



20 May 2025

Tēnā koe

Official Information Act request

Thank you for your email of 8 April 2025, requesting information on Residential Care Assessment, including application process and relevant legislation.

I have considered your request under the Official Information Act 1982 (the Act). Please find my decision on your request set out below.

The Residential Care Assessment is governed by the Residential Care and Disability Support Services Act 2018. I attach a printed copy of this Act for your information.

You can find information about the application process, which in the Act is termed a Needs Assessment and a Means Assessment, in Parts 5 and 6 of the Act.

While information is provided on the Ministry of Social Development's website about how to apply for the Residential Care Subsidy, the advice follows the provisions set out in Parts 5 and 6 of the Act, and requires an applicant, or their caregiver who holds the power of attorney, to book an appointment with a Needs Assessment Service Coordination agency funded by Health New Zealand.

At the end of this letter, I have included a List of Disability Services providers, sourced from the NZ Needs Assessment Service Coordination Association website, for your information.

I also attach a separate Appendix that includes the relevant extracts from the Work and Income website that provides full details of the Residential Care Subsidy and how to apply. The extracts also provide extracts from a separate webpage to information about the Residential care Loan, which is available if certain conditions are met.

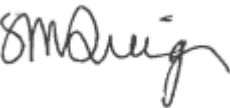
The application forms are provided by the Needs Assessment service after the review is completed. For your information, I provide a sample of a Residential care Subsidy application form. An applicant for the subsidy would complete the actual form as they progress through the Needs Assessment process.

I will be publishing this decision letter, with your personal details deleted, on the Ministry's website in due course.

If you wish to discuss this response with us, please feel free to contact OIA_Requests@msd.govt.nz.

If you are not satisfied with my decision on your request, you have the right to seek an investigation and review by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz or 0800 802 602.

Ngā mihi nui

pp. 

Anna Graham
General Manager
Ministerial and Executive Services

List of Disability Services providers, sourced from the New Zealand Needs Assessment Service Coordination Association website.

Disability Services – Children & Adults



Your Way | Kia Roha Otago
Level 1 Burns House 10 George Street PO Box 966 Dunedin
[0800 758 700](tel:0800758700)
otago@yourwaykiaroha.nz



LifeLinks
94 Disraeli Street, Sydenham, Christchurch 8023
[0800 866 877](tel:0800866877)
[03 365 9593](tel:033659593)
lewesa@lifelinks.co.nz

[Visit Website](#)

Health New Zealand
Te Whatu Ora
Nelson Marlborough

Support Works
281 Queen Street Richmond Nelson 7020
[0800 244 300](tel:0800244300)
supportworks.referrals@nmdhb.govt.nz

[Visit Website](#)

Te Whatu Ora
Health New Zealand
Capital, Coast and Hutt Valley

Focus
Level 2, 49-51 Lincoln Road Masterton 5810
[0800 900 001](tel:0800900001)
[06 946 9813](tel:069469813)
focus@wairarapa.dhb.org.nz



Enable New Zealand Needs Assessment & Service Coordination
2nd Floor, 585 Main Street – PO Box 4547 Palmerston North, 4442
[0800 36 2253](tel:0800362253)
[06 353 5899](tel:063535899)
nasc@enable.co.nz

[Visit Website](#)



Your Way | Kia Roha Whanganui
244 Victoria Avenue Wanganui
[0800 758 700](tel:0800758700)
whanganui@yourwaykiaroha.nz

[Visit Website](#)



Your Way | Kia Roha Taranaki
Cnr Powderham St & Robe Street PO Box 115 New Plymouth
[06 758 5201](tel:067585201)
taranaki@yourwaykiaroha.nz

NASC Hawkes Bay
Villa 9, Gate 8 , Orchard Road, Hastings
[06 870 7485](tel:068707485)
NASC.HB@hawkesbaydhb.govt.nz

Your Way | Kia Roha Tairāwhiti
105 Disraeli Street, PO Box 1125, Gisborne 4040
[0508 447 627](tel:0508447627)
referrals@yourwaykiaroha.nz

Support Net Kupenga Hao Ite Ora
190 17th Ave Tauranga; 1166 Amohau St Rotorua; Whakatane Hospital Stewart
St Whakatane

[0800 262 477](tel:0800262477)
[07 571 0093](tel:075710093)
SupportNetBOP@bopdhb.govt.nz
Disability Support Link
[07 839 8883](tel:078398883)
dsloffic@waikatodhb.health.nz



NorthAble
40 John Street Whangarei
[0508 637 200](tel:0508637200)
[09 430 0988](tel:094300988)
nascadmin@northable.org.nz

[**Visit Website**](#)

Te Whatu Ora

Health New Zealand

Capital, Coast and Hutt Valley

Capital Support
Therapies Department Kenepuru Hospital PO Box 50215 Porirua
[04 230 6400](tel:042306400)
capitalsupport@ccdhb.org.nz



Your Way | Kia Roha Lower Hutt
1 Market Grove PO Box 33-145 Lower Hutt
[04 569 3102](tel:045693102)
referrals@yourwaykiaroha.nz

[**Visit Website**](#)



Kaikaranga (formerly Taikura Trust)
Kaikaranga, Level 1, Building 1 570 Mt Wellington Highway, Mt Wellington,
Auckland 1062
[09 278 6314](tel:092786314)
[0800 824 5872](tel:08008245872)
info@kaikaranga.org.nz

[**Visit Website**](#)

Mental Health Services

Mental Health Needs Assessment and Service Co-ordination | Southern | Te
Whatu Ora

Visit Website

Te Oranga Tonu Tanga
Te Taiahoaho Wakari Hospital Taieri Road Dunedin 9010
[+64 7 474 0999 x5510](tel:+6474740999)
sarah.wallace@southerndhb.govt.nz
North Community Mental Health Team
Fraser Building 154 Hanover Street Dunedin 9016
[+64 3 470 9429](tel:+6434709429)
Sylvia.Oliver@southerndhb.govt.nz
South Community Mental Health Team
599 Princes Street Dunedin 9016
[+64 3 471 8475 x701](tel:+6434718475)
lynda.hilder@southerndhb.govt.nz

Te Whatu Ora

Health New Zealand

South Canterbury

South Canterbury District Health Board
Needs Assessment and Service Coordination, Talbot Community Health Hub, 156
Otipua Road, Timaru, 7910
[03 687 7120](tel:036877120)
nascadmin@scdhb.health.nz

West Coast DHB
P O Box 387 Greymouth 7805
[+64 3 768 0499](tel:+6437680499)
[Extension 2525](tel:+6437680499)
diana.hay@westcoastdhb.org.nz

Visit Website

Mental Health Service Coordination
Nelson
[+64 03 546 1923](tel:+64035461923)
rose.allen@nmdhb.govt.nz



Te-Upoko-me-Te-Karu-o-Te-Ika
Mental Health, Addictions and
Intellectual Disability Service

Mental Health NASC (Capital & Coast DHB / Hutt Valley DHB)
MH Addictions & Intellectual Disability Service, Te-Upoko-me-Te-Karu-o-Te-Ika,
P O Box 50215, Porirua, 5240
[+ 64 4 381 1631](tel:+6443811631)
mhnasc@ccdhub.org.nz

Visit Website

Te Whatu Ora

Health New Zealand

Capital, Coast and Hutt Valley

Mental Health NASC
Service not available

Te Whatu Ora

Health New Zealand

Capital, Coast and Hutt Valley

Whanganui DHB

Private Bag 3003 Whanganui 4540

[+ 64 6 348 3469](tel:+6463483469)

Mihi.Backhouse@WDHB.org.nz

Mental Health & Addiction Services

Taranaki DHB Private Bag 2016 New Plymouth 4342

[+ 64 6 753 6139 x8647](tel:+6467536139x8647)

lauren.cameron@tdhb.org.nz

NASC Mental Health & Addiction Services

Private Bag 9014 Hastings 4156

[+64 6 878 8109 x5951](tel:+6468788109x5951)

Te Ara Tiaki Pakeke Healthy Ageing Service

Gisborne Hospital, 421 Ormond Rd/Private Bag 7001 Gisborne 4010

[06 869 0558](tel:068690558)

healthy.ageing@tdh.org.nz

Link People (Rotorua)

Link People Level 1, 1213 Haupapa Street Rotorua

[0800 932 432](tel:0800932432)

info@linkpeople.co.nz

Community Mental Health Services (Bay of Plenty DHB, Whakatane)

Level 2, Commerce Plaza, 52 Commerce Street, Whakatane, 3120

[0800 774 545](tel:0800774545)

