

I would be grateful if you could provide the following information in relation to continuing healthcare assessments in the Aneurin Bevan University Health Board area:

1. How many NHS continuing healthcare assessments have been undertaken in each of the past 5 years?

The responsibility for Continuing NHS Healthcare (CHC) within the Health Board sits within three divisions which are outlined below:

- Complex Care
Adults (over 18 years) who have a physical disability.
- Mental Health & Learning Disabilities
Adults (over 18 years) who have a mental health/learning disability.
- Family & Therapies – Childrens Continuing Healthcare
Young persons (under 18 years) who have a physical/ mental health or learning disability.

Please note the Health Board’s datasets do not capture the total overall number of assessments undertaken, only the number of assessments received (for example, following an assessment if the outcome is that the patient would have a primary health need and are eligible for CHC then this would be captured. If the outcome is that the patient does not have a primary health need then the assessment will not be captured by the commissioning teams. Therefore, the data reported below regarding how many assessments were undertaken only reflects those individuals who were assessed with an outcome they were eligible for CHC.)

The figures below relate to adult palliative, community, EMI and general nursing for the financial year:

End of financial year	Number of assessments received
2018-2019	1049 (includes 629 fast track)
2019-2020	1,179 (includes 688 fast track)
2020-2021	1,228 (includes 760 fast track)
2021-2022	1,503 (includes 825 fast track)
2022-2023	1,351 (includes 725 fast track)

The figures below relate to Mental Health & Learning Disabilities (up to 31st December)

End of year	Number of assessments received
2018	84
2019	91
2020	93
2021	94

2022	97
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The figures below relate to Childrens Continuing Healthcare (up to 31st December)

End of year	Number of assessments received
2018	42
2019	45
2020	33
2021	45
2022	44

2. How many reviews of NHS continuing healthcare assessments were requested and how many resulted in a change in eligibility for NHS continuing healthcare in each of the past 5 years?

Continuing Health Care reviews are held after the first 3-months following eligibility agreement and thereafter a minimum of annually. Change in eligibility is minimal however the Health Boards datasets do not capture this information.

3. How long did it take to determine the outcome of reviews of NHS continuing healthcare assessment decisions in each of the past 5 years?

Childrens Continuing Healthcare

When a review of a younger person is held the outcome is recorded immediately in the individual's clinical record and eligibility/or change in eligibility is reported as part of the quality assurance process that takes place within 2-4 weeks after the review, this is then discussed at peer review MDT and Children and Young People's Panel, which both take place monthly.

Complex Care, Mental Health & Learning Disabilities

When a review of NHS continuing healthcare is held the outcome is recorded immediately in the service user's clinical records and any change in eligibility is reported at Quality Assurance Panel which is held weekly, after the quality assurance process has concluded.

4. What was the longest time between a review of a NHS continuing healthcare assessment and the date the review was requested, indicating if the case is still ongoing, in each of the past 5 years?

Childrens Continuing Healthcare

No requests for review have been received. Reviews are completed regularly as part of the current framework.

Complex Care, Mental Health & Learning Disabilities

Reviews of individuals are undertaken annually as a minimum without receiving a requests. However, should a request be received due to a change or deterioration in clinical need this is undertaken as soon as possible.

Please note the COVID-19 pandemic would have halted the ability to undertake some CHC reviews, especially those within an enclosed setting due to the reduced footfall and closure of care homes due to a COVID-19 outbreak.