



Blue Care: Ensuring older Queenslanders live life their way

We've been part of Queensland life for more than 65 years, beginning with our Blue Nurses™, whose cars have long been a familiar, comforting sight in the streets of every neighbourhood.

These days, most people are aware our cars are delivering much-needed services to older Queenslanders, but may not know what those services entail or how they can now play an important role in helping your loved one remain independent in their own home for as long as possible. That's where this

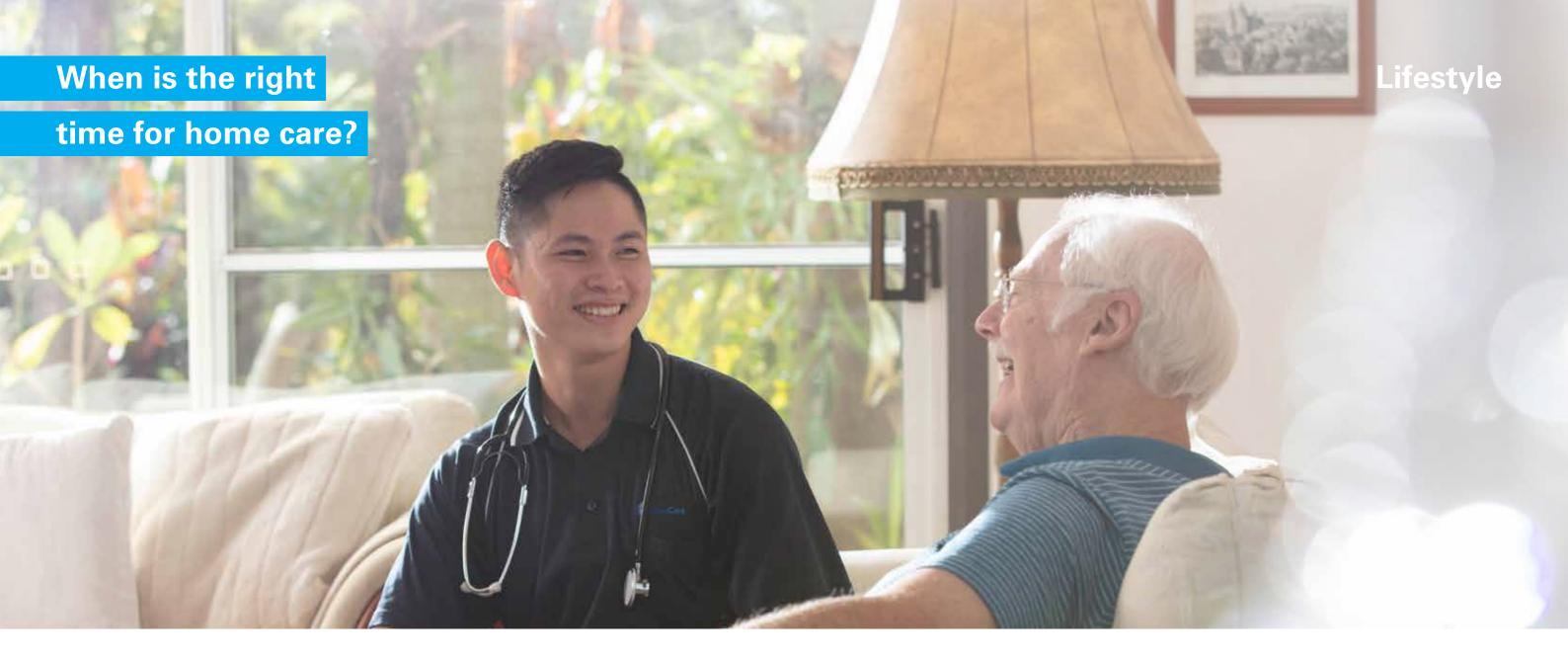
guide can help, because it explains home care services, how those services are funded and how they can be adjusted to fit every individual's lifestyle.

Our people make more than three million home visits every year, with 8,000 employees providing home care, health care, support and companionship to Queenslanders - all backed by a not-for-profit ethos that allows us to put people before financial gain.

Coupled with decades of experience in providing care, this ethos means we can focus on the needs of your loved one, provide simple and honest advice on how home care services can meet those needs, and even guide you through the process of accessing government subsidies to cover the cost.

We're honoured to work with you and your loved one to design and deliver the support needed. If you think our services may suit your family's circumstances, call us on 1300 BLUECARE (1300 258 322).

Our home care services allow people to make smart choices designed to ensure they continue to live life their way.



Home care services play a vital role in helping people to live independently in their own homes for as long as possible and those services can be tailored to suit the precise needs and wants of your loved one. But how do you know when the time is right for home care?

In some cases you might notice small changes in your loved one's behaviour – perhaps chores aren't getting done, your father's not showering as often

as he used to or your mother's forgetting to take her regular tablets. These can be signs it might be time to consider help at home. In other cases, a crisis - such as a fall or illness might mean they require home care services to manage.

Common signs your loved one may benefit from home help

Forgetfulness with medication

Have you noticed your loved one isn't taking their usual

medications regularly? Medicine bottles or sheets of tablets remaining full for too long, repeat prescriptions not being filled or symptoms of health conditions reappearing despite a medication regime being in place can be a giveaway that this is an issue, which can be caused by cognitive decline or depression.

