

Services available at care businesses or facilities		事業所・施設で受けられるサービス
Day trip service 日帰りサービス	Commuting care (day service) 通所介護(デイサービス)	Help with exercise of mental and physical faculties, and support for things like meals and bathing are offered 食事や入浴などの支援や機能訓練などを日帰りで提供する
Over-night stay service 宿泊サービス	Short term admittance/Daily life care (Short stay) 短期入所/生活介護(ショートステイ)	Short term admittance to a nursing facility to receive assistance with matters such as meals or bathing, or exercising physical and mental abilities 施設などに短期間宿泊して食事や入浴などの支援や機能訓練などを行う
	Homes for elderly persons requiring special care 特別養護老人ホーム	Care for those with habitual need, for things such as meals, bathing, and using the restroom is offered 常に介護が必要な方に、食事、入浴、排せつなどの介護を提供する
	Daily life care provided in specified nursing facilities	Admittance into places like fee-charging elderly person homes that provide care and support for everyday life

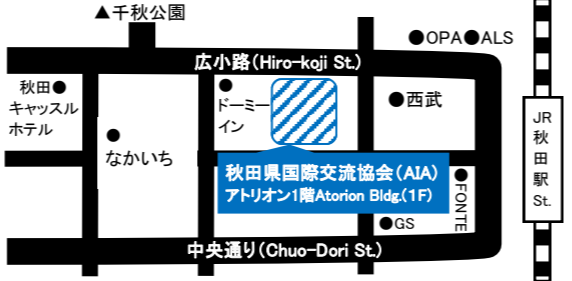
Services provided in one's one home		自宅で受けられるサービス
Visiting caretakers 訪問介護	A helper provides care relating to matters such as bathing, using the restroom, taking meals, and other household chores such as cooking, cleaning, and laundry ホームヘルパーが入浴、排せつ、食事などの介護や調理、洗濯、掃除等の家事を行う	
Visiting nurses 訪問看護	A nurse, in accordance to a physician's instructions, checks one's health and provides medical care. 看護師が医師の指示のもとで、健康チェック、療養上の世話などを行う	
Lending of social welfare equipment 福祉用具貸与	Rental service for social welfare equipment such as wheelchairs and beds 福祉用具(車いす、ベットなど)のレンタルサービス	

Nursing care in a small-scale multi-functional facility 小規模多機能型居宅介護	Combining regular visits to a nursing care facility, short-term stays, and visits to one's one home, in order to provide needed daily life support and help with exercise of mental and physical abilities 施設への通所、短期の宿泊、自宅への訪問を組み合わせて日常生活上の支援や機能訓練を行う
Periodic visits・On call visits from nurses 定期巡回・随時対応型訪問介護看護	24 hour, 365 day a year services such as regularly scheduled periodic visits or on call dispatches are offered as needed 定期的な巡回や随時通報への対応など、24時間365日必要なサービスを提供する

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I'll introduce information for international residents regarding the Long-Term Care Insurance System.
外国人の方へ介護保険制度について紹介します。

This is important, useful information that you should know for when you or a family member want or need long-term care.

