

# Continuing NHS Healthcare

## 4. How is CHC organised



This document was written by the **Welsh Government**. It is an easy read version of **Continuing NHS Healthcare Information Booklet for Individuals, Families and Carers**.

October 2022

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# About this booklet



This booklet is **part 4** of 5 easy read guides to Continuing NHS Healthcare.



It is based on a guide written by Welsh Government. You can read the original guide here: [gov.wales/continuing-nhs-healthcare-chc-information-booklet-individuals-families-and-carers](http://gov.wales/continuing-nhs-healthcare-chc-information-booklet-individuals-families-and-carers).

There are 5 easy read booklets all together:

1. What is Continuing NHS Healthcare
2. An easy read guide to CHC assessments
3. Who is eligible for CHC?
4. How is CHC organised
5. What happens if I'm not eligible for CHC?



You can find them all here: [gov.wales/continuing-nhs-healthcare-chc-information-booklet-individuals-families-and-carers](http://gov.wales/continuing-nhs-healthcare-chc-information-booklet-individuals-families-and-carers).



This booklet was made into easy read by **Easy Read Wales**. To tell us what you think about this easy read version, [click here](#).



Llywodraeth Cymru  
Welsh Government

Please contact Welsh Government if you need this booklet in any other format.



You can find information about Continuing NHS Healthcare on the Welsh Government website here: [gov.wales/national-framework-nhs-continuing-healthcare](http://gov.wales/national-framework-nhs-continuing-healthcare).

**Or you can contact Welsh Government for more information:**



**By post:** Welsh Government  
Cathays Park  
Cardiff  
CF10 3NQ



**By phone:** 0300 0604400

**By e-mail:** [customerhelp@gov.wales](mailto:customerhelp@gov.wales)



You can find contact information for your Local Health Board in **booklet 1 page 16**.



Or you can find them on the NHS Direct Wales website: [www.nhsdirect.wales.nhs.uk/localservices/localhealthboards](http://www.nhsdirect.wales.nhs.uk/localservices/localhealthboards).

# How is CHC organised?



When you are told in writing that you are **eligible** for CHC, you will also be sent:



- Your care plan.



- Or information about what happens next if your care plan is not ready yet.



**Eligible** means you have the right to get CHC because you meet the conditions.



Your Local Health Board is responsible for paying for your care package, from the date they accept the **MDT's** decision.



**MDT** is short for **Multi-Disciplinary Team**.

The **MDT** is a group of health and social care professionals. They work together to find out if you are **eligible** for CHC.



For more information about the **MDT**, go to **booklet 3 page 10**.



You can ask your Local Health Board to pay you back any money you have spent on your care:



- since the date they accepted the **MDT's** decision,
- or from the date the **MDT** can say you first had a **primary health need**.

## How long will all this take?



If you are **eligible** for CHC, your care package should be organised within 2 weeks of the **MDT meeting**.



See **booklet 3 page 10** for information about the **MDT meeting**.



Your care should be in place within **8 weeks** of your very first **assessment**, that showed you may have a primary health need.



An **assessment** is when health and social care professionals work together to decide what your needs are. And how your needs should be met.



For example, this could be the **CHC Checklist Tool**. See **booklet 2 page 12** for information about the CHC Checklist Tool.





It is only ok for this to take longer than 8 weeks if you need more time for **rehab** or **reablement**.

**Rehab** and **reablement** is the care and support you get after an illness or accident, to help you be able to look after yourself again and live as independently as possible.



It should not take longer than 8 weeks for any other reason.

## How will my CHC be provided?



Your Local Health Board will decide what care you need to meet all your:



- health needs
- and social care needs.

Your Local Health Board should think about:



- what you want



- any social care you already get from your Local Authority



- and other needs you have, outside of CHC.



Your Local Health Board will work closely with you to agree your CHC care in order to meet your needs.



It may be different to the package you had under your social care.

## Your care and support



You may already have care workers who you have good relationships with.



Your Local Health Board and Local Authority should try to make sure that any care you already have in place is not disrupted.



If changes need to be made, they should be well planned. Any change to your care should be smooth and safe.

## Direct payments and CHC



**Direct Payments** is money you can be given by your Local Authority instead of a service. You can use it to buy your own support and services.



Your Local Health Board cannot provide you with **Direct Payments**.



If you already get **Direct Payments** and then become **eligible** for CHC, your **Direct Payments** will stop.



Your Local Health Board **must** work **with** you to make sure you still have **voice and control** over your care and support.



Your Local Health Board **must** treat you like an equal partner when planning your care.



**They must do their best to keep the same staff as you had before. If this is what you want.**



The Local Health Board should think about different ways to give you voice and control over your care and support. For example:



- The Local Health Board could hire the staff you already use. For example, a personal assistant that you want to keep. As long as they have the right skills to carry on meeting your needs.



- The Local Health Board could pay the money for your care into an **Independent User Trust**. This is a group of people who become responsible for providing your care. This could include relatives or other trusted people.