A similar sign can be that your loved one is missing what were regular appointments or failing to turn up to pre-arranged engagements.

Household chores neglected

You may observe a gradual decline in the cleanliness or tidiness of a loved one's home, particularly if they were previously neat housekeepers. Regularly finding unwashed dishes, an unusual amount of dust on surfaces, spoilt food in the fridge or cupboard, unopened letters or other clutter, unwashed or wet laundry are typical triggers for adult children to consider home care services for their parent.

Cognitive decline, depression and issues with vision or mobility can all affect your loved one's ability to maintain their home.

Decline in personal grooming

As we age, we can become less confident of our footing, making the bathroom feel like a more dangerous environment. This can lead to a decline in personal hygiene as a result of skipping bathing or brushing our teeth. Likewise, conditions that affect mobility can make

simple grooming tasks such as brushing our hair or changing clothes much more difficult. As a result, you may notice your mother or father is not as well groomed as in the past.

Unexplained weight loss

If your loved one is noticeably thinner, there's no evidence of food having been recently consumed (such as used dishes or leftovers in the fridge), the fridge seems unusually empty over several visits or they're





not much interested in meals, this can ring alarm bells. A lack of interest in eating can have many causes, such as cognitive decline, depression or a simple inability caused by vision or mobility issues to prepare food.

Unusual behaviour with money

Failing to pay bills on time or to keep on top of banking can be a sign your mum or dad needs assistance, as can a sudden interest in purchasing items online or from door-to-door salespeople. If you notice an unexpected influx of unusual purchases or overdue bills, this

is out of habit for your loved one and it's combined with some of the other signs above, it may be time to look into home care services because it can be a sign of cognitive decline.

Lack of interest in hobbies and/or socialising

If your loved one passionately pursued a hobby or interest or enjoyed socialising, and you observe that they no longer do so, they may be experiencing physical issues, perhaps with their sight, hearing or mobility, or are feeling depressed, which is interfering with their usual enjoyment of life.

A crisis situation

It may be that your loved one's home care journey starts with a fall or accident that requires hospitalisation. This can be the most difficult time to assess care services because you may have to do so quickly to enable your family member to return from hospital to their own home.

It's important to remember that every individual has their own habits that their family members will easily recognise, so the signs to look out for depend very much on what's normal for your loved one. For example, many older Australians with arthritis

live full, independent lives without requiring assistance at home, so joint pain alone isn't necessarily a trigger for home care. But if that joint pain is preventing your family member from living as they wish or affecting their overall health, home care can be of assistance.

Also, the signs listed above aren't appropriate for everyone. There may be other indications your loved one is having trouble taking care of themselves at home, such as frequent, unexplained bruises or scratches as a result of falls. Even a subtle change in personality or habits can raise alarm bells in close family members who know a person well.

If you've observed some of these signs in a loved one, you can call us on 1300 258 322 to learn how home care could play a part in returning life to normal.

"With my own mum,

there'd be dishes in the

sink; they'd be stacked

up but never done... It's

those subtle things that

you begin to see, and you'll

know, because it's family."

Jill Wiese Blue Care

What to do in a crisis

Blue Care can help in a crisis situation by:

- Providing immediate advice on how to access emergency home care services.
- Liaising with the hospital treating your loved one to ensure they receive seamless care on their return home.
- Visiting your loved one to provide home care services such as help with medication, wound management and more.
- Guiding you through the My Aged Care process to secure longer-term funding.
- Providing home care on a fee-for-service basis if funding is unavailable.





"It's not about someone

coming in and taking over,

it's just sharing the load."

Karin wants the best for her fiercely independent parents, who are in their 90s. So it didn't take long for her to notice that as health issues cropped up, her mum and dad weren't able to maintain their house as well as in the past.

Karin, 61, and her sister jumped in to get the chores done, but that did not go down well with their parents.

"My sister and I were trying to do the housework on our visits but they'd try and distract us," Karin says. "If Dad heard the vacuum cleaner, he'd tell us to put it away and come and have a cuppa and a chat instead."

Karin knew the solution had to allow her mother and father to receive help at home, rather than being forced to leave their much-loved neighbourhood.

"It's very important for Mum and Dad to stay in their own home," she says. "They've been in that home for 30 or 40 years, had all the grandkids over there, so many beautiful get-togethers, and of course, the memories they have there and the community it's in, lovely neighbours that check on them. They love to have a place for us to come to. They love the fact that the Christmas tree is in the same place it always is."

Karin suggested home care as a solution for her parents, but they resisted at first.

"It took a little bit of encouraging to get them to accept help, because they figured they could do it themselves," she says. "They're proud people. I think it was hard for them to accept getting care because they've always been the do-ers.

They've raised eight kids, 26 grandchildren and 28 great-grandchildren.

