

Title of Report:	Continuing Health Care – progress update
Report to be considered by:	Overview and Scrutiny Management Commission
Date of Meeting:	21 October 2014

Purpose of Report: To update the Overview and Scrutiny Management Commission on the progress that has been made on handling applications for Continuing Health Care.

Recommended Action: It is recommended that the Commission notes the content of the report and brings to a close its examination of Continuing Health Care.

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Executive Report

1. Introduction

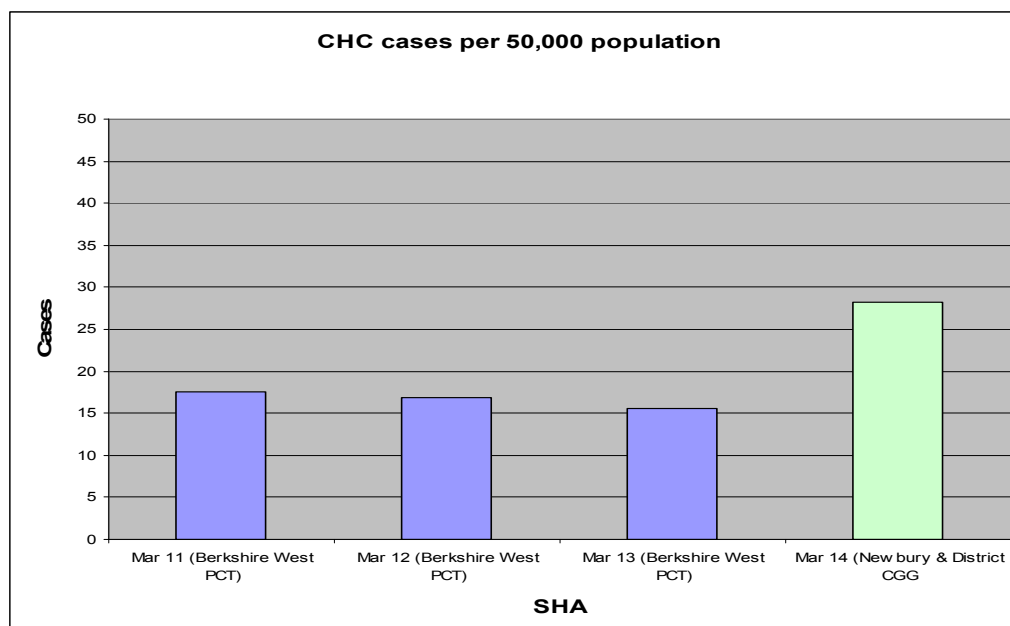
- 1.1 At the Overview and Scrutiny Committee on 4th April 2014 Rachael Wardell, Corporate Director, and Cathy Winfield, North West Reading CCG Chief Officer, presented a positive update of progress that had been made on implementing the joint action plan which had followed an external review of Continuing Health Care arrangements. The Commission noted the good progress and asked for a further update in four months.
- 1.2 This report provides the requested update and will be presented to the Commission by the Council's Chief Executive and the North West Reading CCG Chief Officer.

2. Progress

- 2.1 Good joint working between the CCGs and the authority continues with regular meetings between senior staff in place.
- 2.2 Historically there was a concern about the number of people in the community waiting for CHC assessment. The original waiting list is complete other than two cases where the responsible commissioner is unclear. In one of these cases the Council and the CCG will be writing jointly to Hampshire CCG with our position. In the second case we are not agreed on the eligibility of the individual and have jointly agreed to have an independent view from Broadcare (engaged by CCG to provide CHC support) and meet on Friday 10th October to discuss and agree the way forward. In the meantime the CCG are proceeding without prejudice to the assessment.
- 2.3 We do have current cases over the 28 days – at the end of August there were 6 cases. However, this represents a significant improvement on the last reported position where there were 18 cases over 3 months old. The 28 day time frame proves challenging at times, often for reasons outside both the CCG's and Council's control such as awaiting care records, professional reports and delays in arranging the MDT as a result of family request. However, the CCG has maintained its investment in additional support, via Broadcare, to ensure cases are handled as efficiently as possible. We are monitoring any current cases or any other issues, if necessary, through the joint meetings.
- 2.4 The Council have retained one of the two CHC Advisors and she has attended many of the Broadcare Multidisciplinary Team meetings. Her expertise is being used to review referrals before they are made and this is helping to ensure that referrals are appropriate and of high quality. This CHC advisor is also playing a key role in increasing the understanding of the CHC process across social work staff in both adult services and children's services.
- 2.5 The expenditure on CHC for West Berkshire continues to be in line with expectations. Spend year to date (month 5) for Adult CHC is £2.071m compared with the £1.769m in the same period last year. Forecast outturn is £5.284m compared with the 13/14 outturn of £5.195m. This is based on Newbury and District CCG data and pro rata spend by North West Reading CCG. It should be stressed

that the award of CHC funding is in no way dependent upon available budgets, if a person meets the eligibility criteria for CHC funding then it must be provided.

- 2.6 The following table simply provides the number of people, per 50,000 of population, in receipt of CHC funding. For the years 2011 to 2013 this is shown at PCT level, for 2014 it is possible to provide the information at CCG level.



- 2.7 National policy is that all patients in receipt of NHS Continuing health care funding will be offered a personal budget and the CCGs are moving towards implementing this, taking learning from Oxfordshire who have already implemented this approach. We are also working with two independent organisations with experience of personal health budgets to support our implementation of PHBs.

3. Conclusion

- 3.1 It is assessed by those working in both health and social care in West Berkshire that the measures that have been put into place have had the desired effect and the system for Continuing Health Care is now operating as it should.
- 3.2 It is not considered that there is a requirement for further scrutiny of this matter and performance monitoring should now be conducted as through the Council's usual framework

4. Recommendation

- 4.1 It is recommended that the Commission notes the content of the report and brings to a close its examination of Continuing Health Care.

Appendices

There are no appendices to this report.