

Carer Support Subsidy (Reprinted May 2016)

Information on Carer Support Subsidy for full time carers of older people

You can get Carer Support Subsidy if:

- You are looking after someone who is terminally ill, or has an ongoing health or mental health condition, provided they need 24-hour care / supervision, or,
- The person you are caring for has an aged related disability, needs 24-hour care - and you are not being paid a wage to do this. Generally, you will have been doing this for at least six months.

Carer Support Subsidy does not cover:

- Long-term care
- Convalescent care
- ACC claimants
- Purchase of items or services other than relief care, even if related to the person's disability
- Care while full time carer is in paid employment

Other relief care:

There are other forms of relief care available; talk with your case manager or needs assessor about options that may work for your situation

How do you get Carer Support Subsidy?

You access Carer Support Subsidy in different ways depending on the needs of the person you care for:

- If you are caring for a person who requires 24-hour care because of an ongoing health condition or terminal illness, contact your doctor.
- If the person you are caring for has a disability, contact your local Needs Assessment Service. See contact details at end of this document, or ask your doctor to refer you.
- If the person you are caring for has an ongoing mental health condition, your Community Mental Health Key Worker will assess.

How can you use Carer Support?

You can choose how to spend your subsidy, as long as it goes to someone who cares for the person you usually look after.

You can decide when to use your Carer Support days and how much you want to use at a time. The minimum claim time is a half-day (4 to 8 hours), with whole-day claims up to 24 hours. Periods of care less than 4 hours can be combined to make up a claim, which must be submitted within 90 days.

You might choose to pay for:

- Day Care
- Someone to take over from you at home
- Care in someone else's home
- Short-term residential care, e.g. rest home

How it works:

1. You telephone the appropriate assessor to request a Needs Assessment.
2. You are given a number of days per year, according to your need. There is no set entitlement. You can now plan your 'time out'.
3. The assessor sends your information to Ministry of Health.
4. Ministry of Health sends you a letter explaining how payment is made.
5. If you lose your Carer Support form, phone Ministry of Health 0800 281 222 for a replacement. They can also tell you how many days you have left.
6. If you feel you need more Carer Support days during the year, ask for another assessment.
7. Care support days do not roll over from one year to the next. You need a new assessment each year.

Please note:

If you move from one District Health Board to another, you must get a new allocation of Carer Support days from the new District Health Board, they do not transfer.

Cost is something you may need to think about; you will have to meet any shortfall between Carer Support subsidy and the full cost of care.

Carer Support funding **cannot** be used to pay for long-term care, even if you have some days left unused.

Payment – Who is paid and how much?

There are two subsidy rates paid by Ministry of Health for a 24-hour day - formal and informal. Rates are set by each District Health Board and can vary, check with your Needs Assessor or Social Worker on rate for your area.

Formal Rate: This applies to relief services provided by a person or agency that is GST registered.

Informal Rate: This rate does not include any GST. This applies to relief services provided by friends, neighbours and family. Family member includes daughter, son, sister, brother or cousin who does not live with the client.

Usually Ministry of Health pay direct to the person or service that provided care, after care has been given.

Some agencies providing formal care prefer payment in advance. If you choose one of these agencies, you will need to pay them yourself and then claim the money back from Ministry of Health.

Residential Care in Rest Homes

If you decide on short-term care in a rest home, you will find it difficult to book in advance. If you wait until closer to the time, there are usually a number of rest homes with vacancies that you can choose from.

There is now a large gap between Carer Support rate and the District Health Board contract rate. The shortfall can be over \$300 per week. In short-term care you usually provide your own medicines, continence products and pay for your own GP.

If you have to consider moving into care permanently, ask for a reassessment from your Needs Assessor.

Who to contact:

If the older person you are caring for has a disability, you can arrange a Needs Assessment by phoning the assessment Service, or your GP can refer you.

For a list of national NASC agencies contact Seniorline on 0800 725 463 or go to www.health.govt.nz and search on NASC agencies.

Contact for further information:

Ministry of Health Help Desk
Private Bag 1942
Dunedin

Phone: 0800 281 222

Fax: 03 474 8584

Seniorline

Seniorline is a free, national information service for older people and their family / whanau. We have information on how to get help to stay at home, supports and relief care for caregivers.

We can also answer questions about rest homes and hospitals. We have information on asset testing, costs for residential care, detail on services that should be provided, admission agreements and complaints.

Contacts:

Phone:	09 375 4395 and 0800 725 463
Hours:	8am to 4pm, Monday to Friday
Email:	seniorline@adhb.govt.nz
Website:	www.seniorline.org.nz