date:	16 February 2022		
Subject:	NHS Continuing Healthcare		

Summary:

The Committee has previously agreed to include an item in its work programme on NHS Continuing Healthcare, which is defined as a package of ongoing care that is arranged and funded solely by the NHS, where an individual has been assessed and found to have a 'primary health need'.

This report explores how the local NHS implements the national arrangements for NHS Continuing Healthcare.

Actions Requested:

The Committee is requested:

- (1) To note the contents of this report.
- (2) To note that Lincolnshire Clinical Commissioning Group is obliged to follow national guidance, as set out in *National Framework for NHS Continuing Healthcare and NHS-Funded Nursing Care*, (revised October 2018), in its implementation of NHS Continuing Healthcare arrangements.
- (3) To note that no changes are currently proposed to the eligibility arrangements for NHS Continuing Healthcare.

1. Background

NHS Continuing Healthcare Definition

NHS Continuing Healthcare is defined as a package of ongoing care that is arranged and funded solely by the NHS in circumstances where an individual has been assessed and found to have a 'primary health need' as set out in this National Framework. This care is provided to an individual to meet their health and associated social care needs that have arisen as a result of disability, accident or illness. The actual services provided as part of the package should be seen in the wider context of best practice and service development for each client group. Eligibility for NHS Continuing Healthcare is not determined by the setting in which the package of support can be offered or by the type of service delivery.

Further details on the arrangements for NHS Continuing Healthcare (together with NHSfunded Nursing Care) is found in the Department of Health and Social Care's *National Framework for NHS Continuing Healthcare and NHS-Funded Nursing Care,* (revised October 2018).

Primary Health Need

'Primary health need' is a concept developed by the Secretary of State for Health and Social Care to assist in deciding when an individual's primary need is for healthcare (which it is appropriate for the NHS to provide under the 2006 Act) rather than social care (which a local authority may provide under the Care Act 2014). To determine whether an individual has a primary health need, there is an assessment process, which is detailed in the National Framework. Where an individual has a primary health need and is therefore eligible for NHS Continuing Healthcare, the NHS is responsible for providing for all the individual's assessed health and associated social care needs, including accommodation, if that is part of the overall need.

NHS-Funded Nursing Care

NHS-Funded Nursing Care is the funding provided by the NHS to care homes with nursing to support the provision of nursing care by a registered nurse. Since 2007 NHS-funded Nursing Care has been based on a single band rate. In all cases individuals should be considered for eligibility for NHS Continuing Healthcare before a decision is reached about the need for NHS-funded Nursing Care.

Roles of the NHS and Local Authorities

The National Framework for NHS Continuing Healthcare and NHS-Funded Nursing Care specifies the roles of clinical commissioning groups, local authorities, NHS England, as well as the providers of care. The document refers to an initial checklist used to determine whether a full assessment of eligibility is required; as well as the full assessment and review processes. NHS England's role includes making requests to an independent review panel to review decisions made by clinical commissioning groups.

Law and Regulations

The law and regulations are frequently cited throughout the *National Framework for NHS Continuing Healthcare and NHS-Funded Nursing Care.* The document also includes accounts of two legal judgements as appendices. While NHS continuing healthcare, like most other NHS services, is free at the point of delivery, social care is means-tested. This has always led and will continue lead to an element of contention.

The National Framework for NHS Continuing Healthcare and NHS-Funded Nursing Care is available at the following link:

https://www.gov.uk/government/publications/national-framework-for-nhs-continuinghealthcare-and-nhs-funded-nursing-care#history

2. Continuing Healthcare in Lincolnshire

Lincolnshire Clinical Commissioning Group (CCG) has an 'in-house' Continuing Healthcare team. Prior to April 2020 the team was part of a commissioning support unit, which provided support to the four predecessor clinical commissioning groups up to 31 March 2020. The team transferred from the commissioning support unit to Lincolnshire CCG in April 2020.

The Lincolnshire CCG Continuing Healthcare team now consists of five main areas: the Clinical Team; the Continuing Healthcare Quality Team; the Business Support and Personal Health Budget Team; plus small-dedicated Contracting and Finance Teams. In total more than 60 staff work within the Lincolnshire CCG Continuing Healthcare Team. Overall oversight and management of this team is through the CCG's Associate Director of Nursing and Quality, reporting to the CCG Director of Nursing. The roles of each team are briefly summarised below:

The Clinical Team

This is a team of Clinical Assessors, managed by the Continuing Healthcare Clinical Lead. This also includes a small Children's Team for Children Continuing Care. The Adults' Team cover in sub-teams the four localities of the CCG. All will undertake initial assessment of an individual's care needs once referred, in conjunction with the multi-disciplinary team including Social Care.

A nationally approved 'decision support tool' is used to inform the outcome of this full assessment. This assessment through individualised care and support planning, determines the best available care provision and/or package to meet those needs – with subsequent continuing healthcare assessor case management, if appropriate, to ensure regular reviews of care provision, to ascertain that care put in place is still meeting needs.

