

Question and Answer on NHS Continuing Healthcare with Nurse, Vikki Weller

Q. What is NHS Continuing Healthcare (NHS CHC) funding and who is eligible for it?

A. You can find all the details about Continuing healthcare in the document: National Framework for Continuing healthcare and NHS funded Nursing care (July 2022 revised) Department of Health.

NHS Continuing Healthcare (CHC) means a package of ongoing care that is arranged and funded solely by the National Health Service (NHS) where the individual has been assessed and found to have a 'primary health need' as set out in this National Framework. Such care is provided to an individual aged 18 or over, to meet 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

Q. Who do I speak to initiate the process of a NHS Continuing Healthcare assessment?

A. The Checklist can be completed by a variety of health and social care practitioners, who have been trained in its use. This could include, for example: registered nurses employed by the NHS, GPs, other clinicians or local authority staff such as social workers, care managers or social care assistants. It is for each Integrated Care Board and local authority to identify and agree who can complete the tool but it is expected that it should, as far as possible, include staff involved in assessing or reviewing individuals' needs as part of their day-to-day work.

Q. How long does the process of assessment take and how frequently is it reviewed?

A. The overall assessment and eligibility decision- making process should, in most cases, not exceed 28 calendar days from the date that the Integrated Care Board receives the positive Checklist (or, where a Checklist is not used, other notice of potential eligibility) to the eligibility decision being made.

Where an individual has been found eligible for NHS Continuing Healthcare, a review should be undertaken within three months of the eligibility decision being made. After this, further reviews should be undertaken on at least an annual basis, although some individuals will require more frequent review in line with clinical judgement and changing needs.

Q. If I am eligible for NHS CHC funding, is it means-tested and will I have to contribute towards the cost of my care?

A. If you are eligible for NHS Continuing Healthcare, you should not have to contribute towards the cost of meeting your assessed health and care needs

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We would like to thank Vikki for taking the time to answering our questions. We had some more questions for her which we will publish in our Summer Newsletter

