

Funding and Service Agreement¹**District Elderly Community Centre (DECC)
cum Day Care Unit (DCU)****I Service Definition****Introduction**

District Elderly Community Centre (DECC) is a type of community support services at the district level providing a full range of support services to healthy, vulnerable and frail elderly persons living in the community and family carers. Priority should be given to vulnerable and frail elderly persons, including those with dementia who may need support services to continue to stay in their own homes and communities. The DECC should aim at early identification of service needs of individual elderly persons whom they come across through daily activities, programmes, and drop-in service, and provide appropriate services and/or referrals. Also, the DECC should also perform the functions of support team for the elderly (STE). To enrich the function of DECC to serve frail elderly persons and their carers in the community, Day Care Unit (DCU) is set up and attached to DECC. With a pool of experienced and professionally trained staff and various networks, DECC will provide a wide range of direct services to elderly persons living in the community and family carers, as well as collaboration with and support to elderly services in the district.

Purposes and objectives

2. The ultimate goals of DECC are to enable elderly persons to remain in the community, to lead a healthy, respectful and dignified life, to enhance their positive and contributing role and to involve the public to build up a caring community.
3. The objectives of STE are to provide social networking and outreaching services to vulnerable elderly persons, and to promote senior volunteerism.
4. The DCU primarily aims to provide a range of centre-based care and support services during daytime to enable the frail elderly persons who was assessed to suffer from moderate or severe level of impairment by the Standardised Care Need Assessment Mechanism for Elderly Services to maintain their optimal level of functioning, develop their potential, improve their quality of life and to live in their own homes wherever feasible and possible.
5. By pooling the manpower and resources of DECC and DCU under one streamlined administrative body, it is expected that this set of integrated care services

¹ This Funding and Service Agreement is a sample document for reference only.

should be flexible and responsive to community needs, and a wide range of services will be provided to elderly persons, carers and the community at large.

Nature of Service

6. The scope of services of DECC should include a continuum of direct services including dementia care services at preventive and developmental, supportive and remedial level, as well as indirect services to collaborate and work together with other service units and to cooperate with other disciplines in the locality which are stipulated in the Service Specifications on District Elderly Community Centre (Specifications-DECC).

7. DCU should address the clinical issues in Specifications-DECC and to meet the needs of individual service users by providing, arranging or purchasing the services described in Specifications-DECC, apart from the Annex of this FSA.

8. The service scope of STE includes the following services :

- (a) to identify vulnerable elderly persons by an outreaching approach and to maintain an updated list;
- (b) to assess service needs of vulnerable elderly persons and arrange services for them;
- (c) to recruit, assess and train volunteers of all ages, including individuals and volunteer organisations, and to maintain an updated list of volunteers and volunteer organisations;
- (d) to involve people in the community and volunteers to establish link with vulnerable elderly persons;
- (e) to provide support services for vulnerable elderly persons including:
 - regular contacts such as home visits and telephone contacts;
 - emotional support;
 - introduction of community resources;
 - simple personal assistance such as escort to clinics, handling of simple household chores;
 - referral for formal services.
- (f) to mobilise senior volunteers to serve their counterparts or other needy

groups.

9. The Service Operator is required to maintain a database of STE for arranging support services to vulnerable elderly persons, and to capture and analyse the statistical information of vulnerable elderly persons in the locality.

Target Service Users

10. Service Operator of the DECC is expected to serve elderly persons aged 60 or above residing in the serving district(s) as delineated by District Council boundary. Service Operator is also expected to provide support to the formal and informal carers who take full-time or part-time care of the elderly persons, and to provide educational and developmental programmes to the community at large.

11. For the STE, the target groups are :

(a) Vulnerable elderly persons aged 60 or above, having genuine need of support services, living in the community within defined boundary, who may be:

- living alone;
- having limited social network;
- in poor health;
- living in unfavorable environment; or
- having a high degree of social isolation.

(b) Volunteers of all ages, including:

- individuals, such as women volunteers and retiree volunteers; and volunteer organisations, who are willing to serve vulnerable elderly persons; and
- senior volunteers aged 60 or above who are willing to serve needy people.

12. The prospective service user of DCU must meet all of the following criteria:

- (a) aged 60 or above;
- (b) medically stable;
- (c) of moderate to severe level of impairment;
- (d) living in the community and not receiving institutional care;and
- (e) elders whose carers are unable to provide full-time care.

