

Help for outpatient care

Do you or one of your relatives need outpatient care because you can no longer care for yourself at home alone? Are your independence or abilities impaired due to illness or disability?

People in need of care who have health or nursing care insurance primarily receive financial benefits for body-related care measures (including personal hygiene), nursing care measures (including companionship, supervision) and help with household management (including cleaning the home, shopping) from their nursing care insurance fund in accordance with Book 11 of the Social Code (SGB XI). If someone is not insured for nursing care or if the benefits of the nursing care insurance are not sufficient, benefits of the assistance for nursing care according to the 12th Book of the Social Code (SGB XII) come into consideration.

The care support centers in the state of Bremen provide consumer-oriented, independent and free advice on all aspects of care (for contact details, see "Responsible agencies").

Competent Department

- [Amt für Soziale Dienste, Fachdienst Teilhabe](#)
- [Amt für Soziale Dienste Sozialzentrum 1 - Nord](#)
- [Amt für Soziale Dienste Sozialzentrum 2 - Gröpelingen / Walle](#)
- [Amt für Soziale Dienste Sozialzentrum 4 - Süd](#)
- [Amt für Soziale Dienste Sozialzentrum 5 - Vahr/ Schwachhausen/ Horn-Lehe](#)
- [Pflegestützpunkt Bremen-Nord](#)
- [Pflegestützpunkt Berliner Freiheit](#)
- [Pflegestützpunkt Huchting](#)
[Bürger- und Sozialzentrum Huchting e.V.](#)
- [Pflegestützpunkt Huckelriede](#)
[Quartierszentrum](#)
- [Pflegestützpunkt Gesundheitszentrum LIGA e.V.](#)

Basic information

Persons in need of care are those who have health-related impairments in their independence or abilities and are therefore permanently dependent on personal support. The need for care is determined according to care degrees. There are the care degrees 1-5.

The benefits of the nursing care insurance according to the SGB XI and the help for

nursing care according to the SGB XII include body-related care measures (e.g. personal hygiene), nursing care measures (e.g. accompaniment, supervision) and help with household management (e.g. cleaning the apartment, shopping).

For care level 1, there are only limited benefits in SGB XI and SGB XII. From care level 2, there is an entitlement to benefits for the use of a care service or a care allowance and other benefits.

One benefit option in SGB XII is to "top up" an insufficient benefit from social long-term care insurance from care level 2.

Example: There is a need for care from a care degree 2 determined by the care insurance, the necessary care by an outpatient care service is not sufficiently financed by the benefits of the social care insurance.

A further entitlement to benefits according to SGB XII exists for persons who

- are not insured for long-term care
- are not permanently in need of care (who are expected to require care for less than six months)
- and are therefore not entitled to benefits under SGB XI.

Requirements

The benefits according to SGB XII depend on the amount of income and assets.

Statements on the use of income and assets are individually designed and therefore require consultation.

Benefits of assistance for long-term care according to SGB XII are subordinate to similar benefits according to other legal regulations (e.g. benefits of the social long-term care insurance according to SGB XI). Therefore, benefits under SGB XI must be claimed as a priority benefit claim before applying for benefits of assistance for care under SGB XII.

What documents do I need?

- Identity card or passport
- Registration confirmation
- Income, asset and debit documents

Income, asset and debit documents please enclose a copy of the questionnaire (if possible from the last 12 months, for self-employed persons from the last three years)

Procedure

If a need for help with care is to be assumed, or if the need for care is not sufficiently financed by the benefits of the social care insurance (SGB XI), help with care according to SGB XII can be applied for at the responsible social center or specialist service. The adult social service then usually arranges a consultation appointment at the home of the person to be cared for, so that the circumstances on site can be taken into account in the

planning.

The health department's nursing specialists determine the need for nursing care, and the social services department (adult social services) advises the person to be cared for about the possibilities of support.

Legal bases

- [§§ 61 ff SGB XII](#)

What deadlines must be paid attention to?

There are no time limits for the submission of applications. The benefit is paid when the responsible social centre becomes aware of the need for help with care. This can also be done by telephone.

What are the costs?

none