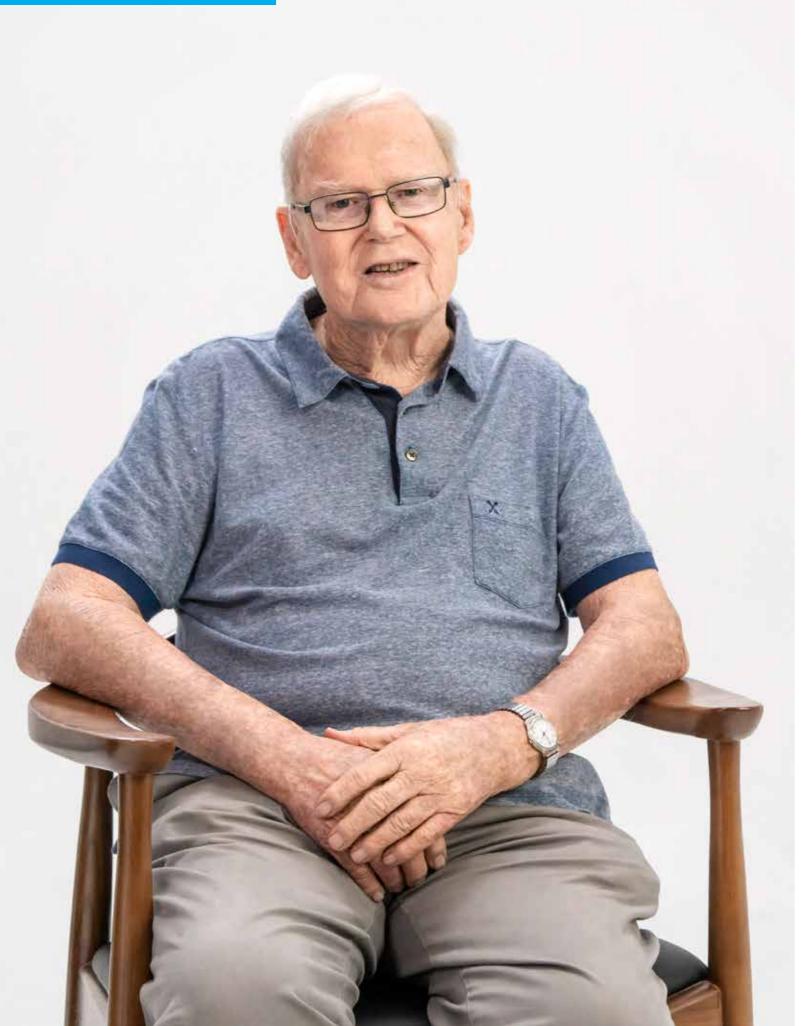
"But I said to Dad, 'Well, I can have quality time now with you and Mum, we can sit and do things rather than me doing the cleaning – if you accept a little bit of help'."

It took several months of reassurance to convince her parents to trial a home care service, but Karin says they now see the home care workers who visit each week to do the housework as helpful friends.

"They've accepted that it's not about someone coming in and taking over, it's just sharing the load," she says.

As for her parents now, Karin says simply, "they feel wonderful and they're proud to tell all their friends 'you should get home care".

Bob's story



"It gives you peace of mind when you've got these people looking after you."

Bob never expected to receive home care services.

The 89-year-old played golf and tennis until just a few years ago. But a back operation, followed by a long stay in hospital while he recovered, meant that he couldn't pick up where he left off once he returned home.

"When I left hospital in December 2017, I couldn't drive and my partner Marjorie had handed in her licence," he explains.

"We needed help to get food because neither of us could drive ... We needed help with the housework too, because Margie ... has a crook shoulder, so we had trouble with bedmaking and all that sort of work, that was painful for us."

Bob's son and Marjorie's son helped the couple register with My Aged Care and from there they engaged home care services, which started with more intensive assistance as Bob recovered at home.

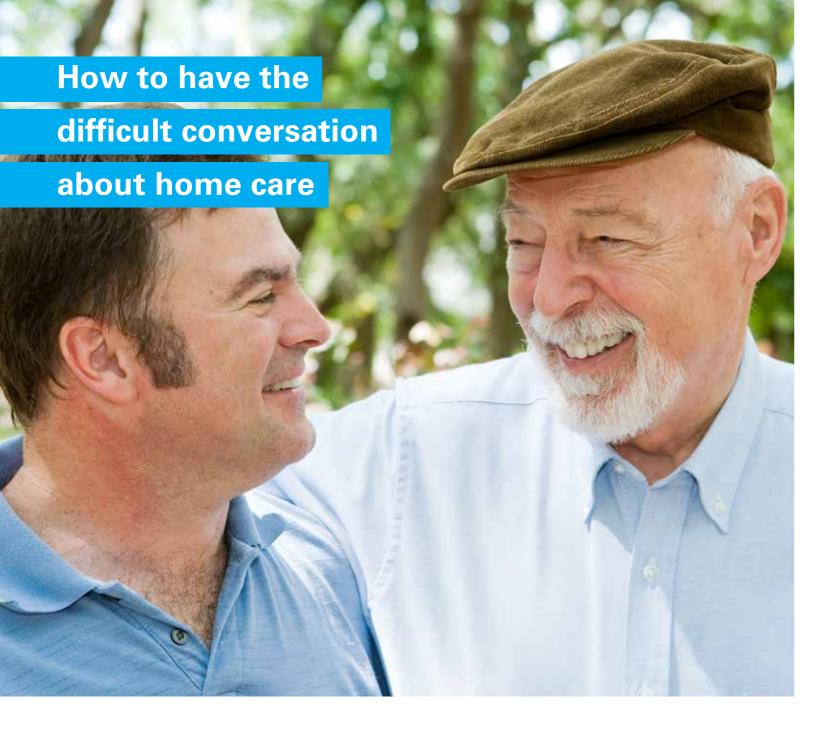
"When I came out of hospital, they'd come twice a week and take us shopping to get food and whatever, until I could drive again," he says. "And now we have them once a week to clean up the house, make the beds etc, so we don't have to go to a nursing home. We want to stay in the home together as long as we can because it's a nice lifestyle. It's pretty important to keep your independence."