[+64 7 306 0154](tel:+6473060154)

Andrew.Neas@bopdhb.govt.nz

Community Mental Health Services (Bay of Plenty DHB, Tauranga)

Kowhai House, Tauranga Hospital, Cameron Road, Tauranga

[0800 800 508](tel:0800800508)

[+ 64 7 579 8329](tel:+6475798329)

Andrew.Neas@bopdhb.govt.nz

Residential Coordination Service

193 London Street Hamilton 3240

[+64 7 834 6902 x22442](tel:+6478346902x22442)

linda.grady-thomson@waikatodhb.health.nz

Waitemata

Locality Co-ordination Services Private Bag 93 503 Takapuna North Shore City
0740

[+64 9 822 8504](tel:+6498228504)

Glenda.Knox@waitematadhb.govt.nz

Te Whatu Ora

Health New Zealand

Te Toka Tumai Auckland

Auckland DHB

C/- Cornwall House Cornwall Complex Lower Ground Floor, Building 16
Greenlane Clinical Centre Greenlane Road Epsom Auckland 1142

[+64 021 784356](tel:+6421784356)

servicecoordination@adhb.govt.nz

CMDHB Adult Mental Health Services

Building 6/17 Lambie Drive Manukau City 2241

[+64 9 261 3700](tel:+6492613700)

Chelyn.Deane@middlemore.co.nz

Community Mental Health & Addiction Services

5 Three Mile Bush Road, Kamo, Private Bag 9742, Whangarei

[0800 22 33 71](tel:0800223371)

[\(09\) 430 4101](tel:(09)4304101) Ext 3502 & 3503

Raewyn.Yakas@northlanddhub.org.nz

Older Peoples Services

NASC (Needs Assessors and service coordination)

Ashburton Hospital Private Bag 801, Ashburton

[03 307 6925](tel:033076925) ext 28935

Taranaki Community Support Services

Taranaki Base Hospital PO Box 2016 New Plymouth 4340

[06 759 7214](tel:067597214)

olderpeoplesnasc@tdhb.org.nz



Gore Trust Needs Assessment

Gore Hospital Gore

[03 209 3030](tel:032093030)

cna@gorehealth.co.nz



Otago District Health Board

Clutha Health First, 9-11 Charlotte Street, PO Box 46, Balclutha, 9240

[+64 03 419 0520](tel:+6434190520)

sandra.faddes@chf.co.nz

[**Visit Website**](#)

Care Coordination Centre
Southland District Health Board (Southland), Kew Road, PO Box 828, Invercargill
9812
[0800 223 225](tel:0800223225)
[03 214 5725](tel:032145725)
CareCoordinationSTH@southerndhb.govt.nz

Te Whatu Ora

Health New Zealand

South Canterbury

South Canterbury District Health Board
Needs Assessment and Service Coordination, Talbot Community Health Hub, 156
Otipua Road, Timaru, 7910
[03 687 7120](tel:036877120)
nascadmin@scdhb.health.nz
Complex Clinical Care Network
P O Box 387 Greymouth
[+643 768 0481](tel:6437680481)
complexclinicalcarenetwork@wcdhb.health.nz

Health New Zealand Te Whatu Ora – Waitaha Canterbury
The Princess Margaret Hospital Older Persons Health PO Box 800 Christchurch
[03 337 7765](tel:033377765)
CommunityReferralCentre@cdhb.health.nz

Visit Website

Health New Zealand

Te Whatu Ora

Nelson Marlborough

Needs Assessment Service
281 Queen Street Richmond Nelson 7020
[0800 244 300](tel:0800244300)
referrals.needsassessment@nmdhb.govt.nz

Visit Website



Capital and Coast Care Coordination Centre
PO Box 50-544, Porirua 5240 Level 1, 13 Marina View, Mana 5026
[04 238 2020](tel:042382020)
wellington@careco.org.nz



Hutt Valley Service Coordination Centre
PO Box 30658, Lower Hutt 5040 Level 3, 20 Pretoria Street, Lower Hutt 5010
[04 566 2226](tel:045662226)
hutt@careco.org.nz

Te Whatu Ora

Health New Zealand

Capital, Coast and Hutt Valley

Focus

Level 2, 49-51 Lincoln Road Masterton 5810

[0800 900 001](tel:0800900001)

[06 946 9813](tel:069469813)

focus@wairarapa.dhb.org.nz

Supportlinks

Community Village Palmerston North Hospital 50 Ruahine Street Palmerston North 4442

[0800 22 1411](tel:0800221411)

[06 350 6671](tel:063506671)

supportlinks@supportlinks.org.nz



Your Way Kia Roha

Your Way | Kia Roha Whanganui

244 Victoria Avenue Wanganui

[0800 758 700](tel:0800758700)

whanganui@yourwaykiaroha.nz

Visit Website

NASC Hawkes Bay

Villa 9, Gate 8 , Orchard Road, Hastings

[06 870 7485](tel:068707485)

NASC.HB@hawkesbaydhb.govt.nz

Te Ara Tiaki Pakeke Healthy Ageing Service

Gisborne Hospital, 421 Ormond Rd/Private Bag 7001 Gisborne 4010

[06 869 0558](tel:068690558)

healthy.ageing@tdh.org.nz

Lakes NASC (Rotorua)

2 Ranolf Street Private Bag, Rotorua Mail Centre, Rotorua 3023

[07 343 1030](tel:073431030)

nasc.admin@lakesdhb.govt.nz

Support Net Kupenga Hao Ite Ora

190 17th Ave Tauranga; 1166 Amohau St Rotorua; Whakatane Hospital Stewart
St Whakatane
[0800 262 477](tel:0800262477)
[07 571 0093](tel:075710093)
SupportNetBOP@bopdhb.govt.nz
Disability Support Link
[07 839 8883](tel:078398883)
dslooffice@waikatodhb.health.nz
Counties Manukau District Health Board
Needs Assessment Service Co-ordination – Community Central, Middlemore
Hospital, Private Bag 93311, Otahuhu, Auckland 1640
[0800 262 368](tel:0800262368)
[09 277 3440](tel:092773440)
DutyNasc@middlemore.co.nz

Te Whatu Ora

Health New Zealand

Te Toka Tumai Auckland

Adult Community Services
Greenlane Clinical Centre, Building 17, 214 Green Lane West, Epsom, Auckland
1051
[0800 631 1234](tel:08006311234)
[09 631 1234](tel:096311234)
communityservices@adhb.govt.nz

Visit Website

Waitemata District Health Board
Private Bag 93 503 Takapuna Auckland
[09 442 7171](tel:094427171)
nascinfo@waitematadhb.govt.nz
Northland District Health Board
Private Bag 9742 Whangarei
[0800 88 88 90](tel:0800888890)
[09 430 4131](tel:094304131)
nasc@northlanddhdhb.org.nz

Residential Care Subsidy application



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

If you need to be in a rest home or private hospital indefinitely, a Residential Care Subsidy may be able to pay for some of your care. It's paid directly to the rest home or hospital.

Before you send in this application your needs assessor will complete the Needs Assessment Certificate in this form. They'll confirm the level of care you need and that you're eligible to apply.

There are also some other conditions you need to meet, including:

- you need to be 65 years old or more, or
- 50-64 years and single with no dependent children.

If you want to know more, go to our website workandincome.govt.nz and search on *Residential Care Subsidy*.

Information is also in our Residential Care Subsidy Brochure or you can call us on **0800 999 727**.

90 Days: You need to apply no more than 90 days after the date you want the Residential Care Subsidy to start.

What's in this application

This application is made up of a number of forms. You might not need to fill them all in, but we'll direct you through the form to make sure you've completed everything you need to.

Privacy Statement	Page 2	Information about your privacy and how we protect the information you and others give us.
Needs Assessment Certificate	Pages 3–4	This form should be completed by the co-ordinator of your Needs Assessment Service
Financial Means Assessment	Pages 5–18	This is the main part of the application. We use the information you give us to work out if you can get Residential Care Subsidy.
Residential Care Loan form	Page 9	If you want to keep your home for a while to allow you to adjust to your new circumstances, but there are limited funds to pay for the cost of your Residential Care, we may be able to help with a Residential Care Loan.
Help Agent or Power of Attorney form	Page 20–21	This page lets us know if you have a representative for your dealings with us. We can only share information with an Agent or Power of Attorney.
Appointment of agent form	Page 22–24	If you don't have an Enduring Power of Attorney and want someone to act for you when dealing with us, you need to complete this form. We need to know what the person or organisation is authorised to do for you.
Declaration and Signature Page	Page 25	Where you agree to some conditions and sign your application.
Checklist	Page 26–27	Use this to check you've done everything you need to and have gathered all the documents we need, before you send your form to us.

