

Reference: FOI.ICB-2223/165

Subject: CHC and patients with neurological conditions

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
<p>1. For each of the financial years April 2020- March 2021 and April 2021- March 2022, and for the current financial year so far:</p> <ul style="list-style-type: none"> a) How many people living with a neurological condition in your region received an initial checklist assessment for CHC, and how many of these went on to the full assessment? b) What proportion of people a neurological condition who received a full CHC assessment in your region were found to be eligible for CHC? c) How many people living with a neurological condition in your region received a fast-track CHC assessment? d) What proportion of people living with a neurological condition in your region who received a fast-track assessment were found to be eligible for CHC? 	<p>CHC is not diagnosis-led, and therefore the specific diagnosis of individuals referred for a CHC assessment is not routinely recorded on the ICB's (Integrated Care Board) patient record system.</p> <p>The ICB receives over 4,000 referrals for standard CHC and Fast Track CHC per year, of which c. 3,500 are found eligible.</p> <p>To source this data would require a case-by-case review of over 8000 referrals to identify those with a neurological condition, which at 5 mins per case would exceed 18 hours.</p> <p>The ICB has calculated that this would take over 18 hours of staff time to extract the requested information from the files and therefore has applied Section 12 (The cost of compliance exceeds the appropriate limit of 18 hours). In this case the ICB has determined that it would take on average 5 minutes to review each file of which there are around 8000. This would take a minimum of 666 hours of staff time to complete.</p>

<p>2. For each of the financial years April 2020- March 2021 and April 2021- March 2022 and for the current financial year so far, please provide:</p> <p>a) The number of decisions made in your region resulting in ineligibility for NHS continuing healthcare for a person living with a neurological condition that were subsequently overturned following local review.</p> <p>b) The number of requests made in your region for an independent review panel following a local review upholding a decision of ineligibility for NHS continuing healthcare for a person living with a neurological condition.</p> <p>c) The number of decisions of ineligibility for NHS continuing healthcare for a person living with a neurological condition in your region that were overturned at the independent review panel.</p>	See above.			
<p>3. For each of the financial years April 2020- March 2021 and April 2021- March 2022 and for the current financial year so far, please provide:</p> <p>a) The median time taken in your ICB area to conduct NHS continuing healthcare assessments, from receiving the initial checklist to notifying the applicant of the eligibility result.</p>		2020-21	2021-22	2022-23 (YTD)
	Median time (days) from CHC referral to decision	28	27	24
	Shortest time (days) taken from referral to decision	5	1	4
	Longest time (days) taken from referral to decision	613	449	134

<p>b) The range of time taken (i.e. shortest time and longest time) in your ICB area to conduct NHS continuing healthcare assessments, from receiving the initial checklist to notifying the applicant of the eligibility result.</p> <p>c) The number of eligibility reviews for people who have previously been found to be eligible for CHC funding which result in CHC funding being taken away.</p>	<p>Number of reviews resulting in a "no longer eligible decision"</p>	<p align="center">20</p>	<p align="center">22</p>	<p align="center">11</p>
<p>4. Does your ICB always ensure involvement of professionals with expert knowledge of the neurological condition when conducting assessments of people for NHS continuing healthcare? For example an MND specialist nurse or a neurologist.</p>	<p>The ICB's CHC team engage with any professionals involved in the care and support of the individual being assessed, to ensure that a holistic view is captured of the individual's needs.</p>			

The information provided in this response is accurate as of 3 February 2023 and has been approved for release by Rosi Shepherd, Chief Nursing Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.