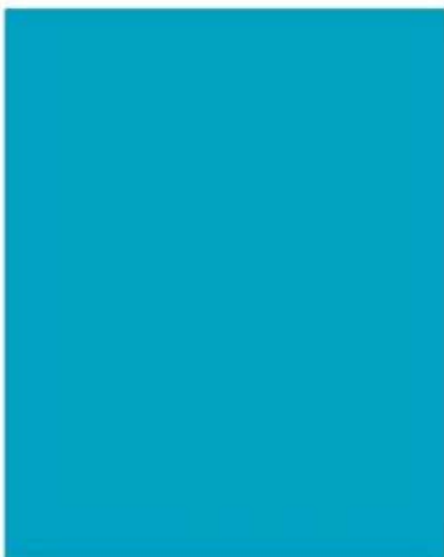


NHS Continuing Healthcare

Independent Review Panels



This leaflet is designed to give members of the public an overview to the NHS Continuing Healthcare Independent Review Panel process

What is NHS Continuing Healthcare?

NHS Continuing Healthcare (NHS CHC) is the name given to a package of care which is arranged and funded solely by the NHS for individuals outside of hospital who have on-going health needs. This package is often delivered in an individual's own home or a care home.

What does the Independent Review Panel do?

The Independent Review Panel (IRP) process has been set up to enable individuals and/or their representatives to look at:

- the primary health need decision by a Clinical Commissioning Group (CCG);
- or the procedure followed by a CCG in reaching a decision about their eligibility for NHS Continuing Healthcare; and to make a recommendation to NHS England in the light of its findings on the above matters.

What the IRP cannot do

The IRP has not been established to

- review challenges to decisions relating to claims for funding prior to 1 April 1996 as there was no requirement for NHS organisations to have NHS CHC eligibility criteria in place prior to that date; or
- review challenges to decisions relating to claims for funding up to 1 April 2004 as the period for such claims expired in November 2007 unless exceptional circumstances apply.

What should you do if you have a different complaint?

Your local CCG will deal with complaints, via their complaints procedure, including but not limited to:

- the length of time taken to process a request for NHS Continuing Healthcare;
- the type and location of any offer of an NHS Continuing Healthcare package or the content of any alternative care packages that have been offered;
- the treatment or services a patient may be receiving or has received; or
- if a CCG refuses to consider a request for an assessment following a negative checklist or a review of a previous decision; and

- the calculation of any redress payment.

What you can expect: proceedings on the day

At the start of the IRP, the Chair will introduce members of the panel, the NHS England representative and the clinical advisor (if applicable) to all present and set out how the meeting will be structured.

The individual/family representative(s) and CCG representative(s) are then invited to make their representations and discuss inclusively the decision support tool/needs portrayal in an open forum. The Chair will make sure that everyone has had an opportunity to contribute to the discussions and to clarify any outstanding issues.

In closing the open forum element of the meeting, the Chair will make sure that the family and presenting CCG representative(s) understand when they can expect a copy of the report from NHS England. Then the family and presenting CCG will be asked to leave.

The IRP will then deliberate in private and comment on any differences of opinion between the family representatives and the presenting CCG on the decision support tool/needs portrayal. The clinical advisor and NHS England representative will remain for this part of the panel meeting.

A report of the IRP findings will then be sent to the individual or their representative and to the relevant CCG.

Attendance by solicitors

Some families appoint a solicitor to act as an advocate for them at IRP. It is important for them to be aware that the IRP is not a legal process. Chairs of IRPs will not allow proceedings to be drawn into discussions on points of law.

Role of the clinical advisor

Some IRPs may have a clinical advisor present. The role of the clinical advisor is to:

- advise the IRP on the original clinical judgments and how they relate to the National Framework. The clinical advisor should not provide a second opinion on the clinical diagnosis, management or prognosis of the individual;
- examine the information provided in the case file and through sensitive data;
- advise on the wider nature of conditions and how different needs may interact;
- ensure that no significant clinical issues have been overlooked by the IRP during their deliberations; and

- provide any other observations on the holistic clinical care needs associated with the condition.

More information

A leaflet with further detail can be found on the Department of Health website:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/193700/NHS_CHC_Public_Information_Leaflet_Final.pdf