

# 1st Friday Focus...

Continuing Health Care &  
Personal Health Budgets  
for people with a  
Learning Disability.

Presentation from:  
Learning Disability Nurses  
Marie Perry and Lisa Smith



Friday 9th April  
10.00am till 11.30am

To join the zoom meeting log in on the day with the  
link: <https://tinyurl.com/hun9hsfy>

Meeting ID: 871 6663 0870

Or dial in from a phone: 0203 051 2874 or

0203 481 5237

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## Zoom Meeting Etiquette

Please mute your microphone when not speaking.



Please also use the chat function.



Please raise your hand through Zoom when you have a question to ask.



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Healthier people  
Healthier futures



Black Country and  
West Birmingham  
Clinical Commissioning Group

# NHS Continuing HealthCare & Personal Health Budgets for People with Learning Disabilities

Marie Perry & Lisa Smith



Walsall

[www.blackcountryandwestbirmccg.nhs.uk](http://www.blackcountryandwestbirmccg.nhs.uk)

# Introductions

- Marie Perry
- Lisa Smith
- Qualified Learning Disabilities Nurses – RNLD
  
- Both work for Black Country and West Birmingham Clinical Commissioning Group  
In the Continuing healthcare team, as Learning Disability Case Managers
  
- We are based in Walsall - Jubilee House



## What is NHS Continuing Healthcare?

- If the person qualifies its money from the NHS to pay for care and support.
- Most people have care and support paid for by social services, Continuing Healthcare is similar but money comes from the NHS.
- People may need a lot of help because of their health problems and they get this from the NHS already e.g. Hospitals, Doctors, District nurses.
- If a persons health is deemed more complex beyond the scope of what the NHS offers then a Continuing health care assessment could help

## Who can get it?

- It is for people who need a lot of help because of their health needs.
- If the identified 'health need' is beyond what social services should provide.
- If the health need is difficult to manage.
- Over 18 years old and live anywhere in England.
- If you think you should have it, speak to a social worker or an healthcare professional involved in your care.

# The Continuing Healthcare process

- The completion of a checklist
- The full assessment if the checklist is positive.
- Agreeing with the assessment – Decision support tool (DST)
- Making the decision. – Ratification

If the decision is made to fund:

- Case manager or CHC Assessor will put a support plan together
- Work out how the funding will be used
- Reviewing the NHS Funded care 3months 6months or 12months

## Step 1: the Checklist

- This is completed by someone who has been trained to do so.
- Often a social worker, sometimes a healthcare professional such as a nurse.
- You will be asked to consent to this checklist.
- You will be asked a lot of questions about your health and your health needs.
- You can have an advocate, family member or carer with you if you would like.
- If the person cannot consent, a mental capacity assessment will be completed and the decision to go through this process will be made as a best interest decision.



## Checklist - outcome

- A checklist will be either negative or positive.
- It is sent to your local Clinical Commissioning Group.
- A negative checklist means a full assessment is not needed as you will not meet the criteria for NHS Continuing Healthcare funding.
- A positive checklist means a full assessment needs to happen.
- ***A positive checklist does not mean you will get Continuing Healthcare funding. The threshold is low.***
- A full assessment should take place within 28 days.
- However, in more complex cases this may take longer.

# When should a checklist not be done?

- If it is clear by health and social care that a checklist is not necessary at this time.
- If you are in hospital
- If you are about to move to a new place of residence – settlement period is required
- The person has short term health needs or is recovering from a temporary illness.
- If the CCG feel a full assessment needs to be done without a checklist.
- If the person's health is in rapid decline and may be terminal, a fast track assessment will be completed instead.
- If a person is receiving 117 aftercare.
- If a full assessment has already been completed and needs have not changed.

## Step 2: Full Assessment

- The full assessment is completed using a Decision Support Tool document.
- The nurse assessor will come out to see you and gain consent to complete it.
- The nurse assessor will also ask for consent to talk to other people involved in your care.
- The Decision Support Tool covers 12 domains of health.
- It is an evidence based tool, so evidence will need to be collected for it.
- Information will be collected from those involved in your care such as care plans, risk assessments, clinic letters and healthcare reports.

