People and Health Scrutiny Committee

CHC and Joint Funding for Dorset Council over the last 3 years 2023-2026

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Purpose for report

- **Purpose of report:**
  - To understand the CHC and Joint Funding performance in the Dorset Council area.

- **Recommendations:**
  - That a deep dive is carried out into the CHC and Joint Funding arrangements in the Dorset Council area.
  - That the report presented to People and Health Scrutiny committee in April 2026 is reviewed.

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What is Continuing Healthcare

- NHS Continuing Health Care (CHC) is a package of care for adults aged 18 years or over which is arranged and funded solely by the NHS
- In order to receive NHS CHC funding, individuals have to be assessed by ICB's according to a legally prescribed decision making process to determine whether an individual has a primary health need
- The National Framework for NHS Continuing Healthcare and NHS funded nursing care (revised 2022) sets out the principles and processes for determining eligibility
- Various forms of CHC funding:
  - Standard CHC – for those deemed to have needs which in totality amount to a primary health need
  - Fast track CHC – for those who are rapidly deteriorating and anticipated to be in final weeks of life
  - Funded Nursing Care (FNC) contribution – for those receiving nursing care, a contribution made towards the cost of nursing

National framework for NHS continuing healthcare and NHS-funded nursing care - GOV.UK

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What is Joint Funding

- When an individual is not considered eligible to NHS CHC funding but are deemed to have some health needs, the NHS may contribute to the funding of a joint package of care

- The Local Authority should meet the Care Act eligible outcomes for an individual as defined through a Care Act assessment

Care and support statutory guidance - GOV.UK

- The Local Authority is not permitted to meet health needs. S22 Care Act 2014 sets this out as follows:

S22 - Exception for provision of health services

(1)A local authority may not meet needs under sections 18 to 20 by providing or arranging for the provision of a service or facility that is required to be provided under the National Health Service Act 2006 unless—

(a)doing so would be merely incidental or ancillary to doing something else to meet needs under those sections, and

(b)the service or facility in question would be of a nature that the local authority could be expected to provide.

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Role of Local Authorities in CHC assessment

- The National Framework for Continuing Healthcare sets out the role that Local Authorities must play in participating in the decision support tool (DST) assessment used by the NHS to make a decision about eligibility for CHC.

- Paragraph 141 and 142 of the National Framework for CHC requires Local Authorities to provide advice and assistance to cooperate with the ICB in participating in the multi-disciplinary decision support tool assessment.

- In Dorset Council adult social care these duties are delivered through a specialist team of practitioners working in a CHC hub.

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Understanding the Dorset Council data

- Report uses available National CHC data sets and local Dorset Council CHC/joint funding data from April 2023 to year to date 2025/26 for CHC and joint funding activity.
- It is important to note that:

i) Within the National CHC data set:

*** data for Dorset region includes the full Dorset ICB footprint which is wider than the Dorset Council boundary**;

* the local Dorset Council **data held by the Local authority will only be a part of the full Dorset ICB dataset**.

ii) Whilst Dorset Council engages in the CHC process for people that would otherwise be funding their own care (self funders), not all self funding residents will want Dorset Council involvement and may therefore not form a part of the local Dorset Council dataset within this report.

However, it is important to note that any trends within CHC and joint funding process and **outcomes will impact self funding residents as well as those drawing on care and support from Dorset Council**.

iii) Dorset Council **does not hold a full dataset for fast track and funded nursing care** so this report will only refer to National datasets for these areas of health funding.