You might be able to keep **some** of your **Direct Payments** for:



- your social care that your Local Authority is still responsible for



- and that is not part of your CHC care plan.



Everyone must work together, to provide you with options that help you stay as independent as possible.

## Where your care is provided



Your Local Health Board should work closely with you when writing your care plan.



What you and your family or **advocate** want should be thought about.



Together you will decide where your care will be provided. This could be:

- in your home
- in a care home
- in supported living
- in a **hospice** - a place where people get specialist care and support when they are close to the end of their life.



Your Local Health Board will also think about the risks and benefits of where your care is provided.



You should have enough funding to pay for the care that best meets your needs.





If you are not happy with the care package your Local Health Board has suggested, tell them.



If you cannot solve this with your Local Health Board, you can complain.



You can use the NHS complaints process. For more information about this go to **booklet 1 page 21**.

## CHC in your own home

Your care will be given in your home by:



- Carers
- District nurses
- Any other staff needed



## CHC in a hospice



If you are near the end of your life, you may need CHC in a hospice.



But you may prefer to stay at home at this time. This is your choice.

## CHC in a care home



Some people live in care homes that provide **personal care only**.



Some people live in care homes that provide personal care, **and nursing care**.

If you live in a care home and become **eligible** for CHC:



- The NHS will make a contract with your care home. This is a written legal agreement between the NHS and your care home.



- The NHS will pay your care home to provide **all** your health and social care services.



- **And** the NHS will pay your care home for your accommodation fees – like rent and food.

Here are some important issues to know about:



- If you need to move into a care home, what you want should be thought about when a care home is chosen.



- You should live in the care home that best meets your needs. It does not matter if your Local Health Board already has contracts with certain care homes.



- Some people may need a higher cost care home. This may be because they have certain needs that can't be met anywhere else.



If you need a higher cost care home, your Local Health Board should think about paying this extra cost. They must balance spending public money wisely with best meeting your needs and wants.



- If you already live in a care home, and want to stay there, your Local Health Board needs to check that your needs can be met there. If not, you will need to talk about your options with your Local Health Board.

## What happens if you already live in a high-cost care home?



If you already live in a care home when you become **eligible** for CHC, you need to talk to your Local Health Board about whether you can stay there.



Especially if your care home costs more than the Local Health Board would usually pay.

The Local Health Board must think about:



- Why you want to stay there



- Whether staying there would be best for you

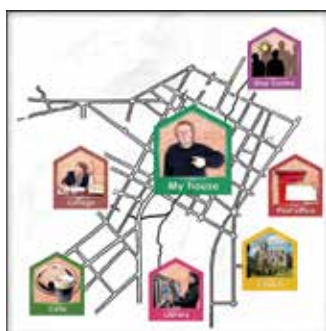


- What the risks of moving you might be



Your Local Health Board should think about paying for your high-cost care whilst they are deciding whether to pay for it going forward.

## **Moving to a care home in a different part of Wales**



You may want to move to a care home that is closer to your family. This may be in another Local Health Board area.



You can ask your Local Health Board if you can do this. It is their decision whether to allow this.



If you do move to another area, your Local Health Board is still responsible for paying for your CHC.

## Reviews



Your CHC should be checked to make sure:

- Your care plan still meets your needs
- Your care still meets your needs



In most cases there will be no need to check if you are still **eligible** for CHC.



Your CHC will be checked within 3 months of your care plan being provided. Unless you need it to be checked sooner.



After that it will be checked every year. But if your health is likely to get worse, your CHC should be checked more often.



If your situation suddenly gets worse, your CHC should be checked within 2 weeks.



You should be told what dates your checks, or reviews will happen on.



If any of your care or support needs to change, the funding you get to pay for your care may change.



Your funding should not be stopped until your Local Health Board and Local Authority have done another **assessment** of your needs first.





They must work together with you when they are thinking about changing your care.



If are no longer **eligible** for CHC, your Local Health Board must find out how your care will be paid for going forward before removing your CHC funding.



Any suggested changes to your care must be put to you in writing.



If your Local Health Board and Local Authority cannot agree on the changes, the funding you already get should stay in place until they can agree.





If you are unhappy with any part of the review, speak to your Care Co-ordinator.



You can ask for your needs to be **assessed** again. And for your care plan to be checked again.



If you are still unhappy after this, you can complain using the NHS complaints process.



For more information about this go to **booklet 1 page 21**.

# Hard words

## Assessment

An assessment is when health and social care professionals work together to decide what your needs are. And how your needs should be met.

## Direct Payments

Direct Payments is money you can be given instead of a service. You can use it to buy your own support and services.

## Eligible

Eligible means you have the right to get CHC because you meet the conditions.

## Multi-Disciplinary Team or MDT

A Multi-Disciplinary Team is a group of health and social care professionals. They work together to do your CHC assessment. We call them the MDT for short.

## Rehab and reablement

Rehab and reablement is the care and support you get after an illness or accident to help you be able to do your day-to-day tasks.