An individual may be eligible for fully funded Continuing Healthcare, Funded Nursing Care (if in a Care Home), or Joint Funded Care with the County Council. Alternatively, their care needs may be deemed to be fully met by statutory health services and therefore will not receive additional funding from the NHS, but an individual may still receive social care funding, if they are eligible. Full Continuing Healthcare funding is awarded when the individual is assessed to have a primary health need: this means that an individual's health needs are so complex that they cannot be met by statutory health services and/or social care provision.

In palliative care situations where an individual's condition is deemed to be rapidly deteriorating by an attending clinician, a 'fast track' process is in place to circumvent the necessity for the full assessment described above and to get Continuing Health Care in place quickly, so the individual receives promptly the full care they need at the end stage of their life and in their preferred place, wherever possible.

Casalaad Turaa	2021								
Caseload Type	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Fast Track (Active)	208	201	244	216	232	210	203	253	237
Own Home	145	129	168	138	158	154	119	170	142
Care Home	63	72	76	78	74	56	84	83	95
Continuing Healthcare	449	441	444	432	437	429	426	424	420
Own Home	137	136	131	137	142	141	139	143	141
Care Home	312	305	313	295	295	288	287	281	279
1:1 (Care Home)	25	24	24	24	24	24	24	24	24
Joint Fund	82	85	86	84	81	79	76	78	81
Funded Nursing Care	707	716	717	742	774	773	771	754	739
Children	71	66	66	68	68	63	63	63	63
Acquired Brain Injury	10	10	12	12	12	12	13	18	18
Total	1,527	1,519	1,559	1,554	1,604	1,567	1,557	1,590	1,558

The table below provides a breakdown of type of care package provided, for the nine months, April to December 2021.

The Continuing Healthcare Quality Team

The Continuing Healthcare Quality Teams is a small team consisting of the Continuing Healthcare Safeguarding Lead; Liberty Protection Safeguarding Team and Clinical Assessors. This team manage both the internal and external training provision for Continuing Healthcare; complaints management; disputes management; independent review management; hospital discharge arrangements for patients with Continuing Health Care needs; and also the quality review, audit and assurance of Continuing Healthcare providers and also of internal Continuing Healthcare processes and procedures.

The Continuing Healthcare Business Team

The Continuing Healthcare Business Team is managed by the Continuing Healthcare business and personal health budget lead and covers: brokerage of all individual care packages; single point of access function within Continuing Healthcare; performance delivery and monitoring for Continuing Healthcare; risk management; activity and quality reporting; management of freedom of information requests and safeguarding adult reviews; national reporting; also leading the roll out, set up and monitoring of Personal Health Budgets for Continuing Healthcare and other services.

The Contracting Team

The contracting team ensures satisfactory contractual arrangements and contract delivery monitoring are in place with all care home and home care providers.

The Finance Team

The Finance Team provides allocated budget governance; makes payments to providers; and monitors expenditure.

Expenditure on NHS Continuing Healthcare in Lincolnshire

The following table sets out details of the expenditure on Continuing Healthcare in Lincolnshire for 2020/21.

2020/21 Total Actual Spend					
	£'000				
Fully Funded Nursing	37,946				
Fast Track	7,543				
Lincolnshire County Council - Section 75 Covid-19 / Hospital Discharge Programme	6,687				
Joint Funded	1,365				
Children	4,495				
Funded Nursing Care	10,626				
Running Costs – Continuing Health Care	2,997				
TOTAL including Covid-19 / Hospital Discharge Programme	71,660				
TOTAL Excluding Covid-19 / Hospital Discharge Programme	64,973				

There has been particular focus with in-housing of the service on ensuring all areas described above are operating effectively and efficiently. Initially on transfer there were many vacancies in the team which has since been successfully, albeit gradually, addressed with ongoing recruitment.

There is a monthly CCG Continuing Healthcare Programme Board attended by representatives of the teams above and partner stakeholders, including Lincolnshire County Council representation. There full reporting is provided on activity and performance in all areas, for assurance, support to the team and to enable a continuous improvement approach.

In wave 1 of the pandemic in 2020, Continuing Healthcare initial assessments were suspended for six months to enable a large number of Continuing Healthcare staff to assist in other priority areas. Essential Continuing Healthcare work, for example care reviews, was maintained with staff adapting to working virtually throughout the pandemic where necessary and appropriate for service users. This did mean a large backlog of full initial assessments accrued from wave 1, which was fully addressed by March 2021, thanks to the very hard work of the Continuing Healthcare team through challenging circumstances. Continuing Healthcare will always be a very busy team because of the constant daily need for individual holistic care assessments and reviews with the securing of appropriate care provision for individuals with increasing health needs, either on discharge from hospital or in the community.

3. People at the Heart of Care – Adult Social Care Reform White Paper

The Government published *People at the Heart of Care – Adult Social Care Reform White Paper* on 1 December 2021. As is clear from the title of this white paper, it is focused on adult social care, and there are no proposals currently to in the white paper or elsewhere to reform eligibility for NHS-funded continuing healthcare.

4. Consultation

This is not a direct consultation item.

5. Conclusion

The Committee is requested to consider the information presented on NHS Continuing Healthcare.

6. Background Papers

No background papers were used to a material extent in the compilation of this report.

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