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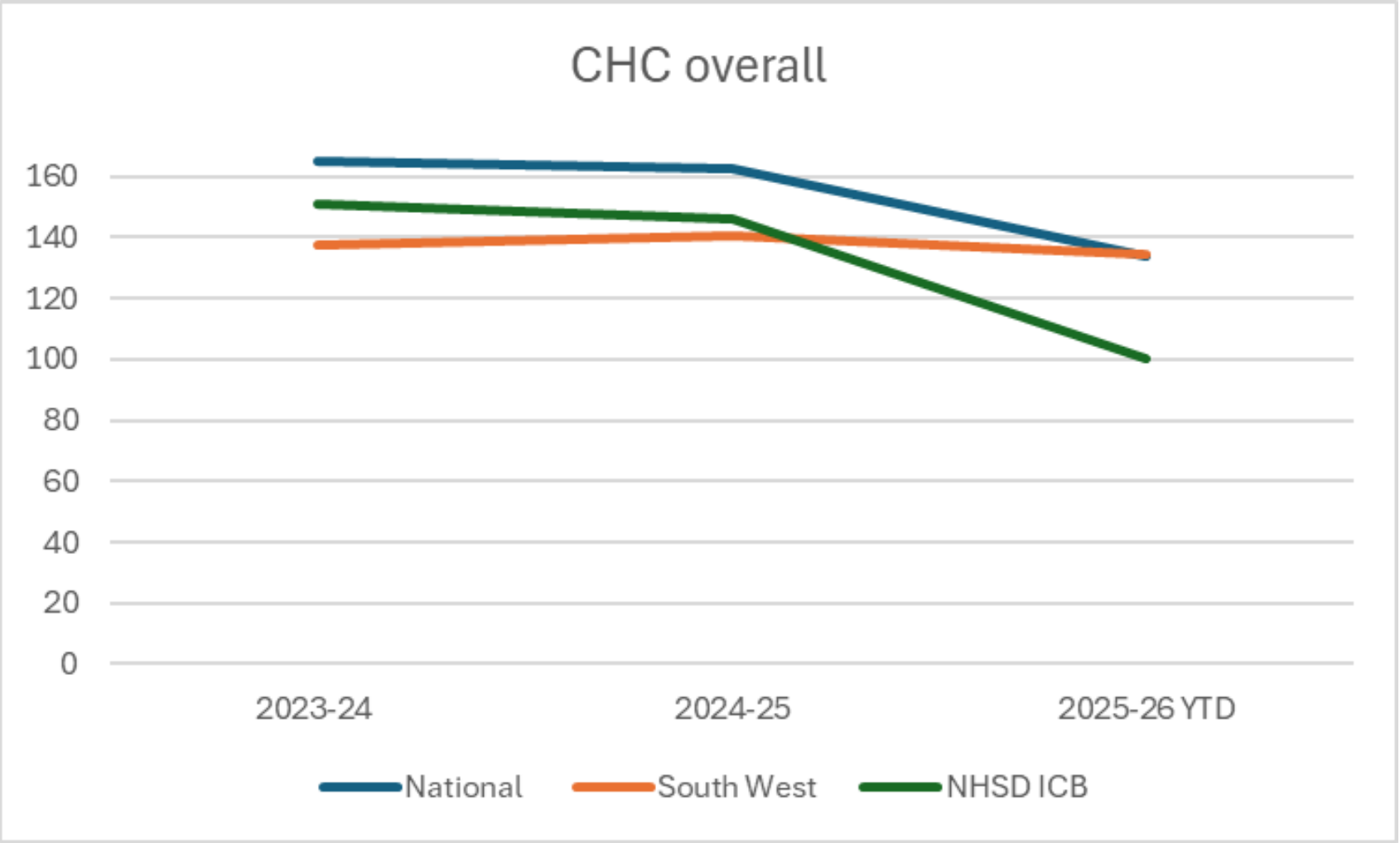
Trends over last 3 years and impact on people

- A shift in the outcomes of assessment for CHC and joint funding seen over the last three years
- The trends seen within Dorset ICB, particularly in 2025/6 to date, appear to be significantly out of line with the trends seen in both South West region and National data as reported in NHS England statistics for Continuing Healthcare and NHS funded nursing care.

Statistics » Continuing Healthcare and NHS-funded Nursing Care

- An increase in the numbers of people being deemed non eligible for CHC and joint funding in this current financial year (2025/2026), either following a new application or following a review of those already in receipt of CHC, fast track and joint funding.
- The reduction in those being deemed eligible for CHC or receiving joint funding impacts residents in Dorset:
  - People may be required to fund their own care and support (self funders), or
  - People may need to draw on care and support from the Local Authority and may be required to contribute towards the cost of that care and support following financial assessment.
  - People and their carers/representatives may experience uncertainty, anxiety and distress caused by the CHC assessment/reassessment processes and changes to their care funding arrangements.

What does the National Data Set for CHC tell us?