13. The Service Operator shall admit these cases upon confirmation of the eligibility

by accredited assessor coordinated by Standardized Care Need Assessment Management Offices (Elderly Service) [SCNAMO(ES)] within the designated service areas.

14. The Service Operator is also required to provide day respite service at a minimum number of three places at any one time at the DCU. The prospective service user must meet (a) to (d) in para. 12 and are in need of short-term day care services which will enable their carers to have a break from caring on a long-term basis.

15. Upon request of the service user or his/her designate or referral from local organizations, the Service Operator shall admit the case if there is vacancy for respite service at the DCU.

II Performance Standards

Output Indicators

16. The Service Operator will meet the following performance standards:

<u>No.</u>	<u>Output indicator of DECC</u>	<u>Agreed level</u>
1	Total number of new and renewed elderly members registered within one year.	1 000
2	Average attendances per session within one year.	130
3	Total number of preventive and developmental groups ² , activities and programmes held within one year:	300
	a. (i) to meet the educational and developmental needs of elderly persons including healthy ageing, cognitive training and life-long learning; and (ii) for volunteer recruitment, development and service;	260
	b. to meet social and recreational needs of elderly persons.	40
4	Total number of supportive groups, activities and programmes held within one year:	
	a. mutual support among elderly persons;	50
	b. carers' support services including mutual support groups and training activities;	50
5	Remedial services conducted held within one year:	

² "Groups" include closed groups (with fixed membership) and open groups but exclude regular meetings.

<u>No.</u>	<u>Output indicator of DECC</u>	<u>Agreed level</u>
	a. monthly average number of active counselling cases with agreed plan ³ (summing up the 12 month-end number of active counselling cases ÷ 12);	220
	b. turnover rate of active counselling cases (number of closed cases ÷ total number of active counselling cases served x 100%);	20%
	c. total number of therapeutic groups for elderly persons.	4
6	Networking services of support team for the elderly (STE) within one year:	
	a. total number of elderly persons in the community, who are not known to STE, being contacted through different ways of contact such as outreaching activities;	1 200
	b. total number of elderly persons who have received STE networking support services;	600
	c. total number of networking support services rendered by volunteers;	3 100
	d. total number of volunteers of the STE and non STE .	120
7.	Total Number of carers served within one year.	230
8	Total number of support and training programmes / activities for Neighbourhood Elderly Centre and other units providing service to elderly persons.	12
9	Services for hidden or vulnerable elderly persons:	
	a. Monthly average number of active cases of hidden or vulnerable elderly persons (summing up the 12 month-end number of active cases ÷ 12);	35
	b. Turnover rate of cases served within one year in relation to hidden or vulnerable elderly persons (number of closed cases ÷ total number of cases served x 100%).	20%
10	Total number of activities of building up rapport with local stakeholders for service promotion and/or establishing strategic partnership within one year	12
11	Total number of Minimum Data Set-Home Care (MDS-HC) Version 2.0 ⁴ assessments conducted within one year ⁵ .	55

³ Development of plan refers to the process outlined in Standard 11 of the Service Quality Standards.

⁴ MDS-HC Version 2.0 or the prevailing version of MDS-HC adopted by SWD.

⁵ SWD will take into consideration the availability of referrals should the agreed level not being met.

<u>No.</u>	<u>Output indicator of DECC</u>	<u>Agreed level</u>
12	Total number of training sessions ⁶ to staff on dementia.	21
13.	Service for needy carers ⁷	
	a. Total number of supportive groups held within one year for needy carers;	6
	b. Total number of training activities and programmes held within one year for needy carers;	25
	c. Total number of support services to needy carers, such as volunteer visits, escort service and occasional elder sitting services (home-based or centre-based);	200
	d. i) Total number of needy carers served within one year;	100
	ii) Turnover rate of needy carers served within one year;	20%
	e. Total number of activities of building up rapport with local stakeholders for service promotion and/or establishing strategic partnership in identification of needy carers through different ways of contact; and	4
	f. Total number of programmes and activities conducted to local stakeholders, e.g. security guards or mutual aid committees for enhancing awareness in identification of needy carers in a year.	8

<u>No.</u>	<u>Output indicator of DCU</u>	<u>Agreed level</u>
14	Percentage of part-time users of the DCU in attendance in one year.	20%
15	Average daily attendance rate of DCU in one year.	90% of capacity

⁶ Each training session should last no less than 4 hours. Training course lasting for one hour will be counted as 0.25 training session.

