## Who to send it to

The NHS Continuing Healthcare team at the integrated care board (ICB) now responsible for the area where the person lived and was registered with a GP during the period of care. If you are not sure which ICB that is, write to the one for that area: if it was not responsible, it should tell you and pass the request to the right ICB.

## The letter

Replace everything in [square brackets], keep a copy, and note the date you sent it.

[Your name]
[Your address]
[Your phone number]
[Your email address]

[Date]

NHS Continuing Healthcare Team
[Name of integrated care board]
[Address or email address]

Dear Sir or Madam,

Request for an assessment of a previously unassessed period of care: [full name], date of birth [date of birth], NHS number [NHS number, if known], [address during the period of care]

I am writing to ask the ICB to assess whether [name] was eligible for NHS Continuing Healthcare during a period when [he/she] paid for [his/her] own care but was not considered for NHS Continuing Healthcare.

The period: from [date] to [date / the present].

Where the care was given: [for example: at home, with care from (provider) from (date) to (date); then at (care home name and address) from (date) to (date)].

Who paid: [for example: (Name) paid the full cost from (his/her) own money / the council paid part and (name) paid the rest].

Why [he/she] should have been considered: [for example: during this time (he/she) had advanced dementia with distressed behaviour, needed two carers for all transfers, had recurrent pressure ulcers and swallowing difficulties, and was admitted to hospital (number) times]. To my knowledge, no Checklist or full assessment was carried out during this period.

I am [name]'s [relationship], and I am making this request [as (his/her) attorney under a registered Lasting Power of Attorney for property and financial affairs / as (his/her) deputy / as executor or administrator of (his/her) estate]. A copy of [the Lasting Power of Attorney / the deputyship order / the grant of probate or letters of administration] is enclosed.

Please:

1. send me your application form and consent form for a previously unassessed period of care;
2. confirm that you have received this request, and tell me the date from which you have recorded it; and
3. tell me your expected timescale.

Yours faithfully,

[Your signature]
[Your name]
[Your relationship to the person]

## Tips

- Before you write, list the dates and places of care, who provided it, who paid, and the main health events (hospital stays, falls, infections, pressure sores, behaviour). This is the backbone of the claim.
- Return the forms within 28 days if you can, with proof that you can act. If you cannot, tell the ICB why; it can close a request when proof of authority does not arrive. For someone who has died, ICBs normally allow eight weeks to provide proof such as probate.
- The ICB gathers the care, GP, hospital and social care records itself. Keep your own copies of anything you send.
- The ICB will share a summary of needs (a 'needs portrayal') and ask for your comments, usually within 28 days. Check it carefully against what you remember and what the records show.
- The guidance sets no closing date for periods from 1 April 2012, but records are only kept for limited periods, so do not delay.

- You do not need a claims company. If you are thinking of using one, check its fees carefully first. Free advice: Beacon, 0345 548 0300.

## The law behind it

Guidance from the Department of Health and Social Care, 'Dealing with requests for assessments of previously unassessed periods of care from 1 April 2012' (updated March 2025), which ICBs follow alongside their duty under regulation 21 of the Standing Rules Regulations 2012 and the National Framework. ICBs should generally consider periods of care from 1 April 2012; earlier periods were closed in 2007 and 2012 except in exceptional circumstances. The ICB sends an application form and a consent form, which should be returned within 28 days, with proof of authority to act. ICBs should aim to complete requests within six months where the period is a year or less, and within 12 months for longer periods. If the person was eligible, the ICB should refund the care costs for that period plus interest. A period that was already assessed is not a past-care claim; it is challenged through the review process instead.

Read more in our guide: NHS Continuing Healthcare: a guide for families.

## Other letters

- Asking the council for a care needs assessment
- Asking the council for a carer's assessment
- Asking for the written financial assessment and a disability-related expenditure review
- Asking for a review or reassessment of care and support
- Asking for an NHS Continuing Healthcare Checklist