**What is Continuing Care?**

Continuing Care is the name given by the NHS to a source of funding for care home costs, or for carers to provide services in the patient’s own home.

Eligibility for NHS Continuing Care is determined by the local Clinical Commissioning Group (CCG). If a person is found to be eligible for funding, then it is the local CCG which funds the patient’s care.

The NHS provide care services free of charge if the patient has a need for nursing care (as opposed to the sort of care that a domestic assistant usually provides to someone in their own home or in a residential home).

**Will I , or someone I know, be eligible?**

Social Services are prohibited from providing services which must as a matter of law be provided by the NHS, but very often families are asked to pay for care that should, by law, be free of charge. Even if you do not wish to have contact with Social Services, the law relating to eligibility for free care refers to their duties.

The decision as to whether a person is eligible rests upon an assessment of whether the person has a health related need, as opposed to a need for domestic assistance. A National Framework was created to encourage more uniform decision-making across the CCGs. This guidance states that certain characteristics of need, and their impact on the care required to manage them, helps to determine whether the type or amount of care required is beyond the limits of what Social Services are under a duty to provide.

As part of the assessment, a Decision Support Tool (DST) is created to compile evidence from the medical and care records of the person being assessed. There are 12 care domains under consideration, such as behaviour, cognition, mobility, continence and nutrition. Levels of need are described in the DST alongside each care domain, and the evidence is matched to the level of need with the closest fit.

During the completion of the DST, the NHS will take into account the following 4 characteristics of need:

* Nature: The type of needs and overall effect of those needs on the individual, including the type of interventions required to manage them
* Intensity: both the extent and severity of the needs, including the need for sustained care
* Complexity: how the needs arise and interact to increase the skill needed to monitor and manage the care
* Unpredictability: the degree to which the needs fluctuate, creating difficulty in managing needs and the level of risk to the person’s health if adequate and timely care is not provided

Each of these characteristics may, in combination or alone, demonstrate a primary health need. If the need for care is primarily health related, then the person should be eligible for free care.

**How we can help**

We can review the evidence in the claim and advise you on the likely chances of success and the eligibility criteria, as set out in the National Framework.

If you require assistance with the assessment process itself, we can liaise with the NHS and prepare the Continuing Care claim on your behalf, such as providing written representations based on the care and medical records.

If you would like further advice about Continuing Care funding, please contact Knights Professional Services.

*Knights Professional Services provides the Free Legal Helpline for ICAEW Members (terms and conditions apply). If you would like more information about the helpline or other services Knights can provide ICAEW members please visit* [*http://www.icaew.com/en/membership/offers-discounts-and-services/business-offers-discounts-services/business-support/knights-professional-services*](http://www.icaew.com/en/membership/offers-discounts-and-services/business-offers-discounts-services/business-support/knights-professional-services)

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