*Personal Health Budgets (880 – 77%)*

*NHS Continuing Healthcare Assessment (480 – 76%)*

*CCG Funding (320 – 80%)*

**CCG FUNDING FOR CARE**

If you, or a loved one, has a significant healthcare need, in which care is the primary need, you could be entitled to NHS Continuing Healthcare funding from your CCG (Clinical Commissioning Group). This funding is essentially a pot of money with which you can pay for a ‘package’ of care.

This type of funding is not means tested so it does not matter what your income is or how much you have in your savings. As long as you meet the NHS Continuing Healthcare Assessment criteria you will receive funding.

The assessment is not based on a specific condition, but instead based on specific ongoing care needs. These needs could be present from birth, or it could have presented later in life due to a condition or following illness or injury.

An NHS Continuing Healthcare Assessment is usually suggested to you by someone who has been involved in your care such as a healthcare specialist or GP. You can also request an assessment yourself if you think you may be eligible. You would need to make this request to your GP or other healthcare professional.

**What next?**

If you think you may be entitled to NHS Continuing Healthcare funding, you must be referred for a full assessment by a healthcare professional such as a nurse, GP or social worker. They will need to complete a checklist to identify your care needs and identify whether you may be entitled to funding, and as such should undergo a full assessment.

**What does an NHS Continuing Healthcare Assessment entail?**

If you have been referred for an NHS Continuing Healthcare Assessment, evidence will be collected from all relevant health and social care professionals who are currently involved in your care. This will include information about your physical health, mental health and social care needs. If your condition is deteriorating quickly, you may be entitled to a Fast Track Assessment which is a quicker process.

A team of health and social care professionals will then meet to consider this information and make a recommendation about whether you are eligible for funding. You and/or a representative can attend and take part in this meeting if you wish.

The recommendation is given to your Clinical Commissioning Group (CCG), which would be responsible for funding the care. The CCG will confirm this recommendation. Only in exceptional circumstances is the recommendation not accepted. The CCG will then write to you to confirm their decision.

**What happens once funding is awarded?**

CCG Funding can be used in any setting, including your own home, delivering the care and support you need to remain active and independent regardless of your health needs.

The CCG will discuss the care and support package that you require with you – including where you want this care to take place and whether you want it to be paid into a Personal Health Budget.

Your care package will be initially reviewed after three months and then at least once a year. If your care needs change in the future, your funding could change. In this case you would have the right to challenge this decision.

**Personal Health Budgets**

If you are in receipt of CCG Funding through NHS Continuing Healthcare, you have the right to ask for this to be paid into a Personal Health Budget. This will give you greater choice and control over how the money is spent, allowing you to access the most appropriate services for your health and wellbeing needs.

When it comes to healthcare, the NHS is aware that a one-size-fits-all approach simply cannot meet increasingly complex needs. Personal Health Budgets give you the flexibility to tailor the care you receive, taking into account your needs, wishes and expectations.

You can choose one of three ways to access your Personal Health Budget:

* You can receive a direct payment into your bank, allowing you to purchase your own care and support
* You can choose for a third-party Trust or organisation to hold the money and help you purchase the care and support you require
* You can opt for a ‘notional budget’ where no money changes hand and the NHS arranges your care and support

If the budget includes education provision, this will be delivered through an Integrated Personal Health Budget is where funding comes from both the Local Authority and the NHS, creating a seamless approach to the care provided.

**What happens if CCG funding is not awarded?**

If following an NHS Continuing Healthcare Assessment it is recommended that you are not eligible for CCG Funding, you could be entitled to funding from your Local Authority. (Link)

If you believe the recommendation is wrong, you can appeal the decision through the process indicted in the decision letter you will receive from the CCG. This could involve asking the CCG to reconsider the decision or asking for an independent review of your case.