

Social Care Services Board 23 June 2016

NHS Continuing Health Care

Purpose of the report: Performance Management/Policy Development and Review

This report provides an overview regarding NHS Continuing Health Care (CHC) and how it is operated in Surrey. The report reflects progress and issues as they relate to Surrey County Council. The Board is asked to note its content and consider the recommendation.

Introduction:

- 1. Since the creation of the welfare state it has been necessary to attempt to distinguish between health care (provided by the NHS and free at the point of delivery) and social care (provided by local authorities and means tested). The mechanism used to achieve this in England and Wales is the National Framework for Continuing Health Care 2012.
- 2. NHS Continuing Health Care (CHC) provides a package of ongoing care that is arranged and funded solely by the NHS where the individual has been found to have a 'primary health need'. There is special provision within CHC for End of Life Care so that individuals who are at the end of their lives can access the care that they need. When an individual is eligible for CHC the NHS must meet all of their needs (including social care needs) and care can be delivered in any setting.

Continuing Health Care and Local Authorities

- 3 Continuing Health Care is important to Local Authorities for a number of reasons:
- 4 Local Authorities must operate within the law. There are upper limits to the type and amount of care and support that a local authority can provide and these limits are set out in the Care Act 2014 and case law.

Essentially, local authorities should not fund or provide care for individuals whose needs are the responsibility of the NHS to meet.

- 5 The council also needs ensure its resources are effectively used; supporting Surrey residents whose assessed needs meet the eligibility criteria as defined in the Care Act 2014.
- 6 There is an expectation from government, via NHS England, that local authorities are key partners in working with the NHS in ensuring that the National Framework for CHC is applied consistently.
- 7 Correctly applying the National Framework for CHC also helps the council to obtain the best outcomes for Surrey residents.
- 8 Finally, CHC has an important role to play within the whole Surrey health and social care system in that, when used effectively, it can have a key role in preventing hospital admission and assisting timely hospital discharge.

Continuing Health Care Arrangements in Surrey

- 9 The NHS in Surrey has a hosting arrangement (via an annual Service Level Agreement) whereby Surrey Downs Clinical Commissioning Group (SDCCG) host the CHC assessment and decision making arrangements on behalf of all of the CCGs in Surrey. The hosting agreement also includes SDCCG having the responsibility to commission care arrangements for individuals eligible for CHC
- 10 The governance and accountability for this agreement lies with the Surrey NHS Continuing Healthcare Programme Board. All 6 CCG relevant Directors attend this quarterly Board and Paul Morgan, Surrey County Council Head of Continuing Care, is the council's representative.
- 11 Surrey County Council (SCC) Adult Social Care (ASC) established a County Wide Continuing Care Team in 2009. This dedicated resource exists in order to:
 - Ensure a "consistent offer" to Surrey residents
 - Act as a point of expertise, supporting 30 teams across Adult Social Care, Community Mental Health Recovery Service, acute teams, transition and managers.
 - Act as a single point of contact within the council for CCGs
 - Undertake a practice development role to SCC staff and joint training with CCG
 - Provide expertise within SCC to take forward complex disputes
 - Support CCGs in reviewing CHC patients

Working in Partnership with SDCCG

12. In line with the ASC strategy to work in partnership, Adult social care take a partnership based approach to working with our CCGs on CHC. We undertake joint CHC assessments and joint CHC Reviews. We also

attend CHC Eligibility Panels and commission joint training. This year SCC has been working with our NHS CHC partners to review and update a suite of joint policies concerning CHC. A joint work plan has been devised and monthly joint CHC Operational meetings are held. There is also a regular meeting between the Heads of Continuing Care at SCC and SDCCG. We also have regular meetings and liaison with neighbouring CCGs who have responsibility for Surrey residents.

13 CHC can be an area of tension and this is particularly evident when one organisation believes that funding responsibility for an individual lies with the other organisation. Where agreement cannot be reached in such circumstances there is a local Disputes Resolution policy so that a final outcome can be determined.

Potential Areas for Integration

- 14 It is essential that SCC is always open to exploring areas where, by working more closely with the NHS, a better experience for Surrey residents might be produced or efficiencies may be found in process or purchasing matters.
- 15 We are keen to build upon the local joint working that we have developed with SDCCG regarding CHC and link it to our wider partnership and integration approaches. Potential areas for this include Brokerage and Commissioning, Personal Health Budgets and further integration of the CHC assessment and decision making process.

Areas for further work

- 16 Historically in Surrey there has been some variation in how closely the NHS and the council work together in relation to CHC. In this aspect Surrey is no different to many health and social care communities where the status quo might change due to changes in individual or organisational relationships or budgets beginning to drive behaviours. It is important for SCC to continue to apply a consistent and lawful offer regarding CHC, irrespective of such fluctuations. This is an important area for ongoing focus and vigilance for SCC.
- 17 SCC will continue to work with SDCCG by way of implementing the joint work plan previously mentioned in Para 12 above.

Conclusions:

18 CHC is an important area of the council's work. Key outcomes include ensuring that that SCC acts within the law, that resources are properly allocated to people who need social care (rather than health care) and the best outcomes for Surrey residents are achieved. 19 CHC is an area that continues to be challenging. This is because it requires two separate systems (Health and Social Care) to operate together but to different principles. Inevitably, this can lead to contention. Irrespective of how such individuals are funded, they will be the most dependent and vulnerable residents in Surrey and we need to continue to work together to ensure that they (and their carers) receive appropriate care and support. The essential task for SCC is to continue to find ways to work in partnership with CCG whilst ensuring a consistent CHC offer to Surrey residents. SCC will continue to seek partnership and pragmatic approaches wherever it is reasonable to do so. It is important that SCC does this whilst holding a consistent and clear line that ensures that we act within the law and in accordance with the CHC National Framework

Recommendations:

20 It is recommended that the Board:

Note the importance of CHC within the work that the council undertakes

Report contact: Paul Morgan, Head of Continuing Care, Adult Social Care

Contact details: 01737 737490 paul.morgan@surreycc.gov.uk

Sources/background papers:

National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care November 2012 (Revised) – Department of Health