

## Support for Care Needs

When attempting to navigate through the maze of care support, there is one absolutely crucial distinction to be aware of. This is the difference between a **social care** need and a **health care** need.

**Social care** is the phrase used to describe help and support for people – both practical and personal – with the activities of daily living so that they can live as independent a life as possible. It can include anything from help getting out of bed and washing through to care homes, meals at home and drop in centres.

**Health care** is the treatment, control or prevention of a disease, illness, injury or disability and the care or aftercare of a person with those needs.

If you are responsible for managing the care of an older person who needs support in order to manage, then you need to know the implications of this distinction. This is because social care, if it is not arranged privately, is the responsibility of the Local Authority and is means tested. Health care is obviously available through the NHS when delivered by GPs and hospitals. However, in addition there is a little known provision called NHS Continuing Healthcare, now the responsibility of GP Commissioning Groups.

### *NHS Continuing Healthcare*

Continuing Healthcare provides a package of care arranged and entirely funded by the NHS to meet physical and/or mental health needs that have arisen “solely because of disability, accident or injury”. It can be provided in a care home, a hospice or your own home. There, of course, quite stringent criteria applied in assessing eligibility for this care, relating to the nature, intensity and unpredictability of the need.

The following quotation from the AgeUK website explains exactly why this is so important.

*'When you have long-term care needs it is usually obvious whether the help you need is the responsibility of the NHS or of social services. However, if you have complex needs, the boundaries between health and social care may not always be clear. As services provided by the NHS are free whereas those arranged by social services are means tested, the outcome of any decision as to who has overall responsibility for your care can have significant financial consequences.'*

[http://www.ageuk.org.uk/Documents/EN-GB/Factsheets/FS20\\_NHS\\_continuing\\_healthcare\\_and\\_NHS-funded\\_nursing\\_care\\_fcs.pdf?dtrk=true](http://www.ageuk.org.uk/Documents/EN-GB/Factsheets/FS20_NHS_continuing_healthcare_and_NHS-funded_nursing_care_fcs.pdf?dtrk=true)

To put it another way, two people may be equally dependent on care of much the same type to meet their daily needs including when they are at the end of their life. However if their need is defined as a primary health need and they meet the eligibility criteria then care, whether in a care home or their own house, will be provided free by the NHS. If, however, the need for care is “just” because someone is old and frail then it will be subject to the Local Authority means test.

Indeed the boundaries are so blurred that Nick Clegg trailed the Coalition Government’s announcement of the new cap on social care by referring to the unfairness of developing “the wrong kind of illness” such that:

*“if you develop cancer the NHS will pay for your care, no matter who you are and what your income...if you develop dementia, and the care you need isn’t radiotherapy or expensive drugs but help with washing, dressing and going to the bathroom, you could find yourself confronted with bills of more than £100,000”.* Sunday Telegraph 10<sup>th</sup> February 2013

Because there is a certain Alice in Wonderland quality to all of this, it is worth making the effort to understand the parameters, and how they may apply in your particular circumstances now or in the future. Above all, don’t wait for someone to tell you about it. If you think the person you are responsible for may be eligible, push to have an assessment for NHS Continuing Healthcare carried out (or to have them re-assessed if they were previously deemed ineligible). Ask your GP or any other involved health professional to help in getting this done and if necessary contact the manager with responsibility for Continuing Healthcare in your local GP Commissioning Group. Even if Continuing Healthcare is not offered, if healthcare or nursing needs are identified then there may be an entitlement to some NHS nursing support at home as part of a joint package of support.

The AgeUK website (reference above) gives a lot more information on NHS Continuing Healthcare and the criteria that are used when assessing eligibility. This also includes details of fast track arrangements that can be triggered to get continuing healthcare put in place within 48 hours when someone has a rapidly deteriorating condition with an increasing level of dependency and may be approaching the end of life.

CarersDirect offers further practical guidance on Continuing Healthcare and a helpline - 0800 802 0202 - for more support in answering any specific questions you may have:

<http://www.nhs.uk/CarersDirect/guide/practicalsupport/Pages/NHSContinuingCare.aspx>