Bob admits that coming to the realisation he needed help at home wasn't easy.

"You come to realise that you've got old and you can't do the things that you used to do," he says. "That's a blow, because I've always been active, I've always been a fixer-upper. I still like gardening and I like doing things, but I can't lift things any more. There are some things I can't do any more."

But having the assistance of home care is a "hell of a help", Bob says.

"It gives you peace of mind when you know you've got these people looking after you. Really, it does."



If you think your parent or elderly relative may benefit from home care services, the obvious next step is to discuss it with them.

But broaching the topic is a delicate task because the suggestion of help at home may leave your loved one feeling as though they might lose their independence or

embarrassed that they're no longer seen to be coping.

Here are some helpful tips on how to ease into a chat about home care.

Don't leave the talk too late

Many adult children put off having this conversation with their parent or another elderly

loved one because it may cause upset on both sides. But the conversation will be far more stressful if it's left until a health crisis or an accident.

It may help to explain to your mother or father that you're broaching the topic because you're keen to ensure they avoid a serious illness or injury simply through a lack of appropriate care. Although your parent may still be upset by the conversation, they will also know that the discussion was started with love on your part.

Start with small talk

Using a visual prompt such as a photo album, souvenir or memento can be a great way to start a conversation about your parent's past, opening up an opportunity for the chat to lead into a discussion about what your parent may envision for their future.

This can make it easier to go on to discuss whether they would prefer to age in their own home and, in turn, how home care can support that wish. That you've considered the practicalities of 'ageing in place' and how it can be achieved shows, again, that your loved one's best interests are entirely your focus.

Emphasise independence

Home care services are designed to ensure your parent can continue to live life their way as independently as possible.

For example, a customer may need help with grocery shopping but can still arrange the items in their cupboards and fridge as they normally would. Or perhaps they would prefer to put their own laundry in the washing machine, but need help with hanging out the washing. At Blue Care, the emphasis is on doing 'with' not 'for', to ensure your loved one is firmly in the driver's seat.

Explaining the flexibility and wide variety of modern home care services may relieve your parent of out-dated notions on what home care entails.

Celebrate your relationship

If, like Karin on page 8, you've found yourself spending increasing amounts of time cleaning or otherwise caring for your parent, it's a good opportunity to highlight that home care services will allow you to spend more time enjoying their company.

Likewise, using personal care services to help your loved one bathe, dress or

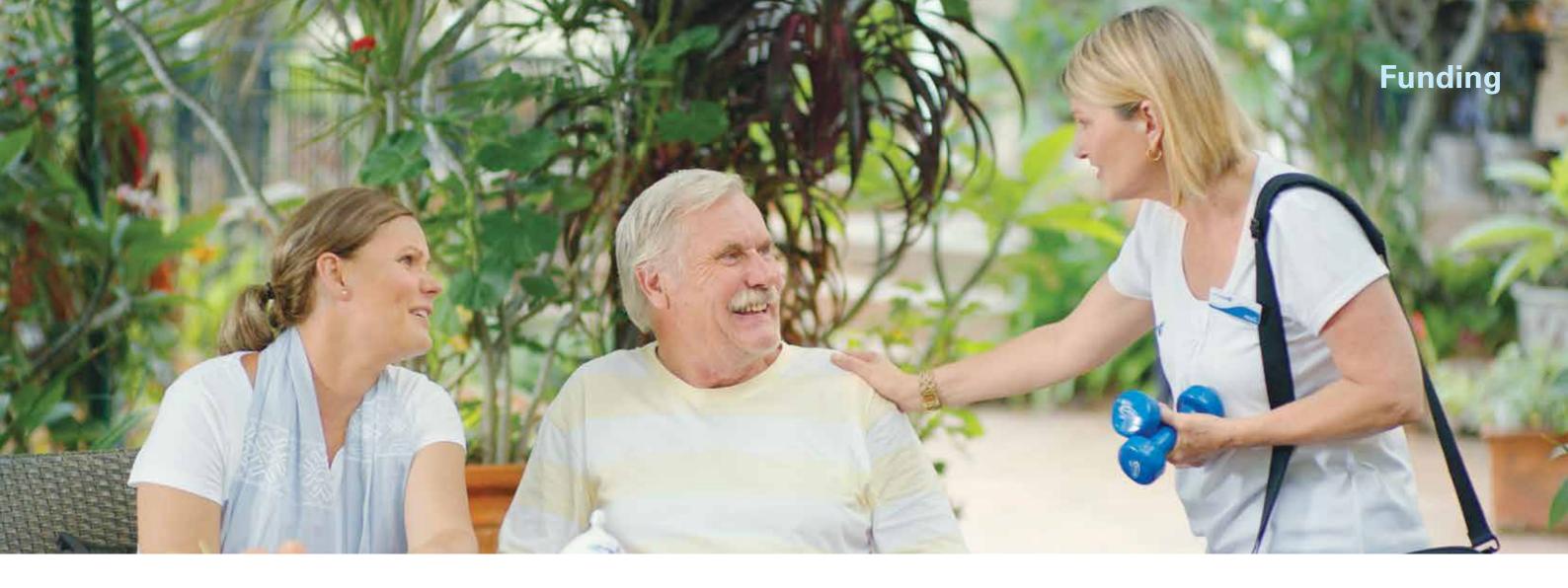
undertake personal grooming means that you can return to a more comfortable parentchild relationship, rather than that of patient-carer.

