Information sheet C41 – NHS CHC and private care arrangements

This information sheet is about some issues that can arise if someone is eligible to have their ongoing care and support needs met through the NHS Continuing Health Care (NHS CHC) scheme.

NHS CHC is available only if you have a "primary health need", assessed on the basis of the nature, complexity, intensity and unpredictability of your care needs. Most people who need care and support services are not eligible for NHS CHC, but may be eligible for "social care" support funded by Northumberland County Council. People who receive ongoing social care support usually have to pay for some or all of the cost of their services. There are no charges for NHS CHC.

This information should be read together with Information sheet C11 – *NHS Continuing Health Care*, which explains NHS CHC in more detail.

■ Why is there an issue about NHS CHC and privately-arranged care?

Most NHS CHC services are provided by voluntary or private organisations. However some providers of care services may not accept NHS rates for ongoing CHC services.

If you qualify for NHS CHC, the NHS will offer to make arrangements for all of the care and support that you have been assessed as needing. Because the NHS is spending public money, it does need to consider whether the fees charged by a care provider are a good use of available funding. For some of the most common services, such as home care services or care home accommodation for older people, the NHS in Northumberland has worked with the County Council to agree standard fee levels which it will pay.

If your existing privately arranged care provider, or the care provider which you would like to use in future, charges fees which the NHS believes are more expensive than is necessary, you may not be able to use that care provider when your support is being paid for as NHS CHC. As with health treatment in hospital, you can't choose a provider that doesn't accept NHS contract terms and ask the NHS to pay just part of the cost of the health and care services that you need. This might mean, for instance, that if you want to move into an expensive care home you will need to pay the fees in full yourself, rather than receiving financial support from the NHS.

■ What extras <u>could</u> I pay for in a care home while getting NHS CHC?

Because living in a care home is very different from being treated in a hospital, a care home may offer some extras which are not part of the plan for meeting your health and care needs, and which it is reasonable for you to pay extra for, so long as you have a choice and don't have to pay for these extras as a condition for staying in the home.

The most important of these is probably the choice of a "premium" room. A care home may decide that some rooms are more desirable than others, for instance because they are larger or have better views, and make an extra weekly charge if you choose one of those rooms. This is acceptable, so long as the operator of the care home guarantees that you will not have to leave the home if you stop paying the extra amount. However if you do decide to stop paying the extra, the provider may ask you to move to a different room.

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There may also be other smaller extras which the provider charges for, which are not related to meeting your health and care needs. You should make sure that you understand what exactly any extra charges are for, and what changes there will be if you stop paying them. The provider can't charge extra for anything which is necessary for you to be part of the communal life of the home.

■ What extra support could I pay for if I get services in my own home?

If you are living in your own home, you can pay privately for any support which the NHS hasn't assessed that you need.

You can also decide that you don't want the NHS to meet some of your needs, because you would rather make arrangements privately.

In either case, there needs to be a clear separation between the NHS funded support and the support that you are arranging privately. If possible, your privately-arranged support should be provided by different care workers or therapists, and should take place at different times.

Sometimes this may not be possible. For instance someone eligible for NHS CHC might want to have live-in care workers, for peace of mind and companionship, when their health and care needs could be met by care workers visiting for a few hours each day. In this case, the best arrangement might be for the live-in care workers to provide the support identified in the health and care plan, but with an agreement that they will keep clear records of the time that they spend on tasks in the NHS CHC care plan. In any arrangements, it will be important to be clear when any care workers supporting you are carrying out tasks on behalf of the NHS, and when they are working for you privately.

■ What if I am already living in a care home?

Some people may already when they become eligible for NHS CHC be living in a care home which does not accept NHS rates.

In Northumberland, all care homes for older people have agreed that they will only ask for additional payments on top of NHS CHC rates, or ask a resident to choose between paying their full fees or leaving the home, if they can demonstrate that they clearly explained the position before the resident moved in.

More generally, the Competition and Markets Authority, the national body responsible for identifying unfair market practices, has spelled out in guidance for care home operators its expectation that they must clearly explain their policies about this issue to residents before they move into a care home.

What if I don't have time to sort this out before moving into a home?

If you urgently need 24-hour care, for instance after a hospital stay, and you need time to think about how different choices might affect you financially, we would strongly recommend you to consider letting us arrange a short-term stay in a care home which may not be the one you will ultimately choose.

Please ask the health and care professionals you are in touch with if you need advice.

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