⁷ Needy carers are those carers taking care of frail elderly persons (i.e. aged 60 or above with poor mobility, ill-health or dementia, etc.) and they may have disability, heavy carer burden or be in advanced age, etc., and in need of social and emotional support.

16	Rate of formulation of the first Individual Care Plan (ICP) for DCU users within one year.	90% of new users within one month and the rest within 3 months after admission
17	Rate of review of ICP for DCU users within one year.	90% of cases reviewed once every six months
18	Number of programmes conducted on dementia care service for service users with dementia and carers ⁸ within one year	Depending on capacity ⁹
19	Number of training sessions on dementia care arranged for staff within one year	Depending on capacity ¹⁰

Outcome indicators

17. The Service Operator should report to Social Welfare Department (SWD) the outcome indicators of DCU on a yearly basis while those of DECC are only required once every three years.

	<u>Outcome indicator of DECC and DCU</u>	<u>Agreed level</u>
	<u>DECC</u>	
1	Percentage of users satisfied with the DECC service. (a survey with sample size reaching 400 or not less than 30% of the total membership)	70%

⁸ Dementia Care Services include:

- (i) direct care services/ training programmes or activities provided to service users with dementia or cognitive impairment for maintaining their physical and social functioning; and
- (ii) training programmes/ supportive services provided to carers.

⁹ Number of programmes for dementia care required:

- (i) 20-p or below: 4 programmes per year; 21-39-p : 8 programmes per year; 40-59-p : 14 programmes per year; 60-p or above : 18 programmes per year; and
- (ii) at least 50% of programmes conducted for service users with dementia or cognitive impairment should fall within one or all of the following nature: (1) Reality Orientation; (2) Sensory Training; (3) Reminiscence Programme; (4) Memory/ Cognitive Training.

¹⁰ Total number of training sessions on dementia care arranged for staff per year required : below 40-p : 9 sessions; 40 - 59-p : 15 sessions; 60-p or above : 21 sessions. Each training session should last no less than 4 hours. Training lasting for one hour will be counted as 0.25 training session.

	<u>Outcome indicator of DECC and DCU</u>	<u>Agreed level</u>
	should be conducted.)	
2	Percentage of carers ¹¹ satisfied with the DECC service. (a survey with sample size not less than 30% of the total number of carers served should be conducted.)	70%
3	Percentage of senior volunteers satisfied with their volunteer services and/or organising centre activities. (a survey with sample size not less than 30% of the total number of senior volunteers should be conducted.)	70%
4	From output indicators No. 3 & 4 of clause 16, percentage of groups, activities and programmes for which elderly members are involved in planning and implementation.	10%
5	Percentage of carers with lower stress level in taking care of elderly persons after attending the DECC service. (the outcome should be counted as average attainment level of all programmes/groups for reducing carers' stress level).	70%
6	Percentage of users whose support network is widened. (a survey with sample size reaching 400 or not less than 30% of the total membership should be conducted.)	70%
7.	Percentage of needy carers satisfied with the carer support services.	75%
	<u>DCU</u>	
8	Percentage of Users ¹² satisfied with the DCU service (a survey with sample size not less than 90% of the total number of users served should be conducted)	70%
9	Percentage of users / carers satisfied ¹³ with the dementia care services ⁶ received	75%
10	Percentage of users / carers satisfied ¹⁴ with the speech therapy services ¹⁵ received	75%

¹¹ For calculation purpose, each service user should report one carer at most.

¹² Full-time and Part-time users who have received service of the DCU for 6 months or above, excluding those unable to express their views totally due to dementia or related illnesses.

¹³ This outcome should be measured according to the result of the questionnaire designed for measuring the satisfaction level on dementia care services received by service users/ carers.

¹⁴ This outcome should be measured according to the result of the questionnaire designed for measuring the satisfaction level on speech therapy services received by service users/ carers.

¹⁵ Speech therapy services include provision of speech assessment and therapy for elderly service users with swallowing disorders, communication problems, reading and writing difficulties by speech therapist(s). The speech therapist(s) should work closely with service users and/ or carers and allied health professionals in the provision of services.

