

NHS Continuing Healthcare Appeals Guidance Leaflet

A guide to NHS Continuing Healthcare: Local Resolution Process for Appeals

This guide has been developed to help you understand the process by which the Clinical Commissioning Group (CCG) reviews Continuing Healthcare decisions and manages the local resolution process where people have asked for that decision to be reviewed.

Cambridgeshire & Peterborough CCG aim to provide guidance and support throughout the local resolution process; while endeavouring to resolve your appeal within a timely manner. If at any stage, the process or actions required become unclear or you require extensions on timescales set; please do not hesitate to contact us for further guidance.

If an individual and/or their representative is unclear on the process or whether pursuing the appeals local resolution process is the suitable route of action, please do contact us and one of our Appeals CHC Specialist Nurses will be happy to advise/discuss accordingly.

The right to Appeal a CHC funding eligibility decision

Reasons to appeal may include:

- You do not agree that the correct recommendation on CHC funding eligibility was made following the Decision Support Tool meeting.
- You do not consider the process followed, to be in accordance with the National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care (2018).
- You suspect that crucial evidence/information was incorrect, missing or not considered at the time of the Decision Support Tool meeting.
- You do not agree with the verification process followed and feel the original eligibility decision was overturned without discussion with the MDT.

Stages of the Local Resolution Procedure

The local resolution procedure is set across stages as detailed below. This is to ensure a fully comprehensive and robust review of an individual's case is achieved. Similarly, to the original completion of assessments, our administrative staff and appeals nurses will be reviewing documents available via GP and care home records throughout this process. If you (and/or your representative) have any sensitive information you wish not to be accessed or included within our written reports, please advise us of this immediately.

1. Completing the questionnaire

Once we receive your letter of appeal, you (and/or your representative) should now have received a questionnaire alongside this guidance. This is to enable our Appeals Nurses to review your case and fully understand the reasoning for appeal. This document is a chance for you to provide any further evidence and voice any concerns you may have. This document should be returned within 14 days to avoid unnecessary delay.

If you are acting on behalf of another person, you will be asked to provide evidence that you have the authority to act on their behalf. Without this, we cannot proceed any further.

At this stage, you (and/or your representative) will be asked to indicate whether you would like to attend a local resolution meeting. This is an informal meeting where a Appeals CHC Specialist Nurse will discuss the appeal in more detail with you (and/or your representative). Alternatively, you can opt to have this discussion over the telephone/teleconference.

2. Local Resolution Meeting/Teleconference

Once we have received the completed questionnaire and confirmation that you (and/or your representative) would like to attend a Local Resolution Meeting or teleconference, one of our administrators will send you an appointment invitation. If you are unable to make the date offered, please contact us as soon as possible and we will endeavour to provide a more suitable time.

The purpose of the Local Resolution Meeting is:

- To discuss the appeal and the content of the decision support tool.
- To discuss how the decision on CHC funding eligibility was met.
- For the Appeals CHC Specialist Nurse to provide clarification on anything not understood regarding the process.
- A chance for you (and/or your representative) to provide additional evidence to be considered at the next stage.

Although this is an informal stage of the process, the Appeals CHC Specialist Nurse will document the contents of this discussion and provide you (and/or your representative) with a written summary in approximately four weeks. You will then be asked whether you (and/or your representative) would like to proceed to the formal Local Resolution Panel, to have the eligibility decision reconsidered.

3. Local Resolution Panel

Once we have received confirmation that you (and/or your representative) wish to proceed to the Local Resolution Panel; you will be sent an invitation to attend. At this stage, reconsideration of the original Decision Support Tool and the corresponding eligibility outcome will be completed by the panel.

In attendance you can expect; A panel Chair, a CCG representative, a Local Authority representative and a member of our administration team (who will be taking minutes throughout). There are occasions where additional members of the team are invited, for training purposes only.

You (and/or your representative) will be given the opportunity to explain why you remain dissatisfied with the CHC funding eligibility decision. The panel members may have questions for you (and/or your representative) to enable them to gain further understanding and to support their overall decision.

The voting panel consists of the CCG representative and the Local Authority representative. Once the meeting with yourself (and/or representative) is complete, they will then deliberate the case, considering all of the evidence presented. The panel will proceed to re-apply the primary health needs test and determine a CHC funding eligibility outcome; in line with the guidance from the National Framework. This outcome will then be verified by a member of senior management to ensure the correct process has been followed. You (and/or your representative) will then receive the written outcome within 4-6 weeks from the panel date. This should entail a clear and comprehensive rationale for the decision made. If there are any unforeseeable delays, we will endeavour to inform you of this.

Possible Outcomes:

- Overturning of the original decision made on eligibility.
- Upholding of the original decision made on eligibility.

Independent Review Panel

If you (and/or your representative) remain dissatisfied with the outcome following the Appeal and the Local Resolution Process, you may wish to request an Independent Review via NHS England. The details on how to proceed will be included within the final-outcome letter following the Local Resolution Panel.

You can find more details on their website: www.england.nhs.uk/healthcare.

In the instance that you (and/or your representative) are not satisfied with the outcome reached following the Independent review, you have the right to appeal to the Parliamentary and Health Ombudsman.

You can find more details on their website: www.ombudsman.org.uk.