家族の介護が必要になったときや自分が介護サービスを受けたいときに知っておくと役に立つ情報です。



What is Long-Term Care Insurance? 介護保険とは

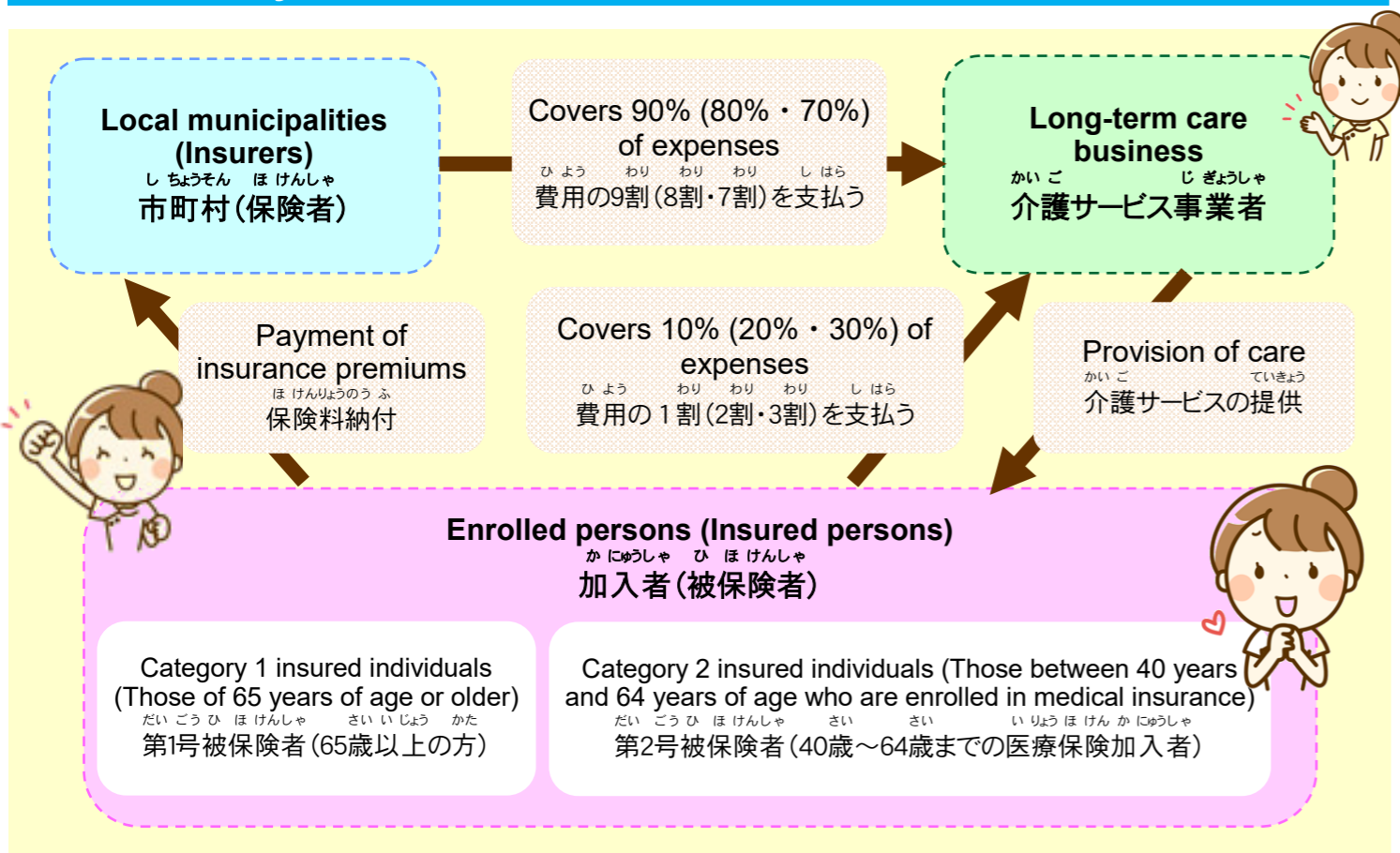
- This is a system where everyone in society contributes in order to lighten the burden on families with individuals who require care.
- Those enrolled will jointly contribute insurance costs, and when someone is recognized as requiring care, the contributed money will be used to cover the expenses of said care.
- In the case of international residents, those 40 years of age or older who have been living in Japan for more than 3 months will become eligible members and can receive care through this system.
- Those between 40 years and 64 years of age may only receive benefits if afflicted by certain diseases.
- Please ask your local municipal Long-Term Care Insurance Division for details.