Above chart uses NHS England data for overall CHC and Fast Track eligible numbers per 50K population

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National Statistics for 3 years – eligibility per 50K

Chart uses NHS England data for overall CHC and Fast track eligible numbers per 50K population to assess likely impact for the population within the Dorset ICB footprint.

	2023-24 – End Q4 year to date stats			2024-25 – End Q4 Year to date stats			2025-6 – End Q3 Year to date		
Type of CHC	National eligibility per 50K	South West region eligibility per 50K	NHSD ICB eligibility per 50K	National eligibility per 50K	South West region eligibility per 50K	NHSD ICB eligibility per 50K	National eligibility per 50K	South West region eligibility per 50K	NHSD ICB eligibility per 50K
Standard CHC	47.74	39.67	55.77	46.35	40.64	58.46	41.83	41.62	46.08
Fast track	117.03	97.78	95.23	116.03	99.86	87.36	91.87	92.56	53.97
CHC overall (Std and FT)	164.77	137.45	151.00	162.37	140.50	145.83	133.69	134.18	100.05
FNC	120.21	160.53	159.78	121.57	157.09	147.79	109.92	136.07	134.17

	Difference year to date eligibility per 50K 2023 to 2026			
Type of CHC funding	National	South West	NHSD ICB (NHS data using population data of 690,171	Approx number of people eligible (difference)
Standard CHC	-5.91	+1.95	-9.69	-133 people
Fast track	-25.16	-5.22	-41.26	-569 people
CHC overall (Std and FT)	-31.08	-3.27	-50.95	-703 people
FNC	-10.29	-24.46	-25.61	-353 people

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People previously funded by Dorset Council transferring to CHC funding

Dorset Council data details the number of people who draw on care and support from Dorset Council who have had an **eligible CHC determination** over the last 3 years

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Year	Total numbers of DC funded adults determined eligible	Number of DC funded adults determined eligible within Dorset ICB footprint	Number of DC funded adults determined eligible within out of area /other ICBs	Approximate cost of packages when DC funded
2023/24	37	36	1	£2,336,468
2024/25	34	30	4	£1,353,306
2025/26 (to 1/3/26)	24	22	2	£730,490

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Trends in checklist submissions being discounted

Dorset Council data also shows that there is increasing impact from the following:

i) CHC checklists submitted but discounted:

Whilst the submission of checklists via Dorset Council CHC hub remains relatively static, the numbers of checklists being discounted has increased and the numbers going to full assessment (DST) have reduced. This is particularly evident in year 2025/6 to date (data to 28/2/26)

Year	Number checklists submitted	Number checklists awaiting to be submitted	Number checklists discounted	Checklists that went to full assessment (DST)
2023/4 (full year)	170	0	22	148
2024/5 (full year)	169	0	29	140
2025/6 (to 28/2/26)	148	10	61	87

Trends in CHC determinations of non eligibility from new applications

Dorset Council data shows that there is increasing impact from:

ii) CHC determinations of non eligibility resulting from new CHC applications:

Whilst DC does not hold a full data set for previous years, in 2025/26 Dorset Council has **11 new CHC applications where the outcome has been non eligible, but where Dorset Council believe there is evidence of a primary health need.**

These are a matter of dispute between Dorset Council and NHS

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Trends in CHC determinations of non eligibility as outcomes from reviews of those previously in receipt of CHC funding

Dorset Council data shows there is increasing impact from:

iii) CHC determinations from reviews of people in receipt of CHC funding:

In 2025/26, NHS Dorset has undertaken a significant programme of review for people already in receipt of CHC eligibility. Whilst Dorset Council does not have a full dataset for previous years, in 2025/26 year to date to 1/3/26, **Dorset Council has seen 34 people being determined no longer eligible for NHS Continuing Healthcare from reviews**

- For 26 of those 34 people, Dorset Council believes there is evidence of people having a primary health need

Annual reviews for people in receipt of CHC funding should be held and further reviews in the event of a change in need.

The National Framework (paras 201-211) state that the primary focus of a review should be on whether care plan and arrangements are appropriate to the needs of the individual, with an expectation that in the majority of situations there would be no need to reassess eligibility.

Only where there is clear evidence of a change in needs to such an extent that it may impact on the persons eligibility for NHS CHC funding should a full assessment and completion of a new decision support tool be required.

