

	Please identify the correct person within your CCG who is responsible for information regarding Section 117 aftercare - this may be the S117 commissioner / Commissioning Support Unit / Continuing Health Care commissioners		Uzo Nwankpa - Clinical Lead for Continuing Healthcare.
	S117 places an enforceable duty on both Health (Clinical Commissioning Group (CCG)) and Social (Local Authority/Council (LA)) Services to provide aftercare services to individuals on discharge from hospital. This request is to better understand how CCGs meet this duty.		
	Please indicate which	Comments	
	For each of the following questions, If the answers are different or you have different policies for different groups (e.g. Older Peoples Mental Health, Learning Disability etc) please provide a response for each group.		
1	Please provide a copy of your policy, framework, protocol, or process map for the funding of S117 aftercare?	Y	Please see the attached document.
2	Do you apply a generic split (or pooled budget) for S117 aftercare costs? e.g. a 50:50 or other specific split of costs between LA & CCG? If YES please specify the respective shares?	Y / N circle one Split Pooled budget	Every case is considered individually. Please see the answer to question 3 for further information.
3	If the share of costs between the CCG and LA are, instead, agreed on a case by case basis, please provide a copy of the criteria / tools used to achieve this		The Panel application document (please see attached) includes a rationale for need from the perspective of both health and social needs. The Social needs captured in the care needs assessment is carried out by a social worker within the Community Mental Health Team (CMHT).
4	Where funding shares are agreed on a case by case, how often are these shares applicable in individual cases reviewed?		Initially after 3 months, then every 12 months. However, should a need for an extra review occur, this can be arranged. For example, an envisaged reduction in package can be forecast to occur after 6 months.
5	Does the total cost identified for joint funding under S117 aftercare arrangements include the costs of universal health service provision (e.g. GP & primary care services, , community nursing and costs of medications etc.)? If so please advise what is specifically included or excluded.	N	No. Individuals access these services through primary care contract.

6

<p>When S117 aftercare requires placement in a Nursing Home, with support from a Registered Nurse for their mental health needs, is the CCG share of costs based on a total cost which includes FNC contribution or is FNC excluded from the total cost before that cost is apportioned?</p>	<p>Y</p>	<p>Regarding FNC, this is decided on a case by case basis. An 'FNC equivalent' is paid if a patient requires nursing care as part of their package in a care home. When cases are assessed to be 50:50 funding, a split is agreed at funding panel.</p>	
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