



Continuing NHS Healthcare Retrospective Claims

Claimant Information Leaflet and request for information

What is Continuing NHS Healthcare (CHC)?

It is a package of care arranged and funded solely by the NHS where it has been assessed that the individual's primary need is a health need. This can be provided in a care home or an individual's own home.

The Retrospective Claims Process

If an individual, or their family/representative, feels that they could have met the eligibility criteria for Continuing NHS Healthcare whilst they paid for care, then in those cases, it would be normal for an application for a retrospective review of health needs to be made. There is a process in place to review retrospective claims and this is the responsibility of Cardiff and Vale University Health Board (C&VUHB) Retrospective Nurse Investigator.

A Nurse Investigator will be responsible for collating records, formulating a chronology of need over the claim period and assessing the health needs against the CHC criteria that were in place during the claim period.

There are 3 possible routes for your claim to go down.

Matching - If your claim is agreed by the Nurse Investigator from the outset, a Decision Document is prepared to support the findings of eligibility. The decision is subject to internal peer review to ensure consistency and the full review process is supported by appropriate evidence. It is then ratified by a CHC Chairperson to ensure that process has been followed and that the evidence supports the decision.

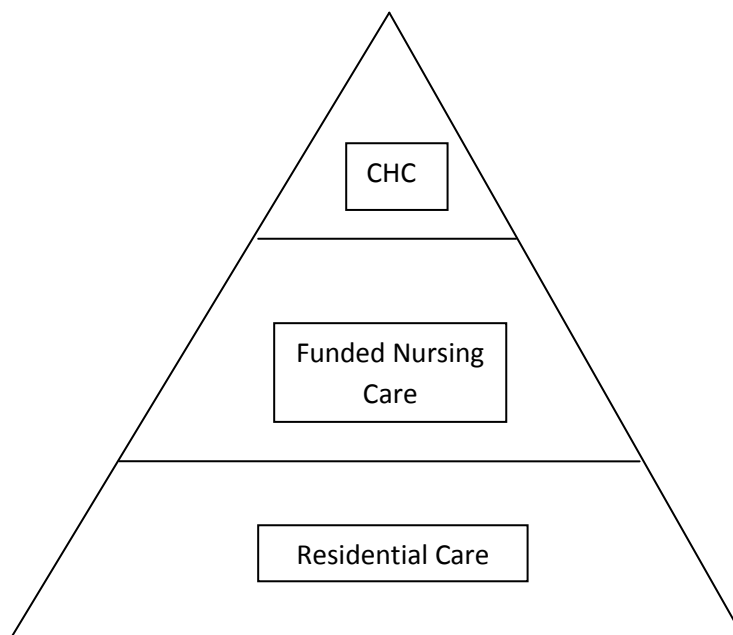
No Eligibility - In the case of no eligibility found, a meeting will take place between the Nurse Investigator and the claimant to explain the findings.

Partial Eligibility - In the case where eligibility is agreed for part of your claim period, but not all of it, a meeting will take place to discuss these findings. If there is no resolution at this point you may request that your case is referred for consideration at an Independent Review Panel.

What Does Long Term Care Mean?

We believe that all claimants need to have an understanding of all the long term care options in order to better understand Continuing NHS Healthcare eligibility. When most people need the NHS it is because they have an illness or condition that needs a short period of treatment and care. However, some patients need longer ongoing healthcare to help them cope with illness and/or disability. With older people this can mean that they can no longer safely stay in their own home and they have to move to a care home. There are specialist care homes which are registered to care for elderly people with needs as a result of mental illness (EMI). Eligibility for NHS Continuing Healthcare is based on a person's overall health needs and not their diagnosis. It looks at whether an individual's primary need is for healthcare. Many people need care and can no longer safely live in their own home; however, their primary need is for social care rather than healthcare.

Illustration of the proportion and different funding streams that people can require when needing long term care



Continuing NHS Healthcare

There are a minority of individuals whose long term care needs are found to be so complex, intense or unpredictable that they are described as having a primary health need and are eligible for Continuing NHS Healthcare. However, an individual's health needs can improve over time: this may result in that individual no longer meeting the Continuing NHS Healthcare eligibility criteria.

