

20/01/2023

NN-ICB/22/152

**Dear Requestor** 

# **RE: Freedom of Information Request**

With reference to your request for information I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information that you have requested. A response to each part of your request is below.

In the request you asked:

1. Where can we get information about the levels of funding provided to people, and to how many people? This would apply by region and over past years. This question relates to CHC funding criteria and the numbers of people in receipt of CHC for as many years as possible. As well as the numbers not receiving funding so a percentage can be calculated. As we understand it this has changed over the years so we would be very grateful to obtain this information as it relates to important research we are carrying out.

All NHS Continuing Healthcare (CHC) and NHS-funded Nursing Care data are on NHS England's website and is available via the below link:

Statistics » NHS Continuing Healthcare and NHS-funded Nursing Care (england.nhs.uk)

## The criteria for NHS Continuing Healthcare is:

NHS Continuing Healthcare means a package of ongoing care that is arranged and funded solely by the NHS where the individual has been assessed and found to have a 'primary health need' as set out in the <u>National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care</u> 2022. 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 criteria for Standard NHS CHC (non-Fast Tack) is:

NHS CHC cases which are not Fast Track. This includes those that have been agreed eligible via the standard NHS CHC assessment route (i.e. positive checklist, DST etc.) and those Fast Track cases that have been reviewed and changed to Standard NHS CHC. Does not include Previously Unassessed Periods of Care (PUPoCs).

## The criteria for Fast Track is:

The Fast Track tool is used where an appropriate clinician considers that a person should be fast tracked for NHS CHC because that person has a rapidly deteriorating condition which may be entering a terminal phase. The person may need NHS CHC funding to enable their needs to be

urgently met (e.g. to enable them to go home to die or to provide appropriate end of life support to be put in place either in their own home or in a care setting).

2. Can we be given a list of the people involved in the decision making process from the first assessment through to the recent appeal IE names and positions./roles? This relates to the decision makers involved in the DST stages.

The decision is reached through the completion of a Decision Support Tool (DST) via a Multi-Disciplinary Team (MDT). The MDT is composed of a Nurse Assessor and most often a Social Care Worker from the Local Authority, other care professionals may also contribute. The Integrated Care Board (ICB) is responsible for making the final eligibility decision on the basis of the MDT's recommendation. The ICB is supported in their role as decision maker by three clinical Assessment and Review Teams who facilitate completion of the DST and the MDT recommendation. The recommendation is then verified by the ICB's Continuing Healthcare Team. Those involved in the wider decision-making process would include all Nurse Assessors in the Assessment and Review Teams, all Social Work Practitioners and all Managers within the ICB's CHC Team. The potential list of names and positions/roles is very wide and the ICB would not have access to contact details in the Local Authority teams and in the Clinical Assessment and Review Teams.

If you are unhappy with the way in which your request has been handled, NHS Nottingham and Nottinghamshire Integrated Care Board (ICB) have an internal review procedure through which you can raise any concerns you might have. Further details of this procedure can be obtained by contacting Lucy Branson, Associate Director of Governance via <u>lucy.branson@nhs.net</u> or by writing to FOI Team at NHS Nottingham and Nottinghamshire ICB, Sir John Robinson House, Sir John Robinson Way, Arnold, Daybrook, Nottingham, NG5 6DA.

If you remain dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office (ICO), who will consider whether the organisation has complied with its obligations under the Act and can require the organisation to remedy any problems. Generally, the ICO cannot make a decision unless you have exhausted the complaints procedure provided by NHS Nottingham and Nottinghamshire ICB. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <a href="https://ico.org.uk/for-the-public/">https://ico.org.uk/for-the-public/</a>

Complaints to the Information Commissioner's Office should be sent to:

FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 123 1113 or report a concern via <u>https://ico.org.uk/concerns/</u>

## Yours sincerely

Freedom of Information (FOI) Officer on behalf of NHS Nottingham and Nottinghamshire Integrated Care Board

## notts.foi@nhs.net

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the <u>Open Government Licence</u> (OGL) a request to re-use is not required, but the license conditions must be met. You <u>must</u> not re-use any

previously unreleased information without having the consent of NHS Nottingham and Nottinghamshire Integrated Care Board. Should you wish to re-use previously unreleased information then you must make your request in writing (email will suffice) to the FOI Lead via <u>notts.foi@nhs.net</u>. All requests for re-use will be responded to within 20 working days of receipt.