Call for back-up

A trusted family friend or doctor could help explain the benefits of home care to your parent without emotion clouding the discussion.

Blue Care has years of experience in supporting families as they consider home care options and are happy to talk you through how home care may be useful in your loved one's specific circumstances. Call us on 1300 258 322.





Understanding the different types of home care funding and how to access them can be tricky at first.

Here is a simple overview of the aged care system, and Blue Care's experts are on hand to answer your questions about home care subsidies and the costs of home care services.

Getting started

There are two federal government subsidy schemes for home care services – the Commonwealth Home Support

Program (CHSP) and the Home Care Package (HCP) system but it can be difficult to know what scheme is most relevant to your family member.

Your first stop is My Aged Care, the government's website for all aged care-related information and services. If you've never used My Aged Care before, you can read up on the system at myagedcare.gov.au, before phoning 1800 200 422 between 8am-8pm Monday-Friday and 10am-2pm Saturday to register with the aged care system.

Registration requires a Medicare card number, so if you're registering for a family member, make sure you have their number. After a short assessment of their situation over the telephone with a My Aged Care consultant, you'll be directed to either the CHSP or the HCP avenue for funded home care.

Commonwealth Home Support Program

The CHSP provides the entry level of funding for aged care in the home, designed to

deliver a basic level of care or shorter-term care to older Australians. The care services offered by the CHSP are often used by older people who are recovering from an illness, injury or surgery and just need some help, for example, in shopping for groceries or cleaning the house over a shorter term.

Before that care can be provided, My Aged Care may send a Regional Assessment Service (RAS) assessor to your loved one's home to get more detail on their needs. Once that assessment is complete,

My Aged Care will then refer your loved one to an approved home care service provider of your choice and subsidise the required home care services.

CHSP services aren't means tested, which means your family member's income or assets have no impact on the subsidy your approved home care provider receives from the government toward the cost of their home care services. The CHSP requires just a small contribution from the care user toward those costs and, once funding is approved by My Aged Care, will organise

the services directly with a home care provider such as Blue Care.

Home Care Package

If the phone assessment with My Aged Care indicates a more complex array of care is required, an assessor from the Aged Care Assessment Team (ACAT) will visit your loved one's home instead, to assess which one of four Home Care Package (HCP) levels is best matched to their needs. You can read more about the levels on page 17.





If they are assessed as eligible. your family member will be placed on a waiting list for a subsidised HCP. If their needs are particularly urgent, however, the assessor may recommend to My Aged Care that they receive assistance through the CHSP while they wait for HCP funding.

HCP funding is income-tested, so your family member will be required to undertake an income assessment with Centrelink, which will determine how much, if at all, they are required to contribute toward the cost of their own care. (The family home isn't included in this assessment.)

This contribution, if required, is called an Income-Tested Fee (ITF). It's wise to discuss any financial obligations your loved one may have with your chosen home care provider before they start using its services.

My Aged Care has a useful online income assessment tool, which asks just three questions to deliver an estimate of the fees a home care service provider is likely to charge on top of the government's subsidy for the services your family member requires.

The amount your family member will need to pay, if anything, towards their home care services depends entirely on their individual circumstances; their income and assets (other than the family home) and their care needs. Full Australian Age Pensioners, for example, would usually not be required to make any contribution toward home care services, and the maximum an Australian can be asked to contribute toward the cost of their own care is capped.

But there is an additional cost, called the basic daily fee (BDF), that home care providers are permitted to collect. This is set at a percentage of the single, full Age Pension, so is revised twice a year in line with the pension and charged for every day a person has an active HCP (not every day they actually receive services).

The BDF is collected by the home care service provider and added to the pool of money available for the client to spend on their services. If an HCP is stopped, the service provider will calculate any unspent contributions by the client and government and refund them, with your loved one receiving their portion of the funds back.

Home Care Package levels

Funding

Assessors for a Home Care Package (HCP) will assign your loved one a level of need, which refers to how much help the assessor believes is necessary for them to live independently in their own home. These levels range from 1 to 4 and have a maximum subsidy attached to each, with which home care services can be purchased.