- 介護を必要とする家族の負担を軽減し、介護を社会全体で支えるための制度です。
- 加入者が保険料を出し合い、介護が必要ときに認定を受けて、必要な介護サービスを利用できます。
- 外国人の場合、日本に3か月を超えて滞在する40歳以上の方は、介護保険の被保険者となり、介護サービスを受けることができます。
- 40歳～64歳までの方が受給する場合は特定疾病に限定されています。
- 詳しいことは市町村の介護保険担当課に聞いてください。



Structure of the Long-Term Care Insurance System

介護保険制度のしくみ



Procedures necessary to use the long-term care service

介護サービスを利用するための手続き

1. Application

Consult with your local municipality, and fill out the necessary paperwork to be recognized as requiring care.

2. Screening

- An examiner will visit the home of the individual seeking care, and gather information regarding matters such as the condition of their mind and body, and their current lifestyle situation.
- The municipality will collect a written opinion from the physician of the individual seeking care.
- Depending on the level of care needed, a Care Level of 1-5, or Support Level of 1 or 2 will be assigned.

3. Recognition of being in need of long-term care

As a general rule, the municipality will communicate the results of the screening within 30 days after the application.

1. 申請

市町村の窓口で相談し、要介護認定の申請手続きをする。

2. 認定審査

- 調査員が自宅を訪問して、介護を受ける人の心身の状況や日常生活状況等について聞き取る。
- 市町村は介護を受ける人の主治医に意見書を書いてもらう。
- 介護の必要な程度によって、要介護1～5または要支援1か2が決定される。

3. 要介護認定

申請から原則として30日以内に市町村から認定結果が通知される。



4. Creation of a care plan

- In consideration of factors including the requests of the person desiring care and their lifestyle conditions, the requests of their family, and the upper limit of what services are available to be used, a care plan will be created. This care plan will describe specifics such as what services and care will be provided, as well as when the care will be provided and for how long.
- In the case of a Care Level of 1-5, and if long-term care is to take place at the home of the person requiring care, a request will be sent to a care manager at an in-home care management office, and they will create a care plan.
- In the case of a Care Level of 1-5, and if there is a desire to be admitted into a nursing home, then an application must be made directly to the desired facility by the applicant.
- In the case of a Support Level of 1 or 2, a worker at a comprehensive community support center will create a preventative health plan in the interest of eliminating the need for long-term care in the future.
- Creation of a care plan is free of charge.

5. Use of the service

After showing the Long-Term Care Insurance Card and Long-Term Care Insurance Burden Rate Card to the individual from the service company, care, at one's residence or at a care home or facility, may be used as described in the care plan.

6. Payment for the nursing care

As described in the care plan, the person benefitting from the care will pay 10% (20%・30%) of the cost.

4. 介護サービス計画の作成

- 介護サービス計画(ケアプラン)は、「何を」目的として、「どのサービス」「どのくらい」使うのかを、本人や家族の要望、生活の状況、利用できるサービスの上限を考慮して作成する。
- 要介護1～5と認定され、在宅で介護サービスを利用する場合、居宅介護支援事業者の介護支援専門員(ケアマネージャー)に依頼して介護サービス計画(ケアプラン)を作ってもらおう。
- 要介護1～5と認定され、施設へ入所を希望する場合は、希望する施設に直接申込む。
- 要支援1か2と認定された場合は、地域包括支援センターの職員が介護予防サービス計画(介護予防ケアプラン)を作成してくれる。
- ケアプラン作成は無料。



5. サービスの利用

サービス事業者に「介護保険被保険者証」と「介護保険負担割合証」を提示して、ケアプランに基づいた居宅サービスや施設サービスを利用する。

6. 介護サービスの費用

ケアプランに基づいた利用者は、サービス費用の1割(2割・3割)を負担する。



Akita Prefecture Home Care Support companies list (Japanese only) https://www.pref.akita.lg.jp/pages/archive/34310	あきたけんない きょたくかいご しえん 秋田県内の居宅介護支援事業者の一覧
Akita Prefecture Comprehensive Community Support Center list (Japanese only) https://www.pref.akita.lg.jp/pages/archive/2202	あきたけんない ちいきほうかつしえん 秋田県内の地域包括支援センターの一覧