

GLOUCESTERSHIRE LMC DOCUMENT SUMMARY

<u>Document Title:</u> The National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care	
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<u>Bottom Line:</u> This framework paper lays down the general lines for deciding what continuing healthcare needs are, how they should be assessed, and who should pay for them to be met. It is still unclear whether or how GPs will form part of multidisciplinary teams that will decide on the continuing healthcare needs of individuals. It is also unclear when or how the decision support tool will be issued to those who need it. The scheme is due to go live on 1 Oct 07 so there is little time to fill in the gaps.	

“Continuing care” means care provided over an extended period of time to a person aged 18 or over to meet physical or mental health needs which have arisen as the result of disability, accident or illness.

From 1 Oct 07 there will be one national approach (instead of the current 28 SHA approaches) to determining eligibility for NHS[-provided] Continuing Healthcare, with a common process and national tools to support decision making. The same process will also determine whether or not the individual is eligible for NHS-funded Nursing Care. The current 3 bands of entitlement to nursing care will be no more.

A multi-disciplinary panel assesses the needs and makes recommendations to the PCT. The first step is to decide whether there is a Primary Health Need for continuing care. This will depend on the circumstances of the case e.g. the nature, intensity, complexity and unpredictability of the condition. If the needs are primarily health-related then it is up to the NHS to bear the whole burden, including accommodation. Otherwise the Local Authority will take up most of the burden. To assure evenness of interpretation across the country a Decision Support Tool will be introduced. The assessment of need must have the individual's wishes and expectations as a start point. The evidence considered and the decision making process should be accurately and fully recorded. The process will be overseen by the PCT to ensure there is no discrimination involved. Regular reviews will be needed in the light of changing circumstances.

The Decision Support Tool is designed to ensure that the full range of factors which have a bearing on an individual's eligibility are taken into account in making this decision. The tool provides practitioners with a framework to bring together and record the various needs in eleven 'care domains', or generic areas of need. The domains are sub-divided into statements of need representing low, moderate, high, severe or priority levels of need, depending on the domain. The care domains are:

1. Behaviour
2. Cognition
3. Communication
4. Psychological/Emotional Needs
5. Mobility
6. Nutrition – Food & Drink
7. Continence

8. Skin (including tissue viability)
9. Breathing
10. Drug Therapies & Medication: Symptom Control
11. Altered States of Consciousness

The result of completing the tool should be an overall picture of the individual's needs, which captures their nature, and their complexity, intensity and/or unpredictability and thus the quality and/or quantity (including continuity) of care required to meet the individuals' needs. Figure 2 indicates how the domains in the Decision Support Tool can illustrate the complexity, intensity and unpredictability of needs. The overall picture, and the descriptors within the domains themselves, also relate to the nature of needs.

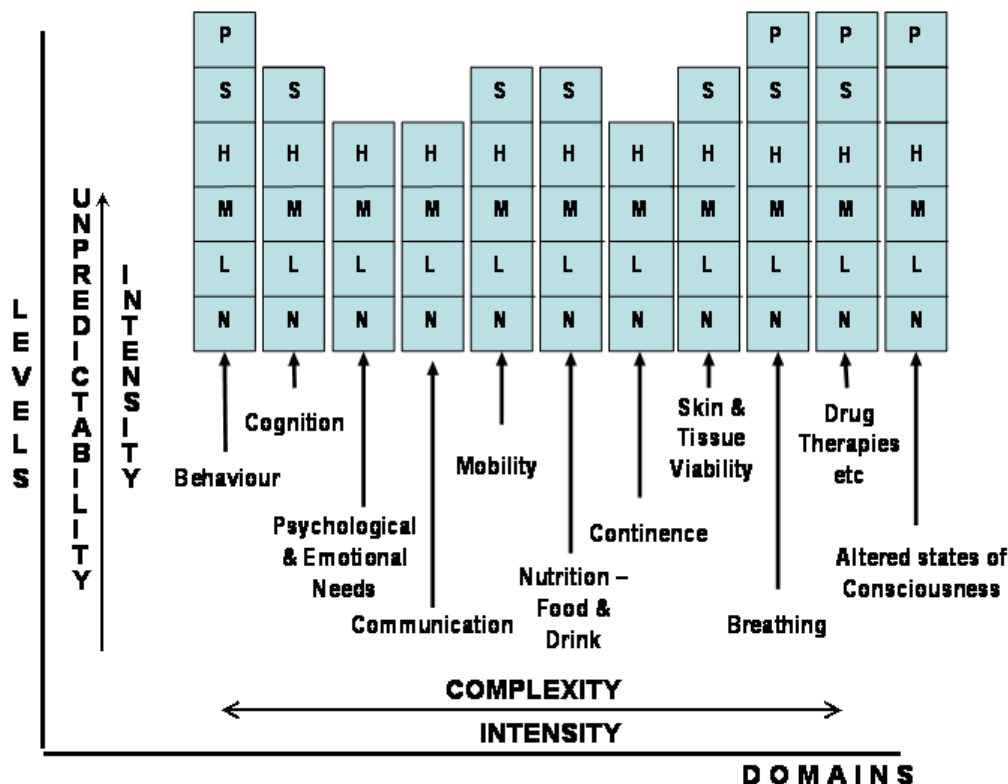


Figure 2. How the domains in the Decision Support Tool help to build up a picture of complexity, intensity and unpredictability. The letters N, L, M, H, S and P refer to No, Low, Moderate, High, Severe and Priority levels within the eleven care domains.

At the LMC we are still left with the following questions in our minds:

- Who decides who is going to be on the multidisciplinary team?
- Is the Decision Support Tool going to be web-based or how will it be accessed?
- How will those who need it be trained on it?
- Will GPs be involved at all, or will the needs be assessed at secondary level?

N.B. This summary was correct when issued. Its accuracy cannot be guaranteed in the long term, since policies and organisations change. Although every effort will be made to ensure that it is updated the Reader is urged to exercise caution if the document at the time of reading is more than a year old.