



# **NHS Continuing Healthcare**

*Cut-Off Dates for Assessment of Eligibility for  
Cases During the Period 2004 – 2012*

*Frequently Asked Questions*

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## NHS Continuing Healthcare

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## 1. What are the deadlines?

We are asking individuals or their representatives to notify the relevant Primary Care Trust (PCT) in respect of previously un-assessed periods of time where there is evidence that the individual should have been assessed for eligibility for NHS Continuing Healthcare (NHS CHC) funding with respect to that care. The time periods and deadlines for notification are set out below:

<b>Time Period</b>	<b>Deadline</b>
1 <sup>st</sup> April 2004 – 30 <sup>th</sup> September 2007 (pre National Framework)	30 <sup>th</sup> September 2012
1 <sup>st</sup> October 2007 – 31 <sup>st</sup> March 2011 (post National Framework)	30 <sup>th</sup> September 2012
1 <sup>st</sup> April 2011 – 31 <sup>st</sup> March 2012	31 <sup>st</sup> March 2013

## 2. Why are these deadlines being introduced?

The National Framework for NHS CHC was introduced in 2007 (and revised in 2009) to ensure a nationally consistent process for consideration of NHS CHC eligibility, including the identification of individuals who might require an assessment for eligibility. This announcement introduces a process which will enable any individuals who should have been assessed from 1<sup>st</sup> April 2004 to 31<sup>st</sup> March 2012 to be identified and considered as soon as possible.

A similar process was conducted in 2007 to ensure that cases which occurred before 1<sup>st</sup> April 2004 were dealt with in a timely manner.

It is important that PCTs are notified as soon as possible about people that should have been assessed for NHS CHC in the past because as time passes, detailed recorded evidence of the individual's needs for the period of time in question may no longer be available.

## 3. Why are there two different deadlines?

The setting of two different deadlines, ensures that in all instances, individuals and their families or representatives have a minimum of 12 months to request an assessment of eligibility from the date that their period of care occurred. This is in line with the NHS complaints process and also the process to bring complaints to the Parliamentary and Health Service Ombudsman.

## 4. How are people going to know about these deadlines?

Strategic Health Authorities (SHAs) and PCTs will undertake a local communications exercise to publicise these arrangements. The Department of Health is working with SHAs to agree clear and consistent information to ensure that individuals who may be affected, their families, representatives and relevant organisations are aware of, and understand, the arrangements that are being put in place.

**5. What happens if I miss the deadline?**

In the absence of exceptional circumstances (to be determined locally by the responsible PCT), late applications will not be considered if the deadline has passed.

**6. Do these deadlines impact upon cases that Primary Care Trusts are currently considering for assessment of eligibility?**

No.

**7. What happens if the period of eligible care need covers more than one of the time periods advertised?**

For a period of care occurring within one of the timeframes to be considered, then unless there are exceptional circumstances, notification must be given by the relevant deadline for that time period. Therefore, for any period of care up until the end of March 2011 to be considered, notification would have to be given by 30<sup>th</sup> September 2012. Any notification given after 30<sup>th</sup> September 2012 will only consider care provided from 1<sup>st</sup> April 2011 even if the care period started before this date.

Where the period of care runs between the specified time periods, for example between October 2010 and March 2012, notification would need to be received by 30<sup>th</sup> September 2012 for the whole period of care to be considered. In this instance, any notification given after 30<sup>th</sup> September 2012 would only consider the care provided from 1<sup>st</sup> April 2011.

Where a period of care relates to a time period which covers both pre and post introduction of the National Framework for NHS CHC, for example, a period of care which falls within April 2007 to March 2011:

- from April 2007 to 30<sup>th</sup> September 2007, the assessment would be subject to the local processes and eligibility criteria in place at that time (and must be *Coughlan* and *Grogan* compliant); and
- from 1<sup>st</sup> October 2007 to March 2011, the assessment would be subject to the guidance set out in the National Framework for NHS CHC (published in 2007 and revised in 2009).

**8. What happens when clinical commissioning groups take over from Primary Care Trusts?**

From 1<sup>st</sup> April 2013, subject to the passage of the Health and Social Care Bill, clinical commissioning groups (CCGs) will take over the statutory responsibilities for NHS CHC from PCTs. The introduction of these deadlines will not affect the eligibility criteria for NHS CHC set out in the National Framework, or the statutory responsibilities of CCGs from 1<sup>st</sup> April 2013.

**9. Will the proposed changes in the NHS affect current eligibility for NHS Continuing Healthcare?**

No.

**10. I didn't see any of the communications about these deadlines and I want an assessment**

The Department of Health has worked closely with the NHS to develop robust handling plans to ensure that local organisations and populations are aware of the introduction of these deadlines. Unless there are exceptional circumstances (to be determined locally by the responsible PCT), late applications will not be considered if the deadline has passed.

**11. How do I request consideration for NHS Continuing Healthcare before the deadline for the relevant period of care need?**

Individuals wishing to submit notification of a request for an assessment of care needs for eligibility for NHS CHC funding should contact the PCT Continuing Healthcare team locally. Local communications will set out the relevant contacts in relation to the introduction of these deadlines.

**12. Who has been involved in the decision to introduce these cut-offs?**

The Department of Health has worked very closely with the NHS about the introduction of these deadlines. In addition, we have had detailed discussions with members of the NHS Continuing Healthcare Stakeholder Group. The Group includes a range of stakeholder organisations including the Association of Directors of Adult Social Services (ADASS), Age UK, the Alzheimer's Society, the Spinal Injuries Association, Parkinson's UK and Marie Curie Care.