

- **Nursing care leave allowance**
 - Nursing care leave allowance and part-time work due to nursing care can be agreed by close relatives of people who have impairments due to dementia and who receive a nursing care allowance from level 1.
 - Income-dependent payment, will be calculated commensurate with unemployment benefit.
 - Since 01.01.2020 there has been a legal entitlement to nursing care leave and part-time work due to nursing care of a maximum of four weeks for employees in companies with more than five employees
- Support of 24-hour care
 - Care in private households
 - The prerequisite is the entitlement of the person requiring nursing care to nursing allowance at least in the amount of level 3
- Home visit on request
 - For recipients of a nursing allowance who are cared for in their home environment, free-of-charge and voluntary home visits are offered throughout Austria
 - The actual nursing care situation will be documented and consultations provided if necessary.
 - Agree a home visit on request by telephone on 050 808 2087 or by e-mail wunschhausbesuch@svqspg.at

- Discussion with the next of kin – Alleviation of the burden on nursing relatives
 - To alleviate the burden on nursing relatives, the Ministry of Social Affairs with the support of the Professional Association of Austrian Psychologists (Berufsverband Österreichischer PsychologInnen) launched the discussion with the next of kin.
 - The discussion with the next of kin is free of charge and confidential and, depending on requirements, can be held at home, at another place or over the phone.
 - If you are interested in this range of advisory services, please phone 050 808 2087 or agree an appointment by e-mail at angehoerigen-gespraech@svqspg.at

Social services

- **Social services**
Mobile and outpatient social services can make nursing care in the usual family environment easier, make it possible for the person who requires nursing care to stay in their home and alleviate the burden on nursing relatives.

Further information:

- Office of the Provincial Government, district administrative authority or municipal administration or Fonds Soziales Wien
- Retirement and nursing care homes Dementia-specific information on retirement and nursing care homes in the info service of the Ministry of Social Affairs

Contact addresses

Ministry of Social Affairs: www.sozialministerium.at
Austrian dementia strategy "Living well with dementia": www.demenzstrategie.at

Health portals:
www.gesundheit.gv.at
www.kliniksuche.at

Information on care and support:
www.sozialministeriumservice.at
www.infoservice.sozialministerium.at

Advice centres:
Alzheimer Austria: www.alzheimer-selbsthilfe.at/angebote/service
MAS Alzheimer Assistance: www.alzheimer-hilfe.at
Self-help groups search: www.gesundheit.gv.at
Interest group of nursing relatives: www.ig-pflege.at

Competence Centre Quality Assurance in Nursing Care at Home

www.svs.at (Quality Assurance – Nursing Care),
E-mail: wunschhausbesuch@svqspg.at (home visit) or angehoerigengespraech@svqspg.at (discussion with next of kin),
Telephone: 050 808 2087

Law on the protection of adults, power of attorney for personal care and patient decree:

www.vertretungsnetz.at
www.help.gv.at (law on the protection of adults)

Living well with dementia

A guide

More up-to-date information as of 2022 which has resulted in the course of the nursing care reform is available at www.sozialministerium.at

Service for citizens:
buergerservice@sozialministerium.at
Telephone: 0800 201 611
(Mon–Fri 8 am until 4 pm)

Publication details

Media owner and publisher: Federal Ministry of Social Affairs, Health, Care and Consumer Protection (BMSGPK)
Stubenring 1, A-1010 Vienna
+43 1 711 00-0
Place of publication and production: Vienna
Photo credits: © istockphoto.com/wildpixel
Layout: BMSGPK
Status: July 2021



Living well with dementia

A guide

Early detection

Forgetfulness is very normal and it is more pronounced in some people and less in others. If you occasionally cannot find your key or cannot remember the name of a friend, this is no cause for alarm.