Here are some examples of how a Home Care Package might look for your loved one. Be aware that this is a guide only - home care services are tailored for each person, and hours and services can vary considerably, depending on how your loved one chooses to spend their funds and on what services. Check with My Aged Care for the most up to date funding amounts.

Basic care

People on a Level 1 HCP typically need just a little help around the home with, for example, heavier household chores such as vacuuming or mopping floors. Level 1 users are usually able to drive so don't require transport or social support services. Approximate hours a week: 2.

Low-level care

People on a Level 2 HCP can usually undertake most of their daily tasks unsupported but need additional support on a few, such as being driven to the supermarket and assisted with their shopping or with their banking. Level 2 can include social support such as companionship visits. Approximate hours a week: 3-4.

People on a Level 3 HCP typically need more intensive assistance to live independently, which can range from personal care such as help with bathing or grooming to nutrition care such as assistance with meal preparation. They may need more frequent or longer home care service visits than lower-level clients and if they have a family carer, their carer may be eligible for respite care services. Approximate hours a week: 7-9.

High-level care

As with Level 3 HCPs, Level 4 HCPs are focused on providing complex care involving nursing, allied health and other clinical services. In addition to personal care services, Level 4 clients may also require help managing incontinence or caring for their skin. Their family carer is likely to be eligible for respite care services. Approximate hours a week: 10-13.

If the ACAT assessor deems a Level 4 HCP to be insufficient to meet a person's needs, My Aged Care will let them know about residential aged care options.





Step 1

Contact My Aged Care (MAC) on 1800 200 422 to register your interest in receiving funding for home care services. Don't forget your Medicare card, which you'll need in order to register with MAC.

Step 2

Have an assessment. You can specify at this point that you'd like to receive home care services from Blue Care.

If you are referred to the Commonwealth Home Support Program (CHSP). MAC may send a Regional Assessment Service assessor to your home to assess your needs.

For CHSP, once a service provider has been selected, MAC will ask the provider to discuss with you the services you wish to receive. These services can usually start within a few days.

If you are referred for a Home Care Package (HCP), MAC will send an Aged Care Assessment Team (ACAT) assessor to assess your needs.

Step 3 (HCP only)

For HCP you will receive a letter explaining the outcome of your ACAT assessment. If approved to

receive an HCP, the letter will inform you which level of HCP you will receive - 1, 2, 3 or 4, depending on your needs – and explain what services are recommended. You can read more on the need levels

You will then be placed in a national queue to wait for an HCP to be assigned to you. However, you may also be allocated services from the CHSP to support you during this wait. If you already receive CHSP services, these will continue while you wait for an HCP.

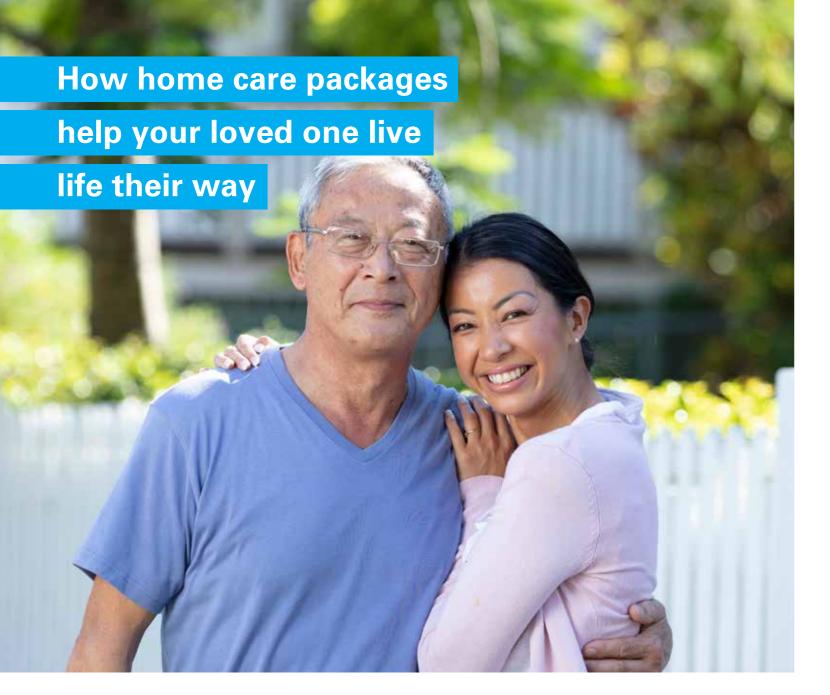
Step 4 (HCP only)

When you reach the front of the gueue, you'll receive another letter to let you know your HCP has been assigned. This letter will contain a referral code that you'll need to access your information on the MAC website. It will also contain a date by which you need to activate your HCP by contacting a service provider such as Blue Care to arrange home care services. You can extend this deadline by a further 28 days by calling MAC, giving you 84 days in total to choose a provider.

Step 5 (HCP only)

If you choose Blue Care as your service provider, we will work with you to tailor a support plan suited to your specific needs and commence home care services.





pets and going shopping for groceries. Assistance with creating meals that meet dietary guidelines or religious or cultural requirements is also common.