They may, however, meet the eligibility criteria for Funded Nursing Care. A person who has been assessed as eligible for Continuing NHS Healthcare has their needs fully funded by the NHS.

A 'primary health need' is established when a person's primary need is for health. The characteristics of the needs may alone or in combination, demonstrate a primary health need because of the quality and/or quantity of care required to meet the person's needs.

Nature: This describes the particular characteristics of an individual's needs (which can include physical, mental health or psychological needs) and the type of those needs. This also describes the overall effect of those needs on the individual, including the type (quality) of interventions required to manage them.

Intensity: This relates both to the extent (quantity) and severity (degree) of the needs and to the support required to meet them, including the need for sustained/ongoing care (continuity).

Complexity: This is concerned with how the needs present and interact to increase the skill required to monitor the symptoms, treat the condition(s) and/or manage the care. This may arise with a single condition, or it could include the presence of multiple conditions or the interaction between two or more conditions. It may also include situations where an individual's response to their own condition has an impact on their overall needs, such as where a physical health need results in the individual developing a mental health need.

Unpredictability: This describes the degree to which needs fluctuate and thereby create challenges in managing them. It also relates to the level of risk to the person's health if adequate and timely care is not provided. Someone with an unpredictable healthcare need is likely to have either a fluctuating, unstable or rapidly deteriorating condition.

Funded Nursing Care

If a person is not eligible for Continuing NHS Healthcare, he/she may nevertheless be eligible for Funded Nursing Care. Funded Nursing Care was introduced some years ago and can include many different aspects of care. It can include direct nursing tasks as well as the planning, supervision and monitoring of nursing and healthcare tasks to meet a person's needs. For individuals in nursing homes, registered nurses are usually employed by the care home itself. In order to fund this nursing care, the NHS makes a payment directly to the care home. The remainder of the care costs are subject to financial assessment by the social services and may be met by the individual or their family. Nursing care is provided by registered nurses and by care workers under their supervision, and includes activities around maintenance of skin integrity, personal care, mobility, incontinence, nutrition and

hydration and the regular administration of medication, alongside psychological support and the meeting of social care needs.

Residential Care

Provides support for individuals over a 24 hour period in relation to personal care, mobility and continence care. People living in residential care have access to nursing services and other health services via their doctor. District nurses along with other health professionals visit residential care homes to meet the nursing needs of the residents within that home.

Continuing NHS Health Care Case Study

Mrs Smith is a 77 year old lady who had a stroke in 2006 resulting with a left sided weakness. Mrs Smith also has a history of mini strokes, depression and received treatment for oral cancer 30 years ago. She has been a resident in a nursing home for 4 years receiving the Funded Nursing Care contribution. Within the last three months however her care needs have changed – Mrs Smith has developed a pressure sore and has experienced a number of chest and urine infections

Mrs Smith's identified needs are as follows:

- Totally dependent on 2 staff for all aspects of personal care, washing, dressing and grooming
- Bedbound due to frail condition and requires 2 staff to provide regular repositioning throughout the day and night
- Requires a member of staff to provide all oral intake, can take up to 60 minutes to eat a meal, appetite variable depending on level of alertness. Swallow is unpredictable – following assessment by the Speech and Language Therapist there is recommendation for thickened fluids and puree diet to be given slowly via a teaspoon
- Prone to recurrent chest infections
- Incontinent of urine and faeces throughout a 24 hour period. Prone to recurrent urine infections
- Grade 3 pressure sore to sacral area - dressing refreshed daily
- Communication is variable - can express simple needs
- Requires regular monitoring of pain throughout a 24 hour period
- Can take up to 20 minutes to swallow oral medication

Mrs Smith was assessed as eligible for Continuing NHS Healthcare funding.