Impact of trends on people and Adult Social Care

- **For people that need to draw on support from health and social care:**
  - **Anxiety and distress** caused by the process of having a review of the funding and care support arrangements
  - **Uncertainty** created through changes in funding authorities for their care and support
  - **Financial impact** of changes in funding – having to fund their own care and support which was previously provided free under NHS CHC
- **For Dorset Council:**
  - Skills, workforce and workload **pressures from supporting increasing numbers of people often with significant complexity of need and risk** with their care arrangements.
  - **Financial impact** of increasing numbers of people being determined as non-eligible for CHC and coming to the Local Authority for assessment/funding for their care
  - Significant pressure and **risk on Adult Social Care budgets where disputes are unresolved**.

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Dorset Council data: 25/26 impact of demand on adult social care

	Outcome	Numbers of people	Approx cost of packages	Overall impact
Eligible and transferred to NHS CHC funding	Eligible for CHC (previously DC funded from adult social care)	22	£530,587	**£730,490**
	Eligible for CHC (previously DC funded via childrens social care before 18th birthday)	2	£199,903	
Not accepted/determined non eligible for NHS CHC funding	CHC checklists not been accepted where DC is disputing	3	£261,237	**Estimated between £5,454,792* and £8,755,024****
	CHC new applications where DC is disputing outcome	11 (6 NHS Dorset and 5 out of area ICBs)	£1,806,059	
	CHC reviews where DC is disputing outcome	26	Estimated between £ 2,094,248* and £5,394,480**	
	CHC reviews where DC has agreed a non eligible outcome	18	£1,293,248	

Estimated cost pressures on Dorset Council Adult Social Care budget due to changes in CHC eligibility status

* based on average cost of packages determined as non eligible in year

** based on highest cost of packages determined as non eligible in year

Trends within joint funding

- For those people deemed non eligible for CHC but deemed by the ICB to have health needs, the NHS can agree to contribute to a jointly funded package of care.

- There are various forms of jointly funded care - this report does not include s117 mental health joint funded packages of care

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Joint funding trends over 3 years

A significant change in 2025/2026 year to date with the numbers of new joint funded applications being agreed and the numbers of people becoming non eligible for health contributions to joint funded packages of care.

Financial Year	Numbers of joint funded packages at start of year (excl s117)	Numbers of joint funding packages at end of year	Financial value of health contributions to joint funded packages	Difference in year
2023/4	41	42	£ 1,974,062	+ £ 40,548
2024/5	42	51	£ 2,453,778	+ £327,704
2025/6 (to 1/3/26)	51	26	£ 1,925,038	-£573,242

NB: There are various forms of jointly funded care - this report does not include s117 mental health joint funded packages of care

Impact of trends in joint funding

- Dorset Council holds significant risks from such trends as they are, in the main, the commissioner of the joint funded packages.

- When NHS withdraw from a joint funded package, the person may still require the same level of care. In these cases, Dorset Council is left supporting the individual even where the Council believes that the needs may be outside of the limits of the Local Authority as set out in the Care Act 2014.

- This also places increased pressures on the workforce in adult social care who are then supporting the individual and their care arrangements.

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Financial risk to Dorset Council Adult Social Care 2025/6 due to joint funding changes

- The following table demonstrates the impact on Dorset Council of the trends with the joint funding outcomes for 2025/6 to 1/3/26 and suggest that there is currently approx. a £1.8M cost pressure from joint funding where the Local Authority does not believe it is responsible for meeting needs.

- As at 1/3/26, there are 26 remaining joint funded packages of care. We understand these are currently in the process of being reviewed or due to be reviewed by NHSD.

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2025/6 estimated financial impact for Dorset Council from joint funding application/review outcomes

	Outcome	Numbers of people	Approx cost of packages per annum	Overall impact per annum
Agreed eligible and in receipt of health contribution towards joint funded package of care	Eligible for joint funding subsequent to new Joint funding application (previously solely funded by DC adult social care)	2	£60,309	**£60,309**
Not accepted/determined non eligible for NHS health contribution towards joint funded package of care – costs transferred/remain with DC	Joint funding reviews where DC agree with NHS determination	5	£75,301	**£1,975,238**
	Joint funding reviews where DC disagree with NHS determination	20	£1,355,992	
	New joint funding applications where DC disagree with NHS determination	10	£543,845	

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