If your loved one needs more intensive assistance, personal care services are available to help them bathe, dress, brush their teeth, shave and style their hair.

Home care services are particularly helpful during periods of recovery from illness or surgery, by covering the cost of visits by a nurse to provide medical services such as wound care, health monitoring and medication regime management. Associated health care services

such podiatry or physiotherapy can also be covered by an HCP.

HCPs can be used to cover the cost of physical items, too, including mobility and dexterity aids such as walking frames, bed rails or hand rails, and even the cost of white goods and other household appliances, but only if they are directly related to the recipient's care needs.

Support can also be provided in more subtle ways that enhance a client's social life. For example, care workers are happy to help your loved one use social media, send emails or letters or manage online banking. They'll take them out for coffee and

cake, help them meet up with friends or just drop by their home for a chat and a cup of tea.

This type of lifestyle-supporting care is possible because home care services don't come out of a box or through ticking off a checklist, but – subject to the HCP guidelines - can be tailored through a collaborative conversation of equals: you, your loved one and Blue Care.

For more information about the home care services offered by Blue Care, visit www.bluecare. org.au/help-at-home

Thinking or talking about home care can bring on a real mix of emotions; the funding process may be confusing, while the services can make you feel like you're not doing enough for your loved one and make them feel like they're losing their independence.

But Australia's home care system puts clients firmly in control of the services they receive, and those services can cover *almost* anything that will maintain or

improve quality of life - making home care a truly positive choice.

At Blue Care, we assign a Home Care Package (HCP) Partner to every customer who has HCP funding. The partner works with them to carefully tailor services to their needs and help them squeeze the best value out of their HCP.

And when it comes to services directly related to care needs, there are few

limits on how needs can be accommodated. HCPs cannot be used to purchase food, supplement income, to pay for rent or mortgage costs, or fund gambling, holidays or home renovations that aren't related to care needs, but there are few other restrictions.

Some of the most popular home care services provide help with simple tasks such as cleaning the house, doing the laundry, tidying the garden, caring for

"When considering what care is appropriate, the questions we consider are, how is that

going to affect their ability to stay in their

own home? How is it going to affect their

health, their wellbeing, moving forward?"

Penni Dring Blue Care



Blue Care's friendly customer service team answer some of the most pressing questions they get asked.

Q: We visited mum and dad last week and the house was in disarray! How can we get help for them at home?

A: Your parents may not realise they need help or, if they do, they may not want to ask for it, so you need to talk to your parents first. You could explain to them that the government now has funding available for people who need assistance to remain in their own home, which helps cover the cost of home care services.

Q: If my parents are happy with the idea, how do I get the ball rolling on home care?

A: Once you've spoken to your parents, you can contact My Aged Care and start

the assessment process for the type of services your parents need. My Aged Care also will talk to you and your parents about what subsidy they may receive toward the cost of these services. It will then contact your chosen home care services provider, such as Blue Care. Then we'll get in touch with you and your parents and start organising services.

Q: That sounds great, but what's My Aged Care?

A: My Aged Care is the Australian Government's portal for all aged care services. It handles everything from allocating funding for care to communicating with care providers. But the My Aged Care process can be complicated, so

it helps to have support from our experts as you navigate the system on your parents' behalf.

Q: How much does help at home cost?

A: If My Aged Care directs your parents to the Commonwealth Home Support Program (CHSP) for people with basic or short-term care needs, they'll pay a small flat, hourly fee for the services they use (the rest of the cost is covered by the government), with visits charged in 15-minute increments.

> If My Aged Care directs your parents to the Home Care Package (HCP) system, they will be allocated an amount of funding, and an income assessment will

determine how much they will need to contribute towards it. That total amount is their budget to spend on services, which are generally charged at an hourly rate.

If your parents do not have funding, they can choose to pay the full fee for the service.

Q: My mum's in hospital after having surgery and I'm concerned she'll need help at home once she's discharged. What can I do?

A: The hospital can help with this, by arranging for a My Aged Care assessment of your mother while she's still in hospital, or by calling a home care service provider such as Blue Care and providing us with an urgent referral for care - that way, we can ensure that when she's discharged, we're ready to provide care

immediately. The hospital may also be able to provide the initial funding for care, while your mother goes through the My Aged Care process to determine what funding she may receive.

Q: What about people who no longer have a driver's licence and need help getting to appointments. Can you help with that?

A: If you have funding either CHSP or HCP - we can absolutely help with transport. Bear in mind that under the CHSP, you will need to be assessed as requiring transport, and it is subject to availability.

Q: Can I ask my doctor to help us apply for a HCP?

A: Your doctor can help you fill out My Aged Care forms, as can an aged care provider such as Blue Care. If you have an enduring power or

attorney or are a quardian for your loved one, you can fill out the form for them. If they are hospitalised, the hospital may offer to help you request home care services, including providing assistance with the forms.

Q: Can I pick my own home care services provider?

A: Absolutely. You can call My Aged Care on 1800 200 422 to find out which providers are in your local area. It's advisable to speak to multiple providers before making a choice, and it's fine to involve a family member, friend, carer or quardian if you find that helpful. You may want to prepare a list of questions - for example, what fees they charge for the services you hope to receive, or whether they charge an exit fee if you want to change providers - before speaking to individual providers.