Funded Nursing Care Case Study

Mrs Lee aged 92 years was admitted to hospital with neurological problems and an increasing number of seizures. Her seizures were described as mild. Following a medication review she remained seizure-free for six weeks. In addition to this Mrs Lee had a history of Alzheimers' Dementia, which was diagnosed approximately 3 years previously and the symptoms of this had accelerated since she developed her neurological problems. There was no involvement from mental health services

Mrs Lee's identified needs are as follows;

- Communication difficulties but is able to express and indicate her basic needs. She does not initiate any conversation but can respond by saying yes or no to direct questions. She relies on staff to anticipate her needs
- Hoist required for all transfers from bed to chair. Able to sit independently in the chair for periods of time. Pressure relieving equipment is used to prevent any skin/pressure damage and position change
- Fair appetite but staff need to cut up her food and on occasions she requires some assistance with eating. Able to drink from a beaker without prompting. There is no evidence of any weight loss
- Doubly incontinent and has a catheter in place; is totally reliant on care staff for all continence care, including bowel management. There are no management problems with her urinary catheter and interventions around this need are not considered complex
- Some areas of dry skin, scabs and scratch marks from chronic itching. Seen by a dermatologist and is prescribed cream which is applied twice a day. All pressure areas are intact
- Requires assistance for basic care around washing, dressing, personal appearance and continence
- Administration of medication four times daily by a registered nurse

Mrs Lee was assessed as not eligible for Continuing NHS Healthcare funding; however she was found to have nursing care needs and was eligible for Funded Nursing Care.

Residential Care Case Study

Mrs Jones aged 60 was diagnosed with Multiple Sclerosis a number of years previously and has recently moved into a residential home.

Mrs Jones' identified needs are as follows:

- Requires support with personal care, however she is able to wash her face and upper body independently
- Regularly incontinent of urine with occasional faecal incontinence, she requires support from carers to change her incontinence pad and maintain personal hygiene
- Able to mobilise short distances with assistance
- Can usually communicate her needs, although can become disorientated at times
- At risk of falls when in her own home. However, now that Mrs Jones is in an environment where she has access to staff over a 24 hour period the risk is minimised
- Medication administered by appropriately trained individual as prescribed by GP

Mrs Jones was not eligible for Continuing NHS Health care or Funded Nursing Care.

What Next?

In order to make a claim you will need to provide relevant Legal and Financial documentary evidence (We are unable to commence your case without this evidence).

You will need to provide copies of the following **legal** documents:

- 1) Grant of Probate/Letter of Appointment as Receiver (only if patient is deceased).

or

- 2) Enduring Power of Attorney (Not required if Grant of Probate is being provided).

You will need to provide copies of the following **financial** documents:

- 3) Bank statements covering the entire claim period.

and

- 4) Evidence from Care Home provider confirming rates paid during the claim period/date of payments.
- 5) Confirmation from the Care Home provider that there are no outstanding balances on your account (which relate to the period in question).

or

- 6) A statement/letter from relevant local council authority confirming the details of any 3rd party contributions/assessed charges during the period.

Please send all relevant documents and the completed application form to:

Alice Evans – Special Investigator

Cardiff South and East Locality

1st Floor

Cardiff Royal Infirmary

Glossop Road

Cardiff

CF24 0SZ

Please complete the following form, indicating who was involved in the care of the person on whose behalf you are making a retrospective claim.

The Nurse Investigator needs you to tell them when and why you believe your claim met the criteria for Continuing NHS Healthcare. Please refer to the headings of nature, intensity, complexity, and unpredictability of need when completing the section headed Claimant's Perspective.

The Nurse Investigator will endeavour to obtain all relevant records to ascertain and analyse the needs of the individual throughout the claim period. Once these records have been received, a chronology and needs assessment document will be completed by the Nurse Investigator.

Sometimes it is not possible to obtain all of the relevant clinical records. If this is the case the Nurse Investigator will need to undertake the analysis based on the evidence that is available to them.

You will be informed if there are missing records.

Whilst the claimant's perspective is taken into consideration, the needs assessment is based on available documentary evidence.

Please provide any other additional documentation which you believe may support your claim.

Application for Retrospective Continuing NHS Health Care Funding

Name of patient

Date of Birth / /

Date of death / /.....

Last home address prior to admission to hospital/care home.....

.....

Claim period from..... To.....

Name of Health Board original claim made to

.....

If the patient has the capacity to manage their affairs and wants you to act on their behalf please ask them to sign the "Form of Authority" (see page 16) and return with this request for review.

