

Regulation

of the Minister of Labour, Health and Social Affairs on the assessment of the need for care in accordance with the Federal Long-term Care Benefit Act (Assessment Regulation of the Federal Long-term Care Benefit Act (EinstV))

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In accordance with Section 4 of the Federal Long-term Care Benefit Act (BPGG), Federal Law Gazette (FLG) I no. 110/1993, last amended by the Federal Act FLG I no. 111/1998, the following is decreed:

Care

Section 1. (1) Care is understood as all necessary tasks that are largely related to personal needs which are carried out by other persons in relatively short succession, and without which the person in need of care would be in danger of becoming neglected.

(2) The tasks mentioned in para.1 particularly include the following: getting dressed and undressing, help with personal hygiene, the preparation and eating of meals, going to the toilet, taking medication, and providing support with mobility in a narrower sense.

(3) When determining the time required for care, the following reference points – based on one day – should be used:

Time needed for care provision:	Reference figure per day:
Support with getting dressed and undressed	2 units of 20 minutes each
Washing in the case of incontinent patients:	4 units of 10 minutes each
Emptying and cleaning of a commode:	4 units of 5 minutes each
Taking medication: (also in the case of administration with a tube)	6 minutes
Stoma care:	15 minutes
Care of cannulas or tubes:	10 minutes
Catheter care:	10 minutes
Enemas:	30 minutes
Mobility support in a narrower sense:	30 minutes

(4) For the tasks listed below, the following minimum time requirements per day are set as follows:

Task:	Minimum time per day:
Daily personal hygiene	2 units of 25 minutes each
Preparation of meals: (also in the case of tube feeding)	1 hour
Providing assistance with eating and drinking (also in the case of tube feeding)	1 hour
Going to the toilet:	4 units of 15 minutes each

Divergences from these time allowances should only be taken into account when the actual time needed to provide care considerably exceeds these minimum figures.

(5) When determining the need for care in the case of severely disabled children and young people in accordance with paras. 1-4 under the conditions imposed by Section 4 paras. 3 and 4 of the Federal Long-term Care Benefit Act (BPGG) as amended by FLG I no. 128/2008, the following additional fixed time amounts per month have to be taken into account as a hardship supplement:

For children and young people with severe disabilities	Additional fixed time amounts
Up to their 7th birthday	50 hours
Children aged seven and over up to their 15th birthday	75 hours

(6) When determining the need for care in accordance with paras. 1-4, for persons aged 15 and over with a severe mental or a severe physical disability, particularly a dementia-related condition, an additional fixed time amount of 25 hours per month has to be taken into account as a hardship supplement (Section 4 paras. 5 and 6 of the Federal Long-term Care Benefit Act).

Assistance

Section 2 (1) Assistance covers deferrable tasks provided for other people which are related to practical matters and are necessary to ensure their livelihood.

(2) These include bringing food, medicines and everyday essential items, cleaning a person's home and their personal items, washing clothes and bedding, heating their home, bringing fuel and ensuring their mobility in a broader sense.

(3) For each form of assistance, a fixed amount of time of ten hours per month is assumed.

(4) In the case of children and young people in need of care up to their 15th birthday, a figure of up to 50 hours a month for mobility assistance in a broader sense can be taken into account irrespective of the provision in Section 4 para. 7 (3) of the Federal Long-term Care Benefit Act (BPGG).

Therapeutic and technical aids

Section 3 (1) A need for care is not assumed when the necessary tasks can or could be carried out themselves by the applicant for benefits with the help of simple aids, and if they can reasonably be expected to use such aids given their physical and mental state.

(2) The use of other aids should be considered if they are available or if their financing is ensured entirely or at least predominantly by the decision-maker or a public source.

Guidance, supervision and motivational conversations

Section 4 (1) Providing instructions and supervision to people with mental or physical disabilities in carrying out the tasks listed in Sections 1 and 2 is considered to be of equivalent value to support and assistance.

(2) If motivational conversations need to be carried out with people with mental or physical disabilities so that they can independently carry out the tasks listed in Sections 1

and 2, a reference time frame of a total of ten hours a month should be assumed for this support work.

A constant need for care

Section 5. A constant need for care is present when it is required daily or at least several times a week.

Exceptional need for care

Section 6. An exceptional need for care is given when the following are required:

1. The constant availability but not the constant presence of a carer;
2. regular checks by a carer at relatively short but predictable intervals, whereby at least one check needs to be made during the night, or
3. more than 5 care units are required, one of which is during the night.

Support measures which cannot be coordinated in terms of their timing

Section 7. Support measures which cannot be coordinated in terms of their timing are given when the care plan cannot be adhered to due to a physical, mental, psychological or sensory disability of the person in need of care, and when the support measure has to be provided immediately.

Report by a medical officer

Section 8. The basis for decisions on the award and level of long-term care benefit is a report by a medical officer. A report by a qualified nurse can also act as the basis for the assessment of applications for changes in the amount of long-term care benefit paid. If required, persons from other fields should be consulted to ensure a holistic assessment of

the care situation, such as experts from special needs education, social work, psychology and psychotherapy.

Coming into effect

Section 9 (1) This regulation comes into effect on 1 February 1999.

(2) The Regulation on staging in relation to the Federal Long-term Care Benefit Act, FLG No. 314/1993 will be repealed at the end of 31 January 1999.

(3) Section 1 paras. 3, 4, 5 and 6, Section 2 para. 4 and Section 6 as amended by the regulation FLG. II no. 469/2008 shall come into effect as of 1 January 2009.

(4) Section 8 as amended by the regulation FLG. II no. 453/2011 shall come into effect as of 1 January 2012.



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