What you need to do next

Once you've completed your form, and gathered all the documents we need, you can:

- **Send** your application and documents to us:

Post

Centralised Processing Services
Residential Subsidy Unit
Private Bag 9032
Whangarei 0148

Courier

Centralised Processing Services
Level 2, Rathbone Business Centre
49–53 James Street
Whangarei 0110

- **Take it to any of our offices.** We'll copy and send your documents to our processing unit
- **Scan and email** your documents to MSD_RCS@msd.govt.nz



How we protect your privacy



MINISTRY OF SOCIAL
DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Collecting your information

We collect your personal information, so we can provide income support, NZ Super or Veteran's Pension, Student Allowance, or Loans and connect you with employment, education and housing services. We do this under various Acts, which are all listed on our website at workandincome.govt.nz/privacy

- To help us do this, we collect information about your identity, your relevant history, and your eligibility for our services.
- We get this information directly from you, and we sometimes collect information about you from others, including other government agencies.
- You can choose not to give us your personal information, but we might not be able to help you if you don't.

Using your information

We use the information you give us to make decisions about the best way to help you.

- These decisions may be about:
 - whether you're eligible for our services
 - running our operations and ensuring our services are effective
 - the services we'll provide in the future.

Sharing your information

Sometimes, we need to share your information outside our Ministry to reach our goal of helping New Zealanders to be safe, strong, and independent

- To do this, we may share your information with:
 - prospective employers to help you find work
 - contracted service providers that help us to help you
 - health providers if we need your medical information to assess your eligibility
 - other government agencies when we have an agreement with them
 - some other governments if you may be eligible to get or are getting an overseas pension.
- We also share personal information when the law says we have to.

Respecting you and your information

We make sure we follow the Privacy Act to do what's right when we use your information.

- We treat you and your information with respect, by acting responsibly and being ethical.
- We make sure any technology we use meets strict security standards so it keeps your information safe.

Get in touch if you have a question

You have a right to ask to see your personal information, and to ask for it to be corrected if it's wrong.

- If you have a question or a complaint, please get in touch.
- You can find full details about what we do with personal information in our privacy notice at:
workandincome.govt.nz/privacy

Residential Care Subsidy needs assessment certificate



MINISTRY OF SOCIAL
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TE MANATŪ WHAKAHIATO ORA

This form should be completed by the co-ordinator of a Needs Assessment Service.

This form should stay with the main application and not be separated.

Client's details

1

What is the client's full name?

First and middle names

Surname or family name

2

What is the client's date of birth?

Day Month Year

3

Is the person aged 50-64 years single with no dependent children?

☐

No

☐

Yes

Go to ques on 5

4

Is the person aged 65 years or more?

☐

No

☐

Yes

The person won't qualify for Residential Care Subsidy at this time

5

Is the person eligible for publicly funded health and disability services?

☐

No

☐

Yes

The person won't qualify for Residential Care Subsidy at this time

6

Has the person been assessed by a needs assessor as requiring long-term residential care in a hospital or rest home, indefinitely?

☐

No

☐

Yes

The person won't qualify for Residential Care Subsidy at this time

More questions over the page

INFORMATION FOR Q5:
It's important you check whether your client is eligible for publicly funded health services.

Needs assessment information

7

Who has undertaken the assessment?

Name of assessor

Assessment team

8

What was the date of the needs assessment?

Day Month Year

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Service provider details

9

Who is the service provider?

Name of hospital or rest home

Address of hospital or rest home

10

What date did/will the person enter the rest home or hospital?

Day Month Year

--	--	--

11

What is the Territorial Local Authority?

Service co-ordinator's statement

Based on the answers to questions 3-6 above, I confirm the person meets the criteria for a Financial Means Assessment to be completed.

Service co-ordinator's agency

Agency's address

Email

Contact phone

Service co-ordinator's name (print)

Service co-ordinator's name signature


Day Month Year

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Residential Care Subsidy financial means assessment



MINISTRY OF SOCIAL
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TE MANATŪ WHAKAHIATO ORA

As you answer the questions, look for the Attachment icon  in the margin. When you see these, you may need to provide some documents. We also have a checklist to help you at the end of the form.

Please initial any changes that you make.

Tell us about yourself

If you get New Zealand Superannuation, Veteran's Pension, a benefit or extra financial help from Work and Income or have done in the past, write your client number here if you know it. This number can be found on your SuperGold Card or Community Services Card if you have one.

Client number

Tell us about yourself

1

What is your full name?

☐ Mr ☐ Mrs ☐ Ms ☐ Miss Other

First and middle names

Surname or family name

2

Is the name on your birth certificate the same as above?

☐ No ☐ Yes

First and middle names

Surname or family name

HOW TO ANSWER Q3:

For example, have you had married names, English names, changes by deed poll, or aliases?

3

Have you ever been known by any other name?

☐ No ☐ Yes

1.

2.

4

What name would you like us to call you?

☐ The name I wrote in Question 1 ☐ The name I wrote in Question 2☐ Other

5

What date were you born?

Day	Month	Year

6

Are you:

☐ Male
 ☐ Female
 ☐ Gender diverse

Tell us your ethnicity

7

Tick the group(s) you most identify with.

☐ Māori → Which tribe(s) or iwi?

☐ New Zealand European
 ☐ Niuean
 ☐ Samoan
 ☐ Indian

☐ Other European
 ☐ Tokelauan
 ☐ Tongan
 ☐ Chinese

☐ Cook Island Māori
 ☐ Other ↓ If other, write below

☐ Don't want to answer

INFORMATION FOR Q7:

We collect this information for statistics we use in research and future development work.

Tell us your contact details

8

What was your address before you entered residential care?

Flat/House number Street name

Suburb

Town/City

HOW TO ANSWER Q8:

If you lived in a rural area, flat/house number could include your RAPID number, fire number, emergency services number.

9

What address would you like your mail sent to?

HOW TO ANSWER Q9:

Mailing address can include a PO Box, rural delivery details, or C/O address.

10

What is the name and address of the rest home or hospital where you currently stay?

Rest home or hospital name

Address of rest home or hospital

11

What date did you enter the rest home or hospital?

Day	Month	Year

Payment details

If you qualify for a Residential Care Subsidy, most of your NZ Super, Veteran's Pension or benefit payments must go towards the cost of your care at the rest home or hospital.

You keep a personal allowance of a set amount each payday.

12

Do you want us to redirect the contribution from your NZ Super, Veteran's Pension or benefit directly to your rest home or hospital?

☐

No

You'll be responsible to pay this yourself

☐

Yes

Payments will start when we've decided you're financially eligible for Residential Care Subsidy

13

Have you already paid rest home fees?

☐

No

☐

Yes

↓ If yes, what date have you paid your fees up to?

Day Month Year

Tell us about your dependent children

14

Do you have dependent children in your care?

☐

No

Go to pag

☐

Yes

↓ If yes, please provide details below

Child1

Full name

Date of birth

Day Month Year

Relationship to you

Parent 1: Full name

Parent 2: Full name

Child2

Full name

Date of birth

Day Month Year

Relationship to you

Parent 1: Full name

Parent 2: Full name

If you need to include more than two children, please write these details about each one on a separate sheet of paper, and provide it with this application form.

HOW TO ANSWER Q14:
Please give the names of children you're responsible for, are maintained as a member of your family and you support financially.

Relationship status

1 INFORMATION NOTE:

This definition applies to your situation now and immediately before you moved to the rest home or hospital.

Whether people are single or a couple affects eligibility for certain income assistance and the rate at which we can pay that assistance.

When we work out your entitlement to income assistance, we'll consider you to be in a relationship if you're married, in a civil union, or in a de facto relationship, and have a degree of companionship.

By degree of companionship, we mean two people:

- are committed to each other emotionally for the foreseeable future, *and*
- are financially interdependent.

To give you a better idea of what we mean by this, think about whether your relationship includes some of the things below:

- you live together at the same address most of the time
- you share responsibilities, for example bringing up children (if any)
- you socialise and holiday together
- you share money, bank accounts or credit cards
- you share household bills
- you have a sexual relationship
- people think of you as a couple
- you give each other emotional support and companionship.

2 HOW TO ANSWER Q15:

Tick this statement to confirm you understand the definition of a relationship for benefit purposes.

15

Do you understand our definition of a relationship for benefit purposes?

☐

No

Please talk with us

☐

Yes

16

Do you have a partner?

☐

No

Go to question 7 on page 10

☐

Yes

Go to question 7

17

What is your partner's full name?

