Enhanced Fee Rate Guidance

The Enhanced Fee Rate was introduced by Bradford Council in October 2023. There isn't a new or specific assessment to be completed by social workers or care homes to consider whether a person is eligible for the enhanced fee rate. Each individual will be considered by the funding Panel to determine whether their needs are deemed to be eligible for the Enhanced Fee Rate for residential or nursing care, which is paid for by the Local Authority. The information in this document acts as guidance for social workers about the areas which will be considered as to whether a person is eligible for the Enhanced Fee Rate.

The guidance is drawn from the NHS Continuing Healthcare Decision Support Tool (July 2022) and the majority of the information used in this guidance is where a person has needs above the low-level and is defined in the moderate category of need. The criteria is below the high level need, which if met may mean a person is eligible for Continuing Healthcare funding. If professionals assessing an individual, consider a person's needs meet the criteria for Continuing Healthcare Funding then a CHC checklist should be completed and if the threshold is met then an NHS assessment (DST) should be requested.

Certain criteria from the NHS Continuing Healthcare Decision Support Tool (July 2022) has not been included for consideration as part of the Enhanced Fee Rate. This is not an oversight but has been agreed in the development of this guidance.

The Enhanced Fee Rate will be awarded where people's needs are considered to be over and above the standard fee rate in a residential and nursing homes. If a person's needs change, then this may be reviewed and the fee rate may be amended. The funding Panel will make final decisions on fee rates.

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pletely unable to weight bear but is able to assist or cooperate with transfers and/or repositioning.
e position (bed or chair) for the majority of time but is able to cooperate and assist carers or care workers. oderate risk of falls (as evidenced in a falls history or risk assessment)
nunication about needs is difficult to understand or interpret or the individual is sometimes unable to reliably communicate, when assisted. Carers or care workers may be able to anticipate needs through non-verbal signs due to familiarity with the dual.
d disturbance, hallucinations or anxiety symptoms, or periods of distress, which do not readily respond to prompts, distraction or reassurance and have an increasing impact on the individual's health and/or well-being.
o their psychological or emotional state the individual has withdrawn from most attempts to engage them in care planning, ort and/or daily activities.
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	assistance to make decisions about some aspects of their lives, which consequently puts them at some risk of harm, neglect or
	health deterioration.
Behaviour	'Challenging' behaviour that follows a predictable pattern. The risk assessment indicates a pattern of behaviour that can be managed
	by skilled carers or care workers who are able to maintain a level of behaviour that does not pose a risk to self, others or property.
	The individual is nearly always compliant with care
Drug Therapies	Requires administration and monitoring of medication regime by a registered nurse, carer or care worker specifically trained for the
and Medication:	task because there are risks associated with the potential fluctuation of the medical condition or mental state, or risks regarding the
Symptom	effectiveness of the medication or the potential nature or severity of side-effects. However, with such monitoring the condition is
Control*	usually non problematic to manage.
	OR
	Moderate pain or other symptoms which is/are having a significant effect on other domains or on the provision of care.

^{*}Guidance for this area is at the high level of need and not moderate.

NHS Continuing Healthcare Decision Support Tool Guidance

Care Home Guidance

When a person is awarded an Enhanced Fee Rate the care home will be expected to meet the person's needs and make appropriate adjustments to support that individual. Each person's support should be tailored to their individual needs but examples of appropriate adjustments may include:

- **Increased staff support**, for example around mealtimes, during medication administration or at times when residents need additional support with mobility. Staffing levels should be determined through an effective dependency tool.
- Additional training, for example on how to use specialist equipment, to support residents with specific medical conditions or to enable staff to best support a resident's needs.
- Purchasing specialist equipment, for example communication aids or equipment that support a residents' needs.
- This is not an exhaustive list and support should be tailored to the individual needs.

Care homes should be able to clearly evidence that a resident receiving an enhanced fee rate is reflected in an enhanced level of care at the service. The care home may be asked to present this evidence to the Contract and Quality Team on request or as part of a monitoring visit.