

Equality Impact Assessment (EIA)

Title of policy/process under consideration
Continuing Health Care
Lead department
Corporate Affairs
Is this policy/process? (Please tick)
New Existing Revised 🖂
Is this a full EIA? (Please tick)
Yes No 🖂
Please state the reasons for the above decision.
The policy does not impact adversely on any of the protected characteristics, rather it provides guidance where someone is entitled to receive support from continuing health care.
Fully funded continuing health care is provided free of charge, it is therefore likely to be financially advantageous for users to access free care from the health authority particually where this replaces ILF and social care support which are means tested.
The policy does not exclude users from continuing to access the ILF should they continue to meet the relevant criteria.
The national framework for NHS continuing health care and NHS funded nursing care states:
Access to assessment, decision making and provision should be fair and

consistent. There should be no discrimination on the grounds of race,

disability, gender, age, sexual orientation, religion or belief, or type of health need (for example, whether the need is physical, mental or psychological).

What are the policy/process objectives and aims?

The intention of the policy is to ensure that the ILF does not fund provision that should be met by the Department of Health and that is provided free of charge at the point of delivery. The ILF's trust deed sets out the support that can be met with ILF funding and this is not inclusive of health care.

It should also be noted that an individual is able to refuse to be assessed for continuing health care but that local authorities are not legally allowed to provide medical care.

ILF funding will normally cease where a user is awarded fully funded continuing healthcare. This is because their needs are judged to be significant enough to entitle them to have their support funded in full by the NHS. The provision of continuing health care applies in England and Wales. In Scotland a person must be terminally ill and require palliative care before continuing health care is awarded. There is no such provision in Northern Ireland.

The ILF may continue to provide personal and domestic care at the discretion of the Trustees.

The policy only applies to fully funded NHS Continuing Healthcare.

Please state the reasons why the changes are taking place.

The ILF funds personal and domestic support and was never intended to fund health care needs.

The policy recognises the limitations of the support provided through continuing health care in only meeting health care needs and not meeting all care needs. In certain circumstances an individual may benefit from continuing to have some additional personal and domestic care. This particularly applies where users are supported in their communities rather than in a registered care or nursing home.

The policy has been amended so that both group 1 and Group 2 users are treated equitably and in certain circumstances can continue to be eligible for ILF funding provided they meet their respective eligibility criteria.

- Key
 -2 Significant negative impact
 -1 Mild/moderate negative impact
 0 Neutral impact

- +1 Mild/moderate positive impact+2 Significant positive impact

Protected Characteristic	Impact	Notes
Age	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to age.
Disability	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to disability.
Gender	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to gender.
Gender reassignment	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to gender reassignment.
Marriage and civil partnership	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to marriage and civil partnership.
Pregnancy and maternity	0	The policy is universally applied to all ILF users and is not expected to have an impact relating to pregnancy and maternity.
Race	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to race.
Religion or belief	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to religion or belief.
Sexual orientation	0	The policy is universally applied to all ILF users and is not expected to have any impact relating to sexual orientation.

What alternative policy/process options have been considered to reduce or alleviate any identified impact?

The policy previously only considered ILF users in group 1 and specifically excluded group 2 users from continuing to receive ILF funding after being awarded fully funded health care.

The amendment of the policy ensures that it is now equitable to all ILF users regardless of when they applied to the ILF even though it is unlikely that a group 2 user (in reciept of fully funded CHC) would receive sufficient support from their Local Authority to meet the relevant threshold sum.

What research has been gathered/considered when making decisions regarding the Protected Characteristics?

ILF statistical information

England: DH National Framework for NHS Continuing Healthcare & NHS-funded Nursing Care (Including Resource pack 1 – Basic Training)

Scotland: NHS Responsibility for Continuing Health Care

Wales: NHS Responsibilities for Meeting Continuing NHS Health Care Needs

Are any future actions required for example monitoring or review?
The policy is subject to the ILF's rolling review programme. The Operations Policy Board can consider interim recommendations for a review of the policy.
EIAB comments/recommendations
The EIAB reviewed the EIA on 29 November 2012 and subject to the minor amendment detailed in the minutes of 29 November 2012 the board agreed to the EIA.
Date form completed 9 November 2012
Signature of EIAB chair
Harris
Date 17 December 2012

Subsequent amendments to policy/process

Date of amendment
Details of amendment
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Reason why a new EIA is not required
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