First and middle names

Surname or family name

18

What is your partner's date of birth?

Day Month Year

19

What is your relationship status with your partner?

☐

Tick one of the following boxes

☐

Married

☐

In a civil union

☐

In a relationship

20

How can we contact your partner?

Tick the best way for us to contact your partner

Home phone	()	
Mobile phone	()	
Email		
Other		

Your partner's living situation

21

Where does your partner live?

Flat/House number

Street name

Suburb

Town/City

① INFORMATION FOR Q22:

We need to know the information in this section so we can pay them the right rate.

22

What is your partner's accommodation?

☐

House or flat

☐

A room in a boarding house

☐

Self-contained 'granny' flat

☐

Hotel or motel

☐

Self-contained unit in a retirement village or rest home

☐

Mobile home – self-contained

☐

A boat moored within New Zealand territorial waters

☐

Accommodation in a caravan park

☐

Other



If other, please provide details below

23

Does your partner live alone?

☐

No

Go to question 24

☐

Yes



What date did they start living alone?

Day

Month

Year

Go to question 25

② HOW TO ANSWER Q24:

We don't need to know the name of each person.

24

Please provide details for anyone living with your partner

Person 1

Relationship to your partner

Is this person 18 years or younger?

☐

No

Go to next person or question 25

☐

Yes



What is their date of birth?

Day

Month

Year

Does this person attend school or a tertiary institution?

☐

No

☐

Yes

Person 2

Relationship to your partner

Is this person 18 years or younger?

☐

No

Go to next person or question 25

☐

Yes



What is their date of birth?

Day

Month

Year

Does this person attend school or a tertiary institution?

☐

No

☐

Yes

① INFORMATION FOR Q24:

If you need to include more people, please write these details about each one on a separate sheet of paper, and provide it with this application form.

② HOW TO ANSWER Q25:

A visitor is someone who doesn't normally live with your partner.

25

Does your partner have visitors aged 18 or older who'll be staying with them for 13 weeks or longer?

☐

No

☐

Yes

Choosing an asset threshold

Information about choosing an asset threshold

If you're 65 years or over and have a partner (who is not in care) or dependent child, the value of your assets must be equal to or below a certain threshold.

If you and/or your partner own a house and your partner and/or a dependent child are still living there, it won't be counted as an asset.

There are two asset thresholds. You can choose which one best suits your circumstances.

Threshold A is the higher threshold and **includes** the value of your house and car.

Threshold B is a lower threshold and **does not include** the value of your house and car.

To find out the amount of each asset threshold go to our website www.workandincome.govt.nz and search on the key words *Residential Care Subsidy*.

26

Which asset threshold would you like to be assessed under?

↓ Please tick one of the boxes below

☐ Threshold A

☐ Threshold B

Home ownership details

INFORMATION FOR Q27:

A Licence to Occupy or Occupation Right Agreement outlines the conditions for occupying a residential unit within a retirement village.

27

Do you or your partner have a 'Licence to Occupy' or 'Occupation Right Agreement'?

☐ No

Go to question 28

☐ Yes

↓ If yes, what is the current surrender value?

\$

Go to question 37

ATTACHMENT FOR Q27:

You'll need to provide proof of the current surrender value. You can get this from your Village Manager.

28

Do you or your partner own your own home?

☐ No

Go to question 36

☐ Yes

↓ If yes, what is the address of the property?

Flat/House number

Street name

Suburb

Town/City

ATTACHMENT FOR Q29:
Please provide your latest QV Valuation or rates demand that shows the capital value.

29

What is the capital value of the property?

\$

ATTACHMENT FOR Q30:
Please provide proof of the mortgage and the amount still owing on it.

30

Do you have a mortgage on your home?

☐

No

☐

Yes



If yes, what amount is still owing on your home?

\$

31

Who'll be living in your home while you're in the rest home or hospital?

☐

The home will be empty

☐

My partner

☐

The home will be rented out

☐

My dependent child

☐

Someone will be living there but they won't be paying rent



Please explain why they won't be paying rent

32

Is your home currently rented out

☐

No

Go to question 38

☐

Yes

33

How much rent do you charge for your home each week.

\$

ATTACHMENT FOR Q34:
You'll need to provide proof of your home ownership costs.

34

What are your home ownership costs?

	Who do you pay?	How much do you pay?	How often do you make the payment (such as weekly, monthly or yearly)?
Mortgage 1		\$	
Mortgage 2		\$	
House insurance		\$	
Mortgage insurance		\$	
Rates		\$	
Ground lease		\$	
Water rates		\$	
Body corporate fees		\$	
Property management fees		\$	

ATTACHMENT FOR Q35:
Please provide receipts for any repair and maintenance costs.

35

Did you have to pay for repairs or maintenance to your home in the past 12 months?

☐ No ☐ Yes

→ Please write the total amount

\$

Go to question 38

ATTACHMENT FOR Q36:
Please provide a copy of the Will if the home is owned or part owned by an estate you have involvement with, for example as a beneficiary or executor.

36

Who owns the home you were living in?

☐ A landlord

☐ Other family members

☐ A trust

☐ An Estate (Please see the attachment note)

☐ A retirement village

☐ Other

↓ If other, please tell us who owns the property

37

Have you ever owned a home?

☐ No ☐ Yes

↓ If yes, when was the home sold?

Day Month Year

Tell us about your assets

HOW TO ANSWER Q38:
This includes all overseas accounts and assets.

ATTACHMENT FOR Q38:
You need to provide proof of **all** your **and** your partner's assets and their value.

38

Do you or your partner have any of the following cash assets?

Money in the bank or other savings

☐ No ☐ Yes

Term deposits, investments or shares

☐ No ☐ Yes

Bonds

☐ No ☐ Yes

Life insurance policies with a surrender or cash value

☐ No ☐ Yes

Loans made to other people (including family trusts)

☐ No ☐ Yes

Life interest in a property, family trust or estate

☐ No ☐ Yes

Other cash assets

☐ No ☐ Yes



Important: You **MUST** answer question 39 if you ticked any of the 'Yes' boxes in question 38.

ATTACHMENT FOR Q39:
You need to include proof of:

- **all bank accounts** and their full balances, including accounts and other assets held overseas
- the current interest rate % payable on all your assets.

39

If you answered 'yes' to any of the assets listed in Question 38, please write the details below.

Type of asset	You	Your partner	Jointly owned	Interest rate
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%
	\$	\$	\$	%

ATTACHMENT FOR Q40:

You'll need to provide a copy of your pre-paid funeral certificate.

40

Do you or your partner have a pre-paid funeral trust fund or account?

☐ No

Go to question 41

☐ Yes

↓ If yes, please write the details below

You

Who is it with?

When did you open it?

Day Month Year

How much was it for when you opened it?

\$

How much is it worth now?

\$

Your partner

Who is it with?

When did you open it?

Day Month Year

How much was it for when you opened it?

\$

How much is it worth now?

\$

HOW TO ANSWER Q41:

Examples of property include, land, holiday homes, bach/crib, investment properties and overseas property.

41

Do you or your partner have any of the following non-cash assets?

Property (other than your family home)

☐

No

☐

Yes

Motorhome, caravan or boat

☐

No

☐

Yes

Motor vehicle

☐

No

☐

Yes

Other

☐

No

☐

Yes



Important: You **MUST** answer question 42 if you ticked any of the 'Yes' boxes in question 41

ATTACHMENT FOR Q42:

You need to provide proof of these assets including the insured value of any motor vehicles.

42

If you answered 'yes' to any of the non-cash assets listed above, please write the details below.

Type of asset	How much is it worth?	How much do you owe on it?
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

Tell us about assets you've sold

43

HOW TO ANSWER Q43:

Please include assets sold to a trust, family members, business or charitable organisations.

INFORMATION FOR Q43:

Depending on your circumstances we may ask you for information on assets sold more than five years ago.

ATTACHMENT FOR Q43:

You'll need to provide proof of the sale of the asset, like a solicitor's settlement statement.

Have you or your partner sold any assets in the last five years?

☐ No

☐ Yes

↓ If yes, please provide details below

Asset 1

What was the asset?

How much was it sold for?

\$

Who was it sold to?

When was it sold?

Day Month Year

Asset 2

What was the asset?

How much was it sold for?

\$

Who was it sold to?

When was it sold?

Day Month Year

Tell us about assets you or your partner have gifted

INFORMATION FOR Q44:

Depending on your circumstances, we may ask you for information on assets gifted more than five years ago.

HOW TO ANSWER Q44:

Please include assets gifted to a trust, family members, business or charitable organisations.