Warning signs of the onset of dementia could be the following:

- **Declining powers of recall / memory disorders**
It becomes increasingly difficult to learn new things, to remember new names or to recall discussions and events, even if they were not that long ago.
- **Trouble with language and when reading, speaking and listening**
It becomes ever more difficult to follow a discussion and find the right words. Statements are abruptly ended in mid-sentence and it becomes increasingly difficult to listen closely.
- **Temporal and spatial disorientation**
It becomes increasingly problematic to find your way around in a familiar environment or to finish things on time. There are also problems with temporal orientation (e.g. with regard to the time of year, the weekday or the time of day)
- **Difficulties in doing routine tasks**
It is difficult to continue to do tasks that have been customary up to that point, such as cooking meals or dealing with banking matters. There are increasing signs of difficulties carrying out complex tasks such as the organisation of parties or the choosing of clothing appropriate to the situation

- **Sociability wanes**
The person withdraws from social life, becomes passive and no longer participates in activities. Listlessness and passivity increase.
- **Changes in personality**
There are frequent and unusual fluctuations in mood without any discernible reason for outsiders. Traits can become more pronounced or also change; unsubstantiated mistrust up to and including aggressive behaviour can occur.

Early detection improves the success of treatment!

Diagnosis

The symptoms listed can have very different causes. They can be triggered by stress, burnout, depressions and mental strain. They can have physical causes such as an underactive thyroid, increased cerebral pressure or a tumour. Or it can be dementia.

For the right therapeutic support or medical treatment, it is therefore important to seek out a doctor!

The GP is the first point of contact. He or she will then refer the patient to specialist doctors for psychiatry and neurology. There may also be a referral to gerontopsychiatry centres and memory clinics.

By means of various examinations, it will be clarified whether the symptoms are caused by dementia or another treatable illness (differential diagnostics). To do this, the neurological, psychiatric and internal medical condition of the patient will be examined. Psychological tests, laboratory tests and imaging procedures will be carried out for the precise diagnosis of dementia.

- **Discussion with a doctor**
Personal discussion with a doctor to record the patient's condition and medical history
- **Physical examination Laboratory tests,**
ECG (method for examining the heart)
- **Neuropsychological examinations**
Neuropsychological tests of memory performance, language skills, spatial and temporal orientation, attentiveness, ability to carry out complex tasks
- **Imaging procedures**
CT, MRT (examinations to depict the condition of the brain)

All the examination methods mentioned are entirely painless!

Further information on this can be found at [gesund-heit.gv.at](https://www.gesundheit.gv.at)

Support, advice and therapy after diagnosis

In most cases, the GP is the first point of contact. In most cases, after an initial assessment, the patient will be referred to a specialist doctor.

An early diagnosis is important in order to start with the therapy as early as possible and to find the right treatment. In addition to medication, there are various non-medicinal therapies such as the specific training of everyday activities and the memory in order to improve quality of life.

Find out about dementia and get support, information and advice in good time. Non-medicinal therapy measures and also self-help groups are expedient supplements to a medical therapy plan.

Whom can I contact?

The services offered in the federal provinces vary. You can obtain information on this via your doctor.

Many social organisations offer dementia advice, support and therapy groups. Separate memory clinics in hospitals also offer a diverse range of services. Get advice on finding the services that are right for you! Self-help organisations are good addresses for exchanging experiences.

Nursing allowance

- The nursing allowance is a ring-fenced payment which is intended to cover the additional costs resulting from nursing care
- There is an entitlement to nursing allowance if there are nursing care requirements of more than 65 hours on average per month
- 7-level model, depending on the nursing care requirements
- Depending on the severity of the illness, when assigning people with an impairment due to dementia to a nursing care level, a flat-rate **hardship supplement** in the amount of **25 hours** can be taken into consideration. **Factors that make nursing care more difficult** exist. If deficits in motivation, thinking, implementation of actions, social function and emotional control overall are expressed as a serious behavioural disorder.
- If a person can only help themselves with **guidance / or supervision**, this equates to help and support.

Support for care in the home

- **Contributions to the costs for replacement care when the main carer is prevented from providing care**
 - Financial support for relatives of people requiring nursing care if the predominant nursing care has been taken over for at least a year
 - From nursing care level 3; in the case of impairments due to dementia from level 1