

## **RURAL PROOFING SCREENING AND STATEMENT**

## CONTINUING HEALTHCARE IN NORTHERN IRELAND: INTRODUCING A TRANSPARENT AND FAIR SYSTEM

**JUNE 2017** 

## Introduction

The following statement provides an initial analysis of rural issues in relation to the review of continuing healthcare in Northern Ireland. It demonstrates that rural dimensions have been considered in the development of policy proposals which are intended to reform the current continuing healthcare policy.

Policy Stage	Review, amendment and pre consultation stage		
Design	At present in Northern Ireland, Health and Social Care (HSC) Trusts are responsible for ensuring that an assessment of need, which covers both health and social care needs, is carried out for individuals. If the outcome of the assessment indicates a primary need for healthcare, then the HSC is responsible for funding the complete package of care regardless of the care setting. This is what is known as continuing healthcare.		
	A comprehensive review undertaken by the Department on the current continuing healthcare policy, found that there was some confusion about continuing healthcare and its applicability and an apparent variance in continuing healthcare practice across Northern Ireland. In view of these findings, the Department is recommending that further clarity and revision to the continuing healthcare policy is required.		
	In consulting on the proposals for reforming the continuing healthcare policy, the Department is seeking to achieve a position of regional consistency and to ensure that any existing inequality issues experienced by individuals are addressed.		
	At this stage in the development of the policy proposals, no potential detrimental rural or local impacts have been identified.		
	Following completion of the consultation exercise, rural issues will be considered further. Once a final policy decision has been reached and the necessary changes implemented, it is expected that the revised continuing healthcare policy will provide clarity and create a fairer system.		
	The revised continuing healthcare policy will apply equally to all adults who have assessed care needs, irrespective of whether they live in a rural or urban setting; the consequence of this will be a beneficial impact on all individuals. It is not expected that implementation of the revised continuing healthcare policy will present specific rural impacts.		

Evidence	In 2014/15, an estimated 33% of the Northern Ireland population were living in rural areas, 58% were living in predominantly urban areas and 9% were living in mixed urban/rural areas. Evidence would suggest that people living in rural areas are more likely to suffer higher levels of loneliness and social exclusions than their urban counterparts.  However, it is important to note that the proposals set out in the consultation document relate to the suitability of the current continuing healthcare policy in Northern Ireland, specifically the criteria by which a person is deemed to be eligible for continuing healthcare. The consultation is not about the individual aspects of a person's care package or where that care is delivered. Geography, that is, the location where someone lives, is not a factor in determining a person's eligibility for continuing healthcare.  To date, there is no evidence that the policy proposals will present differential rural impacts.	
Consulting	Pre-consultation stage:  Initial engagement with key stakeholders including representatives from the Commissioner for Older People (COPNI) and AgeNI did not identify any potential rural impacts which needed to be considered during the development of the policy proposals. In addition, an analysis of information and data provided by each of the Health and Social Care Trusts, found no evidence of potential rural impacts.  Post-consultation stage: To be completed once the consultation exercise has concluded.	
Monitoring and Outcomes	Specific requirements for data collection and monitoring will be determined following completion of the consultation exercise and once agreement on the final policy decision has been reached.	

## Approval and authorisation of Rural Proofing

	Name	Grade	Date
Rural proofing completed by	Julie Houston	DP	29 May 2017
Approved by	Jerome Dawson	G7	15 June 2017