

Funding and Service Agreement¹

District Support Centre for Persons with Disabilities

I. Service Definition

Introduction

To further strengthen the support to persons with disabilities and their families living in the community, the Department set up District Support Centre for Persons with Disabilities (DSC) through re-engineering of the regional teams of Home-based Training and Support Service (HBTS) so as to provide one-stop district-based community support services to persons with disabilities. By adopting a district-based approach, DSC provides one-stop community support services for persons with disabilities and their families/carers.

From November 2014 onwards, additional recurrent resources are allocated to strengthen the manpower of the DSC and introduce a case management service approach with a view to providing service users with more comprehensive and convenient support.

From October 2017 onwards, additional recurrent resources are allocated to the DSC for increasing additional day care places and enhancing the outreaching support for ageing persons with disabilities in the community.

Purpose and Objective

The objective of DSC is to enhance domestic living and community living skills for persons with disabilities so as to facilitate their integration into the community through the provision of a range of community support services. It also provides training and support services to the families/carers so as to strengthen their caring capacities and to relieve their stress.

Nature of Service

DSC should provide both direct and indirect services. Direct services include:

- (a) individual or group training programmes for persons with disabilities on domestic and community living skills through a multi-disciplinary team approach;
- (b) out-reaching allied health support service to homebound persons with disabilities for home-based individual therapy, professional support on home modification and

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

- purchase of rehabilitative equipment;
- (c) both centre-based and family-based care and support service for persons with disabilities;
 - (d) social, recreational and personal development programmes for persons with disabilities;
 - (e) psychological services for persons with disabilities with autism or challenging behaviour;
 - (f) 5/10/15 places per day of day care service for persons with severe disabilities (DC/SD) and ageing persons with intellectual disability with provision of day care with meal; nursing care and intensive personal care including assistance with activities of daily living; maintenance programmes on basic living skills; regular