

DRAFT Initial Budget Equality Impact Assessment

Please add content where << XXX>> is indicated.

Please make Yes or No bold as appropriate.

1. The Project

Directorate: Adult Social Services and Housing

Theme or area: Continuing Healthcare (CHC) - Reviews

Lead Officer: Ros Cox

Date: 5 December 2025

		Budget reduction (£)		
Budget Reference	Budget Proposal	2026/27	2027/28	2028/29
ASH03	Continuing Health Care (CHC) - Reviews	500,000	500,000	250,000

Description of the project:

Continuing healthcare (often called NHS Continuing Healthcare or CHC) is a package of care fully funded by the NHS for adults with a primary health need. It covers both health and social care costs, meaning eligible people do not have to pay anything towards their care.

Section 22 Care Act 2014 defines the legal limits of what local authority adult social care (ASC) departments can fund. It prevents ASC from meeting a primary health need, which should be met free of charge by the NHS.

CHC eligibility rules set out in the National Framework for NHS Continuing Healthcare and NHS-funded Nursing Care are complex, as is the relationship between the National Framework and s.22 Care Act 2014. What is considered a "Primary Health Need" is interpreted inconsistently, often leading to disputes between the local authority and the ICB.

BNSSG has relatively low levels of people who are CHC funded compared to other regions, raising concerns about eligibility decisions and access to support. It also raises concerns that the local authority may be funding care beyond the legal limits set out in s.22 Care Act 2014, in some situations resulting in disabled people paying for care and support which should be free to them.

Summary of changes:

- The NSC ASC CHC team is engaging in meetings and workshops with the ICB, reviewing and challenging decisions where it is felt needs should be met under CHC.
- The NSC ASC CHC team are holding a workshop for social care providers to ensure early identification of people presenting with health care needs to ensure that they have access to CHC funding if eligible.
- The NSC ASC CHC team is working with social care managers, staff and providers to increase awareness and knowledge in relation to CHC and s.22 Care Act 2014, including the provision of relevant training, ensuring CHC and joint funding with the ICB are always considered.
- The NSC CHC team is developing local and regional guidance re s.22 Care Act and the legal limits of Adult Social Care to ensure a consistent approach locally and regionally and to enable robust challenge where disputes arise.

Are any of the proposals within this theme a continuation of a previous medium-term financial plan saving?

Yes

If yes, please insert reference number and year of assessment?

Budget Proposal	Year of assessment	Budget Reference
Continuing Health Care – continue review programme	2024/25	ASH03

If yes, please describe what steps you have taken to review the equality impacts from previous years?

Previously considered low impact and this remains the case.

2. Customer equality impact summary

Will the changes proposed in this project have a disproportionate impact (or bias) for any of these groups?

Insert X into one box per row, for impact level and type.

H = High, M = Medium, L = Low, N = None

+ = Positive, - = Negative

Protected or significant group	Impact Level				Impact type	
	H	M	L	N	+	-
Disabled people (Including the consideration of neurodiversity)			x		x	
People from different ethnic groups				x		
Men or women (including those who are pregnant or on maternity leave)				x		
People who are LGBTQ+				x		
People on a low income				x		
People in particular age groups				x		
People in particular faith groups				x		
People who are married or in a civil partnership				x		
People who are undergoing gender reassignment				x		
Other significant groups, for example: Armed Forces Community, care experienced young people, carers, parents. Please specify: carers			x		x	

3. Explanation of customer impact

Decisions regarding who funds packages of care should not significantly impact people from protected or significant groups. Needs will continue to be met when

disputes arise between NSC and the ICB and when people's circumstances are reviewed, challenged or responsibility for funding changes hands.

Having needs met by the most appropriate body should positively impact disabled people and carers, ensuring needs are met by the most appropriate funding body, and ensuring people do not wrongly pay for care relating to a primary health need.

Please describe how you will communicate these changes to those impacted.

N/A

4. Staff equality impact summary

Are there any staffing implications for this proposal?

No

Explanation of staff impact

N/A

5. Cumulative equality impacts

Is this project linked to or likely to have an impact on any other service areas?

N/A

6. Action Plan

Are there any further actions that should be taken because of this Equality Impact Assessment?

N/A

Issue Identified	Planned Action	Lead Officer	Time for review

7. Review and Sign Off

Service Manager Review

Insert any service manager comments here.

N/A

Is a further detailed equality impact assessment needed?

No

If 'yes', when will the further assessment be completed?

N/A

Service Manager:

Richard Orson

Date:

5 December 2025