Essential service requirements

18. The DECC should operate 12 sessions per week from 8:00 am to 8:00 pm from Mondays to Saturdays.

19. The operation of DECC should be under the supervision and guidance of registered social worker.

20. The DCU should operate 12 sessions per week from 8:00 am to 6:00 pm from Mondays to Saturdays. The Operator will provide extended hours service for needy cases from 6:00 pm to 8:00 pm from Mondays to Saturdays.

21. There should be qualified nurse in the DCU at all times during the service hours. For professional services provided by speech therapist, the Service Operator may hire services from qualified professional organisations.

Quality

22. The Service Operator will meet the requirements of the 16 Service Quality Standards (SQSs).

III Obligations of SWD to Service Operator

23. SWD will undertake the duties set out in the General Obligations of SWD to the Service Operator as specified in the Funding and Service Agreement (FSA) Generic Sections.

IV Basis of Subvention

24. The basis of subvention is set out in the offer and notification letters issued by the SWD to the Service Operator.

Funding

25. An annual subvention will be allocated on a Lump Sum Grant (LSG) mode to the Service Operator for a time-defined period (*applicable to time-defined projects only*). This lump sum has taken into account personal emoluments, including provident fund for employing registered social workers, qualified professionals and supporting staff, and all other relevant costs (such as employees' compensation insurance and public liability insurance) applicable to the operation of the project and recognized fee income, if any. Rent and rates in respect of premises recognized by SWD for delivery of the subvented activities will be reimbursed separately on an actual cost basis.

26. In receiving the LSG, the Service Operator is accorded flexibility in the use of the grant but will have to observe the guidelines set out in the latest LSG Manual and the LSG Circulars in force on the use of subventions. The LSG will be subject to adjustments including salary adjustments in line with civil service pay adjustment and other charges in line with price adjustment factor (currently the Composite Consumer Price Index). SWD will not accept any liabilities or financial implication arising from the project beyond the approved funding.

Payment Arrangement, Internal Control and Financial Reporting Requirements

27. Upon your acceptance of the FSA, the LSG subventions payment will be made on a monthly basis.

28. The Service Operator is responsible for maintaining an effective and sound financial management system, including budget planning, projection, accounting, internal control system and auditing. It should maintain proper books and records and supporting documents on income and expenditure relating to the project and make them available for inspection by the Government representative.

29. The Service Operator has to submit annual financial report and statements audited by a certified public accountant registered under the Professional Accountants Ordinance (Cap 50) in accordance with the requirements as stipulated in the latest LSG Manual and LSG Circulars in force. The AFR should be prepared on cash basis and non-cash items like depreciation, staff leave accrual etc. should not be included in the AFR.

V Validity Period (Applicable to time-defined projects only)

30. This FSA is valid for a time-defined period. Should Service Operator be in breach of any term of condition of this FSA and fail to remedy the same in such manner and within such time as shall be specified in a written notice from the SWD that the same be remedied, the SWD may after expiry of such notice, terminate this FSA by giving 30 days' notice in writing to the Service Operator.

31. Where there is any change to the performance standards within the agreement period, SWD will seek mutual agreement with the Service Operator and the Service Operator will be required to achieve new requirements in accordance with the specified implementation schedule.

32. Continuation of service for the next term will be subject to relevant considerations such as the prevailing policy directive, service needs and the performance of the Service Operator. SWD reserves the right to reallocate the project.

VI Other Reference

33. Apart from this FSA, the Service Operator should also comply with the requirements/commitments set out in the Service Specifications mentioned in clause 6 above and the Service Operator's proposal and supplementary information, if any. Where these documents are in conflict, this FSA shall prevail. The Service Operator's compliance with all these documents will be closely monitored by SWD.

Enhanced Services in District Elderly Community Centre cum Day Care Unit

The Service Operator should also provide the following services:

(1) Dementia Care

- To provide direct care services/ training programmes or activities to service users with dementia or cognitive impairment for maintaining their physical and social functioning.
- To provide training programmes/ supportive services to carers
- To arrange training sessions on dementia care for staff.

(2) Speech Therapy

- To provide speech assessment and therapy for elderly persons with swallowing disorders, communication problems, reading and writing difficulties by speech therapist(s).
- The speech therapist(s) should work closely with service users and/or carers and allied health professionals in the provision of services.