

## CYPRUS

Please note: references in this guidance note to "*domiciliary care*" mean personal care or practical help provided to people in their own homes; "*residential care*" means care provided in an institution setting such as a residential or nursing home.

### General principles

#### Basic criteria

Under the Public Assistance and Services Laws 1991-2003, a person legally residing in Cyprus whose resources are not sufficient to meet his/her basic and special needs, may be entitled to social assistance in kind and/or cash. Within this framework, a social assistance recipient may be entitled to a long term care allowance either in kind (in the case of state domiciliary or residential care) or in cash (in the case of private or non-governmental domiciliary or residential care). The Social Welfare Services (Ministry of Labour and Social Insurance) are responsible for the implementation of the above legislation. Welfare Officers assess needs for LTC on an individual basis.

The concept of long term care is not clearly defined in respect with other risks. Once a person meets eligibility criteria for social assistance, a person is assessed in terms of his/her need for LTC. The reasons leading to LTC (e.g. sickness, invalidity, disability or other) are irrelevant in this respect.

Under the Public Assistance and Services Laws, LTC is applicable to all categories of age. In practice, most cases involve older persons.

The determination of need for LTC is based on the finality principle.

#### Entitled persons

The criteria for the determination of long term care are daily needs for care, sometimes on a 24-hour basis.

- There are different stages of severity of LTC. Usually a doctor's assessment, family members' reporting and self reporting are necessary for a welfare officer to determine an individual's needs for LTC.
- If a family member is prevented from seeking a job due to caring for another family member (who is entitled to social assistance), then a LTC allowance is granted to the social assistance recipient who, in turn, gives that allowance to the family carer.

#### Organization

- Provision of services is organised on a national level.
- Domiciliary and residential care may be provided by the governmental, non-governmental and private sectors.

## **Legal fundament of the carer**

- In case a family member receives payment through the social assistance fund, then s/he is bound by a contract as in the case of professional carers.
- Professional carers (governmental or non-governmental) are treated as any other employed person in the relevant sector. In the case of private carers (freelancers) serving social assistance recipients, terms of employment are determined in a contract which is signed by the recipient, the carer and the Director of the Social Welfare Services. Contribution to the social insurance fund is one of the requirements included in the contract.

## **Financing**

- LTC allowance is financed by the social assistance fund (according to public assistance legislation) which is funded through general taxation.

## **Benefits**

- Benefits are means tested, according to public assistance legislation.
- Domiciliary care has a priority over residential care which is used as a solution of last resort. Other principles promoted through the public assistance legislation are those of independence and dignity. For example, after a recipient's care needs are assessed and care services are secured, cash is granted to the recipient (not the service provider) who is expected to take responsibility for his/her obligation to pay the carer.

## **Types of services**

### **Concerning domiciliary care**

- Cash allowances concerning domiciliary care are paid directly to the dependant person. Domiciliary care allowance may vary from CYP 20 (EUR 34) to CYP 200 (EUR 345), monthly.
- Benefits in kind are granted in the case of state domiciliary care.
- It is possible for a social assistance recipient to contribute towards the provision of care services. Social assistance may cover domiciliary care services fully or partly depending on the recipient's capability to meet his/her basic and special needs.

### **Concerning residential care**

- Residential care is delivered mainly by the private sector. It is also delivered by the state and non-governmental sectors. Residential care is provided in all towns. Community Welfare Councils (non-governmental bodies) provide residential care at a local level, even in remote geographical areas of the island.

- It is possible for a social assistance recipient to contribute towards the provision of care services. Social assistance may cover residential care services fully or partly depending on the recipient's capability to meet his/her basic and special needs.

### **Accompanying measures**

- Contracts signed among the Director of Social Welfare Services, the social assistance recipients and private carers (including family carers, in certain cases) include contributions to the social insurance fund. There are no benefits for informal (unpaid) family carers.
- The Social Welfare Services offers training opportunities and supervision to state domiciliary and residential carers.
- A Social Benefit for the Improvement of Housing Conditions Scheme aims to improve the living conditions of social assistance recipients or persons at risk of becoming recipients of social assistance. The scheme provides for house repairs and house extensions. The maximum amount granted is CYP 7,000 (EUR 12,063). Entitlement is granted provided the applicant owns the house in which s/he resides or his residence in a house owned by another person is guaranteed.

### **Quality control of care**

- Minimum standards are regulated by The Homes for the Elderly and Disabled Persons Laws of 1991 - 1994 and The Homes for the Elderly and Disabled Persons Regulations of 2000 provide for standards in residential care.
- The Social Welfare Services are responsible for the implementation of legislation regarding standards of residential care. Welfare Officers may visit any residential institution as often as necessary to ensure it operates according to the standards as determined by legislation.
- In order to operate, a residential institution (non-governmental or private) needs to be registered in the Ministry of Labour and Social Insurance. Welfare Officers (on behalf of the Minister) inspect residential institutions every month until the institution is registered and every three months after that.
- In the process of assessing care needs and finding the best possible solution to satisfy those needs, the person concerned and his/her family are highly involved. Welfare Officers visit the person concerned to discuss, in depth, all parameters regarding the person's needs and solutions. Community sources (e.g. local bodies) may also be involved in the process.
- Professional associations or trade unions are indirectly involved in debates concerning quality control of care through their participation in other bodies:

#### 1. The Supreme Policy Making Body on Issues concerning Older Persons

This Body has been set up by the Council of Ministers with a view to advising on the formulation of comprehensive policies for the elderly and the coordination of

relevant services and programmes. It is chaired by the Minister of Labour and Social Insurance and is composed of the Permanent Secretaries of the Ministries of Finance, of Health, of Labour and Social Insurance and the Planning Bureau.

## 2. The Coordinating Body for Older Persons

This body, also chaired by the Minister of Labour and Social Insurance, has an advisory role on policy issues with special emphasis on matters related to social services, health services and special privileges which can be granted to facilitate the access of elderly people to different sites and services. Governmental departments as well as trade unions, voluntary organisations and the elderly themselves are represented on this Body.

## 3. The Advisory Board

The Advisory Board is appointed by the Minister of Labour and Social Insurance, under the law regulating the establishment and operation of homes for older persons and persons with disabilities. The role of the Board is to advise the Minister on the implementation and the improvement of legislation related to older persons. Governmental departments, non-governmental organisations, municipalities, relevant associations and older persons themselves are represented on the Board.

## 4. Senior Citizens' Parliament

The Senior Citizens' Parliament was established in 1999 during the International Year of Older Persons. The initiative for its establishment belongs to NGOs. It consists of 56 members representing various non-governmental organisations dealing with matters related to older persons. The general aim of the body is to bring up issues and recommendations relevant to older citizens.

### **Current debate**

- In Cyprus, there is a debate on old persons' issues in general. In 2005, the Council of Ministers approved a *National Action Plan for Older Persons (NAP/Old), 2005-2015*, which has been a product of public consultation with governmental and non-governmental organisations. Long term care is among the issues tackled in the NAP/Old within the framework of securing an accessible and supportive environment and promoting health and welfare.
- Reforms in the existing system of healthcare and the introduction of new forms of healthcare are included in another *Plan of Action for the Healthcare of Older Persons* (Ministry of Health). This Plan of Action aims at the development and upgrading of healthcare services for older persons through the following measures:
  - Health promotion and prevention through the provision of special schemes
  - Respect for older persons and abolition of age discrimination

- Provision of individualised and comprehensive care
- Development of intermediate care
- Improvement of hospital services
- Comprehensive mental healthcare

The NAP/Care will be implemented in three stages and will be completed in 2014.