**To:** [insert the name of your ICB]

Address: [insert the address of your ICB]

Email: [insert the email address of your ICB]

**From:** [insert your name]

Address: [insert your address]

Phone: [insert your phone number]

Email: [insert your email address]

Date: [insert the date]

Dear [insert name of your ICB],

**Request for support to meet needs during hospitalisation**

I am writing to you to request additional support through my NHS Continuing Healthcare package, specifically that my NHS Continuing Healthcare package be amended to make provision for [list what additional support you want such as ‘additional funding so that a known carer can support me whilst I am hospital’]. I have set out the reasons this is required in further detail below, but in summary, I need this additional support during my hospitalisation because some of my needs are not currently being met by the hospital where I am receiving treatment.

I am currently an in-patient at [insert the name of the hospital where you are receiving treatment] receiving treatment for [insert the reason you are in hospital]. I have been in hospital since [insert date] and am expected to remain in hospital until [insert date / timeframe if known]. [If you are ready to be discharged but there are problems with arranging your discharge package, you may wish to consider setting these out here to explain any delay]. I have previously been assessed as being eligible for NHS Continuing Healthcare. [If possible, insert date of your last assessment and attach your latest care plan].

As outlined in my NHS Continuing Healthcare care plan, my needs include [insert your assessed needs which are not currently being met]. This means I require [list how your needs are normally met, for instance ‘I require a known carer to help me communicate with medical professionals’]. The hospital is not providing this and therefore my assessed needs as outlined in my care plan are not being met. [Set out any attempts you have made to request this support and any reasons you have been given for the hospital not being able to provide it]. As I have been unable to obtain the care I need through the hospital, I am requesting that my NHS Continuing Healthcare package be amended to include [list the additional support you want, such as ‘additional funding for a known carer to support me whilst in hospital’].

As I am eligible for NHS Continuing Healthcare, you have a duty under s. 3(1) of the National Health Service Act 2006 and ‘The Framework for NHS Continuing Healthcare and NHS Funded Nursing Care’ (‘The National Framework’) to provide me with a care package which meets all my assessed ‘health and associated social care needs’ (see paragraphs 5, 55 and 192 of The National Framework). Paragraph 64 of The National Framework sets out that NHS Continuing Healthcare ‘can be provided in any setting’. Consequently, you have a duty to meet my needs regardless of the setting I am in.

Further, paragraph 201 of The National Framework sets out that you have a duty to review my care package on a regular basis, and explains that more frequent reviews may be needed ‘in line with clinical judgment and changing needs’. [Consider which is more appropriate for you: Although I am in hospital, my need for [insert what specific support you need] as set out in my care plan has not changed. Please confirm that this will be provided to me without delay.] *or* [Now I am in hospital, my circumstances and hence my needs have changed. I have an additional need for [insert what the additional need is]. Please confirm that this need will be met.

If it is considered necessary to reassess my needs for them to be met, please arrange for a reassessment without delay and confirm the date you will provide the outcome of this reassessment/ what steps you will be taking to facilitate a prompt reassessment by return.

Without this additional support being provided through my NHS Continuing Healthcare package, [list how not having your needs met impacts you, for example ‘I am unable to communicate the pain I am in to medical professionals, which adds to my anxiety and distress whilst in hospital’].

Given that you have a continuing legal duty to meet my assessed needs, and not having these needs met whilst in hospital is having a negative impact on my health and wellbeing, I would be grateful if you would consider my request for [insert what additional support you have requested] as a matter of urgency.

I look forward to receiving your response as soon as possible and in any event within 7 days [if there are reasons you think this is more urgent, then choose a shorter timeframe]. If you do not intend to provide the assistance I have requested, please provide detailed reasons for your refusal, including by reference to my assessed needs and care plan as soon as possible and in any event within the requested 7 days. If you consider a reassessment is required, please provide details as to how and when you intend to carry out the reassessment, noting that an assessment must be carried out without delay.

Yours sincerely,

[insert your full name]