If the patient does not have the capacity to manage their own affairs, please confirm whether you hold an Enduring Power of Attorney to act on behalf of the patient, which has been registered with the Public Guardianship Office of the Court of Protection or has been appointed as a Receiver by the Court of Protection. If either of these apply, please provide a copy of the Enduring Power of Attorney or written confirmation of your appointment as Receiver.

- Copy of Enduring Power of Attorney enclosed YES / NO
- Copy of letter of appointment as a Receiver enclosed YES / NO

(Please delete as appropriate)

If neither of the above applies please provide an explanation of your relationship to the patient and the basis on which you are making the request on their behalf.

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If the patient is deceased, are you:

An executor of the deceased person's estate appointed by the deceased's will? YES / NO

Or

An Administrator to whom Letters of Administration have been granted if there is no will? YES / NO

(Please delete as appropriate)

If either of the above applies please provide a copy of the **Grant of Probate** or **Letters of Administration** with this form.

- Copy of Grant or Probate enclosed YES/NO
- Copy of Letters of Administration YES/NO

If neither of the above applies please provide an explanation of your relationship to the patient and the basis on which you are making the request on their behalf.

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Details of person pursuing claim

Full Name

Date of Birth / /

Address:

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.....

Contact telephone number

Mobile telephone number

Email address

Relationship to the patient

As part of your application you must provide financial evidence to support your claim. The evidence must cover the entire claim period. Examples of documents required can be found on page 8.

- Bank Statements YES/NO
- Care Home Provider Payment Evidence YES/NO
- Local Council Authority Payment Evidence YES/NO
- Other (Please provide details below) YES/NO

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In order to speed up your claim it would be helpful if you could identify the health and social care professionals who were involved in care provision, and the care homes and hospitals attended, over the claim period.

(Please provide details of contacts/organisations where known. Leave blank if unknown)

Contact Name	Contact Address	Contact Number
General Practitioner (GP):		
District Nursing Team:		
Mental Health Services:		
Care Home 1: Date From (DD/MM/YY): Date To (DD/MM/YY):		

<p>Care Home 2:</p> <p>Date From (DD/MM/YY):</p> <p>Date To (DD/MM/YY):</p>		

Contact Name	Contact Address	Contact Number
<p>Hospital 1:</p> <p>Date From (DD/MM/YY):</p> <p>Date To (DD/MM/YY):</p>		
<p>Hospital 2:</p> <p>Date From (DD/MM/YY):</p> <p>Date To (DD/MM/YY):</p>		
<p>Specialist Nurse</p> <p>(e.g. Wound Care, Stroke, MS)</p>		
<p>Physiotherapist</p>		

Occupational Therapist		
Speech & Language Therapist		
Local Authority Home Care		
Social Worker		

Claimant's Perspective

Name of the patient:

Name of the claimant:

Relationship:

Given the information that you have read, please explain why you believe that either you or your relative had a primary health need, informing us of any changes in health status and the dates on which this occurred. The definitions provided on nature, complexity, intensity and unpredictability will assist you to do this. You may wish to consider you or your relative's needs in relation to mobility, eating and drinking, skin condition, medication, hospital admissions, professional involvement, continence, behaviours, mental health, falls, cognition, level of care needs over a 24 hour period, pain management, breathing and risk to themselves and others.

Claimant's Perspective:

Claimant's Perspective continued:

Signature

Date

Please continue on another page if necessary.

In order to progress your enquiry we require consent from the patient or their representative to access all health and social care records that are relevant to the claimant's case which might be held by the NHS, local authority or independent sector organisations who have been involved. If you do not agree to this we may not be able to take your enquiry further.

FORM OF AUTHORITY

I consent to the relevant Local Health Board having access to and obtaining copies of all the relevant information including health and social care records in order to consider this request for reimbursement.

Print name of patient

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Print name of person providing consent:

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Signature of person providing consent:

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Date:

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Relationship (if not the patient):

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Thank you for completing this form. The information provided will enable us to access the appropriate documentation that will inform the investigation.

Please return this completed form to the following address:

Alice Evans – Special Investigator

South and East Localities

1st floor

Cardiff Royal Infirmary

Cardiff

CF24 0SZ

Please address any queries in relation to this form to Alice Evans

Contact Details:

Telephone: 02920335467

E-mail: alice.evans3@wales.nhs.uk