Under the CHSP, some services are subject to availability. Under a HCP, once you've selected a provider, you'll be invited to create a home care agreement with them before you start receiving services. The agreement sets out how services will be provided, who will provide them and what they'll cost. More specifically, the agreement includes a care plan that explains how the services you'll receive meet your specific needs, and a budget that outlines the funds available under your HCP and how they'll be spent.

Q: How old do you have to be before you can access subsidised home care services?

A: Home care subsidies are available to Australians

aged 65-plus, or 50-plus if you're Aboriginal or Torres Strait Islander.

Q: How long may I have to wait before I receive home care services?

A: Services funded under the CHSP can be provided quite quickly, subject to availability. With HCPs, after you've been assessed as eligible by My Aged Care, you are placed in queue, and there can be a long wait for your HCP to be assigned. However, there are interim services that can step in while you're in the queue for HCP funding.

> For example, the CHSP can provide services while you wait for your HCP to come through, and Blue Care will always meet demand for urgent services where

funding isn't available, if we have the capacity.

It's also possible to pay the full fee for service from a home care provider, which many families do, just for peace of mind that their loved one is cared for.

Q: So, I can pay my provider directly if I need more help than my HCP funds?

A: If you need more services than are covered by your allocated HCP funds, you can pay your service provider for additional hours. Every client of Blue Care has a dedicated HCP partner, or co-ordinator, who's responsible for ensuring the client's services are up to standard, that the client doesn't have any needs that aren't being covered and that the client's receiving every dollar's

worth from their funding. You can discuss topping up your HCP with your home care package partner.

Q: Will I see the same carer on each visit?

A: We take into consideration your cultural, religious and ethnic background, and whether you have a preference for male or female carers, and we do our best to meet those preferences. Where possible, we aim to get our customers familiar with a small group of carers in order to cater for planned or unplanned leave.

Q: Is wound care done by care workers or nurses?

A: At Blue Care, wound care is only undertaken by our nurses, who would follow a regime handed to us

by a hospital or doctor.

Q: What kind of background checks do you make on your care workers?

A: Blue Care ensures that a Mandatory National Police Check is completed for all of our workers and if required by their role, check that they hold a Blue or Yellow Card, plus we do our own checks with former employers. We also require four forms of identification from everyone who comes to work for us. You can ask any home care provider you speak to about their screening process for carers, as well as their training programs and what qualifications they require their carers to hold.

> All home care providers must adhere to the federal government's Home Care

Standards, with their adherence monitored by the Australian Aged Care Quality Agency.

Q: Can I talk to current clients before signing a contract for service?

A: Because of client confidentiality and in accordance with privacy laws, Blue Care won't directly divulge any information on current or past clients, but humans work via word of mouth - that's why Blue Care has such a wonderful reputation, because everyone talks! We'd advise potential clients to ask family members, friends or neighbours for feedback on home care service providers they've used and use that information to guide their decision.





No matter where your loved one is in their home care journey, we're here to help. For more information on home care options or to engage home care services, call Blue Care on 1300 258 322 (weekdays 8am-8pm; Saturday 10am-2pm).

Why choose Blue Care as your home care service provider?

Blue Care is one of Queensland's leading in-home and residential aged care providers with over 65 years' experience in providing personalised support and care. Today, our people make more than three million visits each year, in 80 communities throughout Queensland.

We put our customers first, and this focus on individuals has helped us become one of Queensland's largest and most trusted providers. We understand what it means to need support and our compassionate staff are backed up by a network of caring partners and health professionals.



Experience One of Queensland's leading and trusted inhome, retirement living, disability and aged care providers, with over 65 years' experience – giving you the confidence and security of knowing you're in safe hands.



Personalised care We'll work with you to design and deliver the care and support needed, empowering you or your loved one to live life your way.



People A dedicated and passionate team spanning 80 communities across the state. It's this scale that enables you to access a broad range of services in more locations throughout Queensland.



Service Expert advice and information to guide you every step of the way and help make things simpler.

If you or someone you know might benefit from in-home support services, please call Blue Care on 1300 258 322 (1300 BLUECARE) to find out about the services we offer.

Independence, freedom and maintaining relationships we cherish the most are important to all of us. That's why at Blue Care everything we do is focused on empowering you to **live life your way**.

As one of Queensland's leading care providers, our dedicated and compassionate team have been working in local communities for more than 65 years. Our local services include:



In Home Care

Help at Home services, from transport to cleaning to nursing care.



Allied Health

Therapeutic, preventative and rehabilitation support services.



Respite Care

Respite services to support carers – in your home, at a centre or in residential care.



Residential Care

Forty-seven purpose-built homes across the state providing specialist residential care for you or your loved one.



Dementia Care

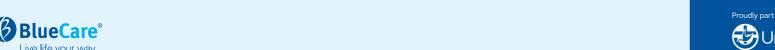
Specialist care and memory support in our community care and respite centres, and residential care.



Disability

Tailored support when you need it, from activities to help at home to therapies.

For more information about our services, visit **bluecare.org.au** or call **1300 BLUECARE** (**1300 258 322**)









Talk to us today





