

NHS's rationing forces elderly to pay for own care

Plans to save £855 million have left some families facing huge bills

By Laura Donnelly and Rosie Taylor

VULNERABLE pensioners with progressive and crippling diseases are having funding for their care withdrawn to cut costs.

A *Sunday Telegraph* investigation reveals more than 7,000 patients, whose care and nursing fees were covered by the NHS, have had funding revoked.

Under national rules, any patient with a significant health problem should have their fees paid, if their condition is deemed to be the main reason they need help.

But investigations have revealed that authorities are increasingly withdrawing previously agreed funding.

Freedom of Information disclosures reveal a sharp rise in patients who have seen funding reviewed, leaving families facing bills of up to £100,000 per year.

The figures show 42.3 per cent of cases were subject to such reviews in 2017/18, up from 33.5 per cent in 2015/16.

One in 17 cases previously awarded funding was reversed in 2017/18, up from one in 20 in 2015/16. In 2017/18, 2,761 cases were revoked, 315 more than 2015/16. The figures relate to sums awarded from the NHS Continuing Healthcare fund.

In total, 7,250 people with illnesses and disabilities have lost funding since 2015. The findings come from 71 of England's 191 Clinical Commissioning Groups, suggesting the real number affected could be three times higher.

A handful of groups said there were some problems with the accuracy of their figures. But experts claimed that in some cases funding was being withdrawn without the patient even being seen for an assessment.

It follows a concerted attempt by health officials to cut the spending, even though it is a legal right for many thousands.

In 2016 NHS England set targets to cut spending on such care by £855 million by 2020-21. Officials later said reducing the numbers eligible and cutting the cost of the average package would be key to the efforts.

Investigations by this newspaper have already re-

vealed that, since then, the numbers found eligible have dropped sharply. But it appears even more patients have had funding reviewed, despite the fact most cases are progressive or terminal.

Health officials insist they are not planning to change eligibility criteria but merely making CCGs more consistent. But documents submitted to the National Audit Office in 2017 say "reducing the number eligible for continuing healthcare and reducing the average cost of the CHC package" is key. Official figures show that since then, average eligibility per 50,000 population has fallen from 69 per 50,000 in 2015/16 to 58 in 2018/19.

Caroline Abrahams, of Age UK, said: "Any data suggesting a rise in people losing their CHC must give rise to suspicions that stealth cuts lie at the root of at least some decisions."

Calling for reforms, she said: "In a civilised society every older person who is ill and has high care costs would receive the help they need as of right, without the need to battle with the authorities at the most difficult time of their life, when their end may also be near."

Fiona Carragher, chief policy and research officer at the Alzheimer's Society, said the figures were "extremely concerning".

An NHS England spokesman said: "Spending on continuing healthcare is increasing ... there is still potential, however, to make the process more efficient and effective, as the majority of people assessed turn out not to be eligible."

Case study Funding pulled for mother, 93

Jean Jarvis, 93, who suffers from Alzheimer's disease and cancer and is in a wheelchair, has lived in a care home in Purley, south London, for more than 10 years, with her fees covered by the NHS.

But last January her daughter Gill was told the funding would be withdrawn, with just weeks' notice, and without her mother even undergoing a face-to-face assessment.

She said: "She is much more frail now than she ever was, and yet they said they are now withdrawing the funding. She can't feed herself and it takes three people to move her. I can't see how they can justify taking the funds."

The decision was taken following a meeting of social care and health staff, who reviewed Mrs Jarvis's notes without even physically assessing her, her daughter said.

More than a year later, they are still waiting to



Gill Jarvis with mother Jean, 93, who has severe dementia

hear the findings of an appeal.

A spokesman for NHS Croydon CCG said: "We cannot comment on individual cases for reasons of patient confidentiality. Lead nurses work with patients and their family, carers, social workers and nursing homes to carry out assessments to carefully consider each individual case.

"If the patient or their family feel the decision is not fair there is an opportunity to appeal."