



Respite Care Policy

Policy statement: The Ministry will provide respite care if there is no genuine medical reason.

Purpose: To avoid admission of cases if they have no medical condition that needs management in a hospital.

Reason for this policy;

- a. The reason for admitting people to the Hospital is because they have a genuine medical condition that needs to be managed in the hospital.;
- b. It is a fact that the vulnerable persons i.e. elderly and disabled are easily prone to infections which they can acquire if they are placed with other people.

An admission of a person who is not sick will have negative impacts on services provided to other sick patients in the hospital that requires more attention from the nurses and doctors. **Procedure:**

1. Ministry staff to only admit persons if there is a medical reason
 - a. The admitting doctor must let family know that once they are discharged they are to be picked up immediately.
2. If there are cases where they want to be put into hospital without medical reasons then Ministry staff must notify the Director of Hospital Health Services. Respite care for up to 2 weeks is offered at the discretion of the DHHS or his designee.
3. Respite care up to two weeks is available (pending availability of bed space). There is a cost of NZD200 a week. Extension beyond the two week period is subject to approval by Director of hospital health services who has discretionary powers. If families are going overseas we must get a copy of their return ticket and other personal details to confirm that there will be someone that will pick them up after 2 weeks.
4. Respite care is the provision of nursing care, three meals a day, bed stay, laundering bed linen only and housekeeping. All personal toiletries and clothing **MUST** be provided by the family. All personal laundry are the responsibility of the family.
5. If the patient remains in the hospital and there is no one to pick them up after discharge then an agreement needs to be drawn with the family to hand in the patients pension benefit bank book to deduct payments for costs involved. In the event that the family decide to take them home then their bank book will be returned. Internal Affairs to be informed if the hospital takes responsibility for bank account and when it reverts back to family member.

Note: 50% of the cost must be provided up front on admission

Notice that the cost must be provided up front on admission

takes responsibility for bank account and when it comes back to family member.
Notice that their bank book will be returned. Interval visits to be informed if the hospital
book to deduct payments for costs involved in the event that the family decide to take them
an agreement needs to be drawn with the family to hand in the patients' union benefit bank

2. If the patient remains in the hospital and there is no one to pick them up after discharge then

family and to visitation are the responsibility of the family.

Notice that the provision of nursing care, other services and a system of monitoring and a system of
control and management of the hospital are the responsibility of the family.

someone that will pick them up after 5 weeks.

But a copy of their return ticket and other personal details to confirm that they will be
admitted to hospital services who are not on the list. If a family are going overseas we must
notify a week. Extension beyond the two week period is subject to approval by Director of
admission and to two weeks (if applicable) otherwise a stay over of an extra week

arranged and to the discretion of the DNHG or his designee.

Notice that when the Director of Health Services, Health Care for the
District of Columbia, or his designee, is notified of the patient's admission to hospital, the patient

is responsible for the following:

1. The admitting hospital must let family know that once they are discharged they are to be
admitted to hospital and that once they are discharged they are to be
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Respite Care Policy Approved on:

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