# 12 Health Domains

- 1 Breathing    2 Nutrition    3 Contenance    4 Skin    5 Mobility    6 Communication  
7 Psychological & emotional    8 Cognition    9 Behaviour    10 Drug therapies  
11 Altered States of consciousness    12 Other

These needs above are given a weighting marked

"priority", "severe", "high", "moderate", "low" or "no needs".

## At the full CHC assessment

- A CHC assessment meeting will be held to go through each domain.
- You will be asked lots of questions.
- A Social Worker should be present.
- People who look after you and know you well may be invited along.
- Family and/or an advocate can be present if you want them too.

The scoring for each health domain will be decided on.

This is what's called a Multi disciplinary meeting = **MDT**

- If the person is thought not to have capacity to consent to this process, a mental capacity assessment will be completed and a best interest decision made.

# Full Assessment

- Based on how you present now.
- Historical information can be included but will not be used to score.
- It will look at the *nature* of your health needs and how *complex*, *intense* and *unpredictable* they are.
- It is not based on a diagnosis but how that diagnosis impacts on you.
- Any disagreements through the assessment will be noted.

# Decision making Process

- All the evidence is discussed and the MDT make a recommendation of whether a person is eligible or not eligible.
- If the outcome is not agreed this will be noted in the assessment. **Next step.....**
- The assessment is sent to a panel of people from both health and social care to ratify or query the decision.
- The panel can ask for more information.

# The decision making process

- Once the decision is made, the person will be informed.
- If the person does not agree with the decision, they can appeal it.
- If full CHC funding is not agreed, joint funding can be looked at in some cases.
- If you are not eligible, it should not change the care and support you already have.
- If you are eligible, the NHS will take over responsibility of your care and support from social services.



## What happens if I am eligible?

- The NHS Clinical Commissioning Group (CCG) will give you a Case Manager.
- The CCG will take over responsibility for your care and support.
- A support plan of your care needs will be developed with you
- The person will be asked how they want to receive the funding to support you best, this can be either:
  - 1. A Personal Health Budget (similar to Direct Payments through the Local Authority)
  - 2. The CCG can commission services on your behalf.

## Important points

- Continuing Healthcare funding is not for life.
- It can be removed if your health needs improve.
- An annual care review will be completed and if there are any changes, a full assessment will be carried out.
- The full assessment will be carried out as before along with a social worker

# What is a Personal Health Budget?

- A Personal Health Budget (PHB) is a sum of money agreed on that is for your care and support needs. Once you have met the criteria for receiving CHC first.

It can be done in three ways.

- 1. Notional PHB – this is where the amount of money has been agreed and the money is held by the CCG and spent on your behalf.
- 2. Third Party PHB – A organisation is paid to manage the money and your care.
- 3. Direct Payment to yourself – support by a Direct Payment Support Organisation.

## What can the PHB be spent on?

- You can employ Personal Assistants or pay for a Care Provider to look after both your health and social needs.
- Equipment that might help improve your life.
- Health therapies as recommended by a Health Professional.



Independence



Choice



Equal  
opportunities

# PHB Support Plan

- Together with the Case Manager, a support plan will be produced.
- It will show what support you need and why.
- It will highlight your goals and how to meet them.
- This support plan will help us decide how much funding you need from the NHS

# Review

- The Support Plan and your care will be reviewed 3 months after it has started.
- It can be added to or amended to suit your needs.
- It will be reviewed and audited annually
- It can be reviewed earlier if things change.
- Any money not used will get sent back to the NHS

# Questions?



# Where to find information about CHC & PHB

- <https://www.england.nhs.uk/healthcare/>
- <https://www.england.nhs.uk/learning-disabilities/improving-health/personal-health-budgets/>
- <https://www.beaconchc.co.uk/>
- <https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>
- <https://www.nhs.uk/conditions/consent-to-treatment/>



# **Our Current & future Work**

## **Young Peoples Mental Health Survey**

**(link to survey on HW Walsall Webpage and across social media Facebook, Twitter etc.)**

## **Listening Survey – Work Programme 2021/ 2022**

**(link to survey will be on HW Walsall Webpage and across social media Facebook, Twitter etc.)**



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**Our next 1<sup>st</sup> Friday Focus meeting is on Friday 7<sup>th</sup> May  
from 10.00 am till 11.00am.**

**Thank you for attending**



To contact us.

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