ATTACHMENT FOR Q44:

Please provide proof of the assets you gifted. If you can't do this you'll need to talk with us.

ATTACHMENT FOR Q44:

If you have given away more assets, please write these details about each one on a separate sheet of paper.

INFORMATION FOR Q45:

A high level of care is the care provided to you that enables you to remain in the community without receiving home-based disability services. For more information go to workandincome.govt.nz and search *Recognition of Care*.

Gifted assets includes giving away, transferring, or disposing of your assets to another person or organisation.

If you or your partner (even if they have died) have given assets away they may still be counted for this assessment.

You can gift up to a certain amount for each year before you apply. To find out the amount you can gift go to our website workandincome.govt.nz and search *Residential Care Subsidy*.

44

Have you or your partner ever gifted any assets?

☐

No

☐

Yes



If yes, please provide details below

Asset 1

What was the asset?

What was the asset worth?

 \$

Who was it gifted to?

When was it gifted?

Day Month Year

Asset 2

What was the asset?

What was the asset worth?

 \$

Who was it gifted to?

When was it gifted?

Day Month Year

Asset 3

What was the asset?

What was the asset worth?

 \$

Who was it gifted to?

When was it gifted?

Day Month Year

Asset 4

What was the asset?

What was the asset worth?

 \$

Who was it gifted to?

When was it gifted?

Day Month Year

45

Have you received a high level of care from someone other than your partner or dependent child and gifted in recognition of that care?

☐

No

☐

Yes

Are you involved with a trust?

46

Are you or your partner (including any partner who has died) involved in a trust, or have you ever been involved in a trust?

The trust can be any type of trust, including a family trust.

'Involved' means one or more of the following:

- you've set up a trust, usually by making a gift of assets or property
- you've sold or gifted assets to a trust
- you make decisions about managing a trust
- you benefit from a trust; for example, by receiving income or assets from the trust or free or subsidised accommodation.

If you are a beneficiary of a trust you are entitled to ask the trust for financial support, and the Ministry of Social Development considers it reasonable for you to do so. The trust may decide to distribute assets to you, or it may decide to make regular payments. If the trust won't support you, they'll need to tell us why.

☐ No

Go to question 50

☐ Yes

↓ If yes, please write the name of the trust



Important: You **MUST** answer question 47 if you ticked 'Yes' for question 46.

INFORMATION FOR Q47:

Financial support can include getting assets, income or free or subsidised accommodation.

47

Have you or your partner received financial support from the trust in the past?

☐ No

Go to question 49

☐ Yes

Go to question 48

48

What type of financial support did you get?

☐ Regular payments (also known as Distribution of Beneficiary Income)

How much are you paid?

Last payment date?

How often, eg weekly, fortnightly, monthly, etc

\$

☐ Lump sum (also known as Distribution of Trust Assets)

How much was paid?

When was it paid?

\$

☐ Free or subsidised accommodation

INFORMATION FOR Q49:

Before we decide your application you must ask the trust for support, and you will need to give us proof of their response, like a letter from the trustees.

49

Will you or your partner get financial support from the trust?

Tick and answer all that apply.

☐ Yes, the trust will pay a lump sum of

How much?

\$

How often, eg weekly, fortnightly, monthly, etc

☐ Yes, the trust will pay regular payments of

\$

☐ No

→ If no, please tell us why the trust won't be financially supporting you

Estate information

50

Have you or your partner ever been the beneficiary of an estate?

☐

No

Go to question 58

☐

Yes

51

What is the name of the estate?

52

Have you or your partner inherited money or other assets or received financial support from the estate in the past 10 years?

☐

No

Go to question 57

☐

Yes

53

How was the amount paid to you?

☐

Lump sum

Go to question 54

☐

Regular payments

Go to question 55

54

Please tell us about the lump sum payment

How much was it?

What date was it paid?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Go to question 57

55

Have the regular payments stopped?

☐

No

Go to question 57

☐

Yes

If yes, how much did you usually get paid?

\$

How often, eg weekly, fortnightly, monthly, etc

When was the last payment?

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

56

Why have the payments stopped?



Important: Before you answer question 57, you **MUST** read the information for Q57 in the margin.

INFORMATION FOR Q52:

Financial support can include getting assets, income or free or subsidised accommodation.

ATTACHMENT FOR Q52:

You'll need to provide proof of your inheritance if it was recent and more than a modest amount. For example, a copy of the **Will and the latest estate accounts** if you get regular or ongoing payments.

ATTACHMENT FOR Q55:

You'll need to provide proof of your payments.

INFORMATION FOR Q57:

Before we decide your application **you must ask the estate for support**. You'll need to give us proof of their response, like a letter from the executor and a copy of the latest estate accounts.

57

Will you or your partner get financial support from the estate?

Tick and answer all that apply.

☐

Yes, the estate will pay a lump sum of

How much?

\$

How often, eg weekly, fortnightly, monthly, etc

☐

Yes, the estate will pay regular payments of

\$

☐

No



If no, please tell us why the estate won't be financially supporting you

Outstanding debts

58

ATTACHMENT FOR Q58:

You'll need to provide proof of those debts if they are more than \$500.

What outstanding debts do you have?

Type of debt

Money owing

	\$
	\$
	\$
	\$

Tell us if you're involved in a business

ATTACHMENT FOR Q59:

You must provide the latest complete set of business accounts for each business.

59

Have you or your partner had any assets or financial involvement in any business in the past 10 years?

☐

No

Go to question 63

☐

Yes

INFORMATION FOR Q59:

If you're involved in more than one business please provide all this information for the other business on a separate sheet of paper.

60

What is the name of the business?

61

How are/were you involved in the business? Please tick all that apply

☐

Director

☐

Shareholder

☐

Employee

☐

Other



If other, please describe below

62

Are you still involved in the business?

☐

No



What date did your involvement end?

Day

Month

Year

☐

Yes

Tell us about your income

Tell us about income in the last 52 weeks?

63

Did you or your partner get income from any of the following sources in the last 52 weeks?

Interest from savings, investments, or bonds	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Dividends from shares, unit trusts, or managed funds	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Overseas pension, benefit or allowance payments	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Other superannuation or retirement scheme income (government or private)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Income from rents	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Child Support payments (private arrangement or through Inland Revenue)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Wages or salary	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Farm or business income	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Payments from self employment or contract work	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Accident compensation (eg ACC)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Income from relatives	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Payments from a former partner	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Income insurance (replacement/protection)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Income from Māori Land	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Other	<input type="checkbox"/> No	<input type="checkbox"/> Yes



Important: You **MUST** answer question 64 if you ticked any of the 'Yes' boxes in question 63.

64

Did you answer 'yes' or to any of the sources of income listed in question 63?

<input type="checkbox"/> No	<input type="checkbox"/> Yes	↓ If yes, tell us the total before-tax amounts, for the last 52 weeks
-----------------------------	------------------------------	--

Where did the income come from?	Payment made to?		How often?
	You	Your partner	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	

65

Do you or your partner expect to get the same or similar income from all these places in the next 52 weeks?

<input type="checkbox"/> No	↓ If no, what will be changing or different?	<input type="checkbox"/> Yes
-----------------------------	---	------------------------------

HOW TO ANSWER Q63:
Don't include payments from Work and Income like, NZ Super or benefits.

ATTACHMENT FOR Q64:
You need to provide proof of all income.

Residential Care Loan application



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If you need to be in a rest home or private hospital indefinitely and still have your own home, you may need time to adjust to your changed circumstances. This may include selling your home. Often this means there are limited funds to pay for your residential care fees.

We may be able to help with an interest-free Loan to pay your fees. It's a legal agreement with the Crown and is secured by placing a caveat over your home.

The Loan is usually repaid when your home is sold or you die – whichever happens first.

There's much more information on our website workandincome.govt.nz – search *Residential Care Loan*. We recommend that you read the information and call us on **0800 999 727** if you want to know more.

Do you need to apply?

1

Do you need to apply for a Residential Care Loan?

☐ No

Go to page 20

☐ Yes

You must complete pages 5 to 18 of this form

Mailing details

2

If a loan is approved, what address would you like your loan balance statements sent to?

3

Do you have a partner?

☐ No

Go to question 5

☐ Yes

4

Is the loan application for both you and your partner?

☐ No☐ Yes

Legal details

5

Who will legally act for you?

Solicitor's name

Solicitor's address

Solicitor's contact details

Phone	()
Mobile phone	()
Email	

6

What property will secure the loan?

Address of property

Residential Care Subsidy

Helper, Agent or Power of Attorney form



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We need to know if someone has helped you complete this form. We also need to know if you have, or want to have, an agent or Power of Attorney to represent you or help you deal with us in future. If so, you'll need to confirm their details for us on this form.

Protecting your privacy is important and we must have your written permission for other people to do things with us on your behalf, such as making enquiries or filling in forms for you. By answering the following questions, we'll have a clear understanding of what other people can or can't do for you if they contact us.

1 Helper, Agent or Power of Attorney's details

INFORMATION FOR Q1:

An agent is a person or organisation you've asked to act on your behalf when dealing with the Ministry of Social Development.

ATTACHMENT FOR Q1:

You must provide the Power of Attorney for Property or Court ordered Property Manager.

Do you have someone helping you complete this form?

☐

No

Go to page 22

☐

Yes

↓ If yes, what type of representative are they?

☐

An agent I have already set up with the Ministry of Social Development

☐

Enduring Power of Attorney for Property

☐

Power of Attorney for Property

☐

Court appointed Property Manager

☐

Helper

2 Who is your representative?

☐

A person

Go to question 3

☐

An organisation

Go to question 7

3 What are your representative's details?

First and middle names

Surname or family name

What is their relationship to you?

When were they born?

Day Month Year

4

What is your representative's address?

Flat/House number

Street name

Suburb

Town/City

5

Is your representative's mailing address different from where they live?

☐

No

☐

Yes



If yes, tell us your representative's mailing address

② HOW TO ANSWER Q6:

Please only give us contact details your representative would like us to use.

6

How else can we contact your representative?

Tick the best way for us to contact your representative

Home phone	()	
Mobile phone	()	
Other phone	()	
Email		

① INFORMATION FOR Q7:

We'll check our record of your organisation's details is up-to-date.

7

What are the organisation's details?

Name of organisation	
Address of organisation	
Contact person's name	
Contact person's phone	
Email address	

Appointment of an agent form



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You can apply for another person or organisation to officially act on your behalf for specific services and functions with the Ministry of Social Development.

You can choose your agent and decide what they can or can't do. They can be a person or an organisation. However, whoever you choose must agree to act on your behalf.

You can change or stop your arrangement with your agent at any time by contacting us. You should also let your agent know that you no longer want them to act for you.

We have more information on our website about appointing an agent. Go to workandincome.govt.nz and search on *Agent*.

Tell us if you're appointing an agent

1

Do you want to appoint a person or organisation to officially act for you with the Ministry of Social Development?

☐

I already have one set up

[Go to the Declaration and Signature on page 25](#)

☐

No

[Go to the Declaration and Signature on page 25](#)

☐

Yes

2

Who do you want to appoint as your agent?

☐

A person

[Go to question 3](#)

☐

An organisation

[Go to question 7](#)

3

What are your agent's details?

First and middle names

Surname or family name

What is their relationship to you?

When were they born?
Day Month Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

4

What is your agent's address?

Flat/House number Street name

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Suburb

Town/City

<input type="text"/>	<input type="text"/>
----------------------	----------------------

5

Is your agent's mailing address different from where they live?

☐

No

☐

Yes



[If yes, tell us your agent's mailing address](#)

<input type="text"/>
<input type="text"/>



ATTACHMENT FOR Q3:

Please provide proof of your agent's identity. What you need is explained on page 27.

HOW TO ANSWER Q6:

Please only give us contact details your agent would like us to use.

6**How else can we contact your agent?**

Tick the best way for us to contact your representative

Home phone	()	
Mobile phone	()	
Other phone	()	
Email		

INFORMATION FOR Q7:

We'll check our record of your organisation's details is up-to-date.

7**What are the organisation's details?**

Name of organisation	
Contact person's name	
Address	
Phone number	()
Email	

Tell us how long you want an agent for**8****How long do you want to have this agent for?**

☐ No end date – this person will be your agent until you tell us.

☐ Until

Day	Month	Year

Tell us what you want your agent to be able to do**9****What rights and responsibilities do you want to give your agent?**
(Please tick the boxes that apply)

- ☐ Access to my files or personal information about me.
- ☐ Give information about me to the Ministry of Social Development, such as income details, housing need or changes in my circumstances.
- ☐ Change details in my personal file with the Ministry of Social Development.
- ☐ Receive all my mail from the Ministry of Social Development.
- ☐ Complete and sign forms on my behalf.
- ☐ Be allowed to deal with money I owe the Ministry of Social Development, which may include arranging repayments.
- ☐ Have authority over my affairs with the Ministry of Social Development, as granted by a current Power of Attorney.
- ☐ Speak or make enquiries on my behalf.
- ☐ Speak to social housing providers about a potential property match or offer.

Paying your benefit or pension to an agent

If you want your agent to get paid part or all of your benefit or pension payments you'll need to complete a redirection of benefit payment form.

INFORMATION FOR Q9:

You can give your agent as many or as few rights and responsibilities as you want. For example, "my agent can only speak or make enquiries about my Residential Care Subsidy".

ATTACHMENT FOR Q9:

Please provide the Power of Attorney if you have one.

10**Is there anything else you want your agent to do?**

☐ No ☐ Yes **↓ If yes, please tell us below**

11

Is there anything you don't want your agent to do?

☐

No

☐

Yes



If yes, please tell us below

12

Did you fill in this form yourself

☐

No

Go to question 13

☐

Yes

Make sure your agent signs this page at the bottom, then go to the Client's Declaration on page 25

Client unable to sign this form

13

Why are you completing this form for your client?

If the client is unable to sign this form, and the form is being completed on their behalf by a person wishing to be appointed their agent, please tick the reason for this.

☐

I have authority over this client's affairs, as covered by the attached valid Enduring Power of Attorney or Court Order made under the Protection of Personal and Property Rights Act 1988.

☐

This client is temporarily unable to do things for themselves, and I wish to be appointed their agent for a short period of time to enable the Ministry of Social Development to meet the client's immediate needs.

14

What is your relationship to this client?

ATTACHMENT FOR Q13:

Attach a copy of either the Enduring Power of Attorney or Court Order.

Attach evidence from a registered medical practitioner. This needs to state the reason why the client can't act for themselves and how long it is likely to last.

HOW TO ANSWER Q14:

Please tell us what your relationship is with the client, for example, partner, friend, family member or support person.

Agent's declaration and signature

Agents must read and sign this section.**By signing this form you, or the organisation you represent:**

- agree to act as agent for the person named in this application
- understand the responsibilities the person has given
- will always act in the person's best interests
- agree to receive emails from the Ministry of Social Development about the person
- will let the Ministry of Social Development know if your address or contact details change
- can't access the person's MyMSD account (if they have one)
- have read and understand the Privacy Statement on page two of this form
- understand the person still has full responsibility for all matters with the Ministry of Social Development
- can stop being this person's agent, but must let the client and the Ministry of Social Development know.

The information I have provided is true and complete.

Agent's name (print)

Agent's signature

Day

Month

Year

**Important: Please make sure the application is signed on page 25.**

Declaration and Signature



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Applicant's or agent's declaration and signature

Let us know when things change

You need to let us know about changes that might affect the amount you're paid, or your Residential Care Subsidy or Loan, like:

- changes to your income or assets
- changes to information about you, like your address, contact details or bank account number
- you go into or come out of hospital
- starting or ending a relationship, marriage or civil union
- if a partner passes away
- you travel overseas.

If we have the wrong information we could pay you or the Residential Care Subsidy or Loan at the wrong amount. If we pay you too much you might have to pay us back.

Sharing your information

We explain how we protect your privacy in our Privacy statement on page two of this form.

If you get a Residential Care Subsidy, the Ministry of Social Development and Ministry of Health need to:

- share information necessary to pay and administer your Residential Care Subsidy or Loan
- provide information to your residential care provider about how your application is going, the outcome and the timing and amount of any payments we make.

By signing this form

I understand the things I need to do to get a Residential Care Subsidy or Loan. The information I have provided is true and complete.

Applicant's/Agent's name (print)

Applicant's/Agent's signature

Day Month Year

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Partner's/Partner's Agent's name (print)

Partner's/Partner's Agent's signature

Day Month Year


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Checklist



**MINISTRY OF SOCIAL
DEVELOPMENT**

TE MANATŪ WHAKAHIATO ORA

Use this page to check you've done everything you need to and have gathered all the documents we need. Attachment notes  in the margins of the form also show if you need to provide some documents.

Talk with us if you don't have any of the documents, have given them to us recently or if there might be a delay in getting them. You can call us on **0800 999 727**.

What you may need to provide

Documents you may need to give us	For you	For your partner (if you have one)
Home ownership documents		
Mortgage documents, showing:	<input type="checkbox"/>	<input type="checkbox"/>
• the amount still owing	<input type="checkbox"/>	<input type="checkbox"/>
• how much your repayments are and how often	<input type="checkbox"/>	<input type="checkbox"/>
Other accommodation costs including:	<input type="checkbox"/>	<input type="checkbox"/>
• house and mortgage insurance	<input type="checkbox"/>	<input type="checkbox"/>
• rates – showing the capital value or your QV valuation	<input type="checkbox"/>	<input type="checkbox"/>
• lease	<input type="checkbox"/>	<input type="checkbox"/>
• body corporate and proper management fees	<input type="checkbox"/>	<input type="checkbox"/>
• repair and maintenance costs	<input type="checkbox"/>	<input type="checkbox"/>
Confirmation of the current surrender value of your Licence to Occupy or Occupation Right Agreement	<input type="checkbox"/>	<input type="checkbox"/>
Copy of the Will if your home is owned or part owned by an Estate	<input type="checkbox"/>	<input type="checkbox"/>
A		
Bank statements or printouts showing balances and transactions for the last three months, for every account you hold , including overseas accounts	<input type="checkbox"/>	<input type="checkbox"/>
Proof of all your other assets and income, including the interest rates on your accounts and investments	<input type="checkbox"/>	<input type="checkbox"/>
Pre-paid funeral account or trust fund certificate	<input type="checkbox"/>	<input type="checkbox"/>
Value of other property you own, including land, holiday homes, investment properties, motor vehicles, caravans, boats	<input type="checkbox"/>	<input type="checkbox"/>
Proof of sale for assets you've sold, gifted or transferred – including to any trust or family members	<input type="checkbox"/>	<input type="checkbox"/>
Trusts and estates		
Trust documents, if you're involved in a trust (for example, trust deed, deed of debt, deed of gift, gift statements, accounts)	<input type="checkbox"/>	<input type="checkbox"/>
Proof of any inheritance, for example a Will or the latest estate accounts if you get regular payments	<input type="checkbox"/>	<input type="checkbox"/>
Income and debts		
Proof of all types of income you get	<input type="checkbox"/>	<input type="checkbox"/>
The complete set of the most recent business accounts for any business you are, or have been involved with in the past 10 years	<input type="checkbox"/>	<input type="checkbox"/>
Proof of any debts that are more than \$500	<input type="checkbox"/>	<input type="checkbox"/>

If someone acts on your behalf

If you already have a Power of Attorney or someone who acts on your behalf, you'll need to provide your:

	For you	For your Agent
Enduring Power of Attorney for Property	<input type="checkbox"/>	
Power of Attorney	<input type="checkbox"/>	
Court Order if the court has appointed a representative	<input type="checkbox"/>	

If you want to set up an agent with us

Complete the appointment of agent form	<input type="checkbox"/>
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If your agent is a person they need to provide:

Two original documents that prove who they are, such as a driver licence, passport or birth certificate.

Agents must bring their original documents to one of our offices to be scanned and given back straight away. Do not send them to us.

☐

If your agent is an organisation, they need to provide a:

Business card, or	<input type="checkbox"/>
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Letter on official letterhead – needs to be an original	<input type="checkbox"/>
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Have you done everything?

Last check

	For you
Have you answered all the questions you need to?	<input type="checkbox"/>
Have you signed your application on page 25?	<input type="checkbox"/>
Please initial any changes you've made in the form	<input type="checkbox"/>
Has the Needs Assessment Certificate been completed?	<input type="checkbox"/>
Have you gathered all the other documents you need to provide?	<input type="checkbox"/>

Sample Only

Extracts from Work and Income webpage

Residential Care Subsidy

If you need long-term residential care in a hospital or rest home, you may be able to get a Residential Care Subsidy from Health New Zealand - Te Whatu Ora.

Information

This subsidy helps with the cost of care. It's paid directly to the hospital or rest home by Health New Zealand - Te Whatu Ora.

Who can get it

You may be able to get a Residential Care Subsidy if you:

- are aged either:
 - 65 or older
 - 50-64 and single with no dependent children
- are assessed as needing long-term residential care in a hospital or rest home
- need this care for an indefinite length of time
- are receiving contracted care services.

It may also depend on:

- any money or assets you and your partner (if you have one) have
- how much you and your partner (if you have one) earn.

Asset limits

If you're 50-64 and single with no dependent children, you'll automatically meet the asset test.

If you're 65 or older, your and your partner's (if you have one) total assets must be \$284,636 or less. If you have a partner who's not in long-term residential care, you can choose whether the total value of your combined assets is either:

- \$155,873 or less, if you don't want to include the value of your house and car (your house isn't counted as an asset if it's the main place where your partner or dependent child lives), or

- \$284,636 or less, if you do want to include the value of your house and car.

Income limits

We'll check to make sure your income is below the required limits. How we work this out is different for each type of income.

When you don't qualify

You won't qualify for Residential Care Subsidy if you're under 50 and single.

You'll need to contact Health New Zealand - Te Whatu Ora for assistance.

Application process

Step 1 – Book a needs assessment

Book an appointment with a Needs Assessment Service Coordination (NASC) agency funded by Health New Zealand - Te Whatu Ora. You can do this by visiting the [NASCA website](#) to find your local NASC.

They will:

- check you meet Health New Zealand - Te Whatu Ora's criteria
- determine what level of care you need
- complete a Needs Assessment Certificate.

If you're under 65 and have a partner, this is all you need to do, as we won't look at your assets or income. A Needs Assessment Certificate will be sent to Health New Zealand - Te Whatu Ora, who will organise payment for your care.

Complete a financial means assessment form

If we need to assess your assets or income, you will be given a 'Residential Care Subsidy application for Financial Means Assessment' form at your appointment.

You need to:

- fill out the form
- gather your supporting documents (these are listed on the form)
- return the form and your supporting documents to us as soon as you can. [Call us](#) to talk about the best way to do this.
 - if you're 65 or over, you'll need to return them within 90 days of the date you want the subsidy to start.

Step 2 – We'll check what assets you have

We'll check to make sure your assets are below the required limits. This is the first part of what we call a 'Financial means assessment'.

What's included as an asset

Assets may include but are not limited to:

- cash or savings
- bonus bonds
- investments or shares
- life insurance policies with a surrender or cash asset value
- loans made to other people (including family trusts)
- boats, caravans and campervans
- investment properties
- an apartment or property you own through a:
 - license to occupy (LTO)
 - occupational right agreement
- refundable accommodation deposits or bonds.

Family home and personal vehicle

Your family home and personal vehicle are included as assets if either:

- you don't have a partner
- both you and your partner are in long-term residential care, or
- your partner is not in long-term residential care but you have chosen to have your assets assessed against the \$284,636 asset threshold.

What's not included as an asset

Assets that aren't included are:

- pre-paid funeral expenses for you and your partner of up to \$10,000 each, if they're held in a recognised funeral plan
- personal belongings such as clothing and jewellery
- household furniture and effects.

Assets are above the limit

If you're 65 or over and your assets are above the threshold because you own your own home, you may be able to get a Residential Care Loan. This will help with the cost of your care. Details are at the end of this advice.

Step 3 – We'll check what assets you've gifted or sold

If you or your partner have gifted assets, there's a certain portion that won't be included as an asset. The amount depends if you've gifted the assets:

- in the last 5 years (from when you apply for the subsidy), or
- longer than 5 years ago (from when you apply for the subsidy).

If you sold an asset in the last five years we will check that it was sold for fair value. We might ask you some more questions if you sold an asset for less than fair value or if you sold it in exchange for a debt.

Gifted assets in the last 5 years

We won't count up to \$8,000 of assets you've gifted each year in the last 5 years (from when you apply for the subsidy). This is a total of \$40,000 of any assets you and your partner (even if they've died) have gifted in the last 5 years.

If your partner applies at the same time, this amount will double to \$80,000 (but we won't count \$40,000 each if you apply at different times).

This amount includes any assets you've gifted to someone in recognition of care. If your partner applies, it will not double if you've gifted assets to someone in recognition of care.

Gifted assets in recognition of care

We may not count assets you've gifted to someone who's provided you with a high level of care if you've:

- received care for at least 12 continuous months in the last 5 years
- gifted these assets to the carer in the last 12 months (from when you apply for the subsidy)
- lived in the same home as the person providing the care
- not received any funding for home-based disability support from the Ministry of Health, e.g., Home Support, meals on wheels
- been able to stay in your home because you received care which meant you didn't need to get this payment.

Also:

- the person providing the care cannot be your partner or dependent child
- the type of care needs to be necessary to help you around the home, e.g., help with bathing or toileting.

Your gifts in recognition of care cannot be more than \$40,000, when combined with other allowable gifting in the last 5 years (from when you apply for the subsidy).

Gifted assets longer than 5 years ago

We won't count up to \$27,000 a year of any assets you've gifted longer than 5 years ago (from when you apply for the subsidy). \$27,000 is the total amount between you and your partner (even if they've died).

Sold assets in exchange for a debt

We won't count assets that you have sold in your means assessment. This is because you no longer own the asset.

However, if you sold your assets in exchange for a debt then the outstanding debt that is owed to you will be considered an asset.

Step 4 – We'll check your income

If your assets are below the required asset limits, the next thing we'll do is complete an income assessment. This is the last part of the financial means assessment.

Income limits

We'll check to make sure your income is below the required limits. How we work this out is different for each type of income.

What's included as income

- NZ Super, Veteran's Pension or any other benefit.
- 50% of private superannuation payments.
- 50% of life insurance annuities.
- Overseas Government pensions.
- Contributions from relatives.
- Earnings from interest and bank accounts.
- Investments, business or employment.
- Income or payments from a trust or estate.

We'll need more information if you or your partner have ever:

- transferred assets to a trust
- been the settlor, trustee or beneficiary of a trust or estate.

What's not included as income

- Any money your partner has earned through work.
- Income from assets when the income is under:
 - \$1,236 a year for single people
 - \$2,472 a year for a couple when both have been assessed as needing care
 - \$3,707 a year for a couple where one partner has been assessed as needing care.
- A War Disablement Pension from New Zealand or any other Commonwealth country.

Step 5 – We'll work out when the subsidy is paid from

You may qualify for the Residential Care Subsidy earlier than when you applied, which means it may be paid from an earlier date.

50-64 years old

If you're 50-64 and single with no dependent children, it can be paid from either:

- the date you were assessed as needing care, or
- the date you entered care.

It will be paid from whichever date is later.

65 or older

If you're 65 or older, it can be paid from up to 90 days before we got your application. It depends on when you qualified from.

For example, if we received your application on 1 May but you qualified for the subsidy earlier than this, it can be paid from when you qualified (but only as far back as 1 February).

Step 6 – We'll advise the outcome

We'll let these people know the outcome of your financial means assessment:

- you
- Health New Zealand - Te Whatu Ora, and
- your rest home or hospital.

Step 7 – The subsidy is paid

How the subsidy is paid

The Residential Care Subsidy is paid directly to the rest home or hospital by Health New Zealand - Te Whatu Ora.

How much the subsidy is

1. We'll work out how much you should contribute to your care, based on your income assessment (generally we calculate this using your annual income at the time you applied).
2. Health New Zealand - Te Whatu Ora will look at how much your care costs.
3. The amount of the subsidy is the difference between these 2 amounts.

For example:

1. We've worked out that you should contribute \$300 a week to your care.
2. Health New Zealand - Te Whatu Ora has confirmed that your care costs \$900 a week.
3. Your subsidy will be \$600 a week.

What's included in cost of care

Some things are not included in the cost of your care, for example a Premium Room Charge because you pay for it privately.

If you don't know what's included in the cost of your care, you should talk with your rest home or hospital.

Other help you or your partner can get

Getting a benefit, NZ Super or Veterans Pension

If you get NZ Super, Veteran's Pension or any other benefit, most of this will go towards your care.

- You'll keep a personal allowance of \$56.58 a week.
- You'll also receive a clothing allowance of \$354.89 a year.

You must continue to pay for your care until your application for Residential Care Subsidy has been approved.

If you have a partner living at home

Your partner may:

- be able to get the Special Disability Allowance of \$50.11 a week to help with extra costs
- get an increase in their payment, if they get a benefit
- qualify for a single rate of payment, if they get a NZ Super or Veteran's Pension
- qualify for other payments after you go into care, if they aren't getting any payments from us.

Contact the Ministry

If you have any questions, contact the Residential Subsidy Unit by:

- calling [0800 999 727](tel:0800999727)
- email msd_rcs@msd.govt.nz

Separate webpage for Residential Care Loan:

Residential Care Loan

If you're going into residential care and want to keep your home for a while, you may not be able to pay for the cost of your care. You may be able to get a Residential Care Loan to help pay for this.

Information

We look at each loan application on a case-by-case basis. There is no obligation to approve a loan.

Before you apply for a Residential Care Loan, check if you qualify for a Residential Care Subsidy. This is a subsidy that will help pay for your care and you don't have to pay it back.

What is a Residential Care Loan

A Residential Care Loan is an agreement with the Crown to provide a loan for the cost of your care. It's secured by placing a caveat over your home. It's an interest-free loan paid directly to the rest home. It's usually repaid when you pass away or your home's sold, whichever happens first.

The Ministry of Health pays for the loan. We do things like:

- prepare loan agreements and other documents
- a financial means assessment
- handle settlements.

Who can get it

You may be able to get a Residential Care Loan if:

- you still own the home you lived in before going into residential care
- your home is worth more than \$284,636 in assets (if it's less, you may qualify for a Residential Care Subsidy)
- the total of any other assets you own is less than \$15,000 if you're single, or \$30,000 if you have a partner.

To approve your application, we'll also check that:

- it fits within the loan scheme
- we can secure the loan with a caveat over your home
- you'll be able to repay the loan and meet your obligations under the loan agreement.

How much you can get

If you get a Residential Care Loan, it will be paid directly to the rest home to help pay for your care.

How much you can get depends on the rest home fees and where you live. We call this the 'maximum contribution'.

The loan amount covers the 'maximum contribution' minus 'your contribution'.

Your contribution and personal allowance

If you get a benefit or pension, most of it will also go to the rest home.

This is your contribution. If you're getting NZ Super, the current contribution rate is \$440.42 per week.

You'll keep \$56.58 a week (after tax on an M tax code). This is called a personal allowance.

Example

If you live in Auckland City and the rest home fee is \$1,511.09 a week, the maximum loan you can get is:

$\$1,511.09 - \440.42 (rest home fee minus your contribution) = \$1,070.67

How to apply

Step 1 - Contact a Needs Assessor

You need to get in touch with a Needs Assessor in your area. They will:

- assess your residential care needs and
- give you a 'Residential Care Subsidy Application' form.

For contact details of a Needs Assessor in your area, call the health Seniorline on [0800 725 463](tel:0800725463).

Step 2 - Fill out an application form

The 'Residential Care Loan' application is also in the form the Needs Assessor gives you. You need to complete the entire form.

What happens next

First, we'll check your assets to see how much they're worth. If they're worth less than \$284,636, you may qualify for a Residential Care Subsidy instead of a loan.

It can take 6-8 weeks to process your application. You may need to pay for the full cost of your residential care while we process it. It's best to talk with your care provider about this.

You need to pay for any costs that come with the loan application, eg, registration of the caveat. These costs are not covered by the loan.

If we approve your loan

We'll send a loan agreement to your solicitor. You, or your power of attorney, need to sign the agreement and send it back to us. You also need to send us confirmation that:

- the rates for your home are paid up to date
- your home is insured.

Then we'll register a caveat over your home. This will remain in place until the loan is repaid.

Payments

The Ministry of Health will pay the loan directly to the rest home. They will start the payments when all documentation is complete.

Transfer to Residential Care Subsidy

One of the criteria to get a Residential Care Loan is if your home and other assets are worth more than \$284,636.

Once your loan balance reduces your assets to less than \$284,636, you may qualify for a Residential Care Subsidy instead.

How to transfer to a Residential Care Subsidy

The Ministry of Health will send you loan statements every 4 months. They'll let you know when you may be able to get a Residential Care Subsidy.

You'll need to fill out a 'Financial means assessment' form so your assets can be reviewed. To get one of these forms, contact our Residential Subsidy Unit on [0800 999 727](tel:0800999727).

If a Residential Care Subsidy is approved

If a Residential Care Subsidy is approved, the Residential Care Loan will stop. We'll let you know the outstanding balance.

Repayment of the loan

The loan needs to be repaid when your home's sold or within 12 months of the date you pass away, whichever happens first.

If there's a late repayment, interest may be charged at 10% a year, calculated on a daily basis.

Selling your home

Once your home's sold, we'll confirm the amount that needs to be repaid. It could be less than what we told you to start with. This is because we will deduct certain fees for example:

- real estate agency fees
- solicitor fees
- protected equity
- funeral allowance.

Can't repay within 12 months

There may be some situations where you can't repay the loan within 12 months. In these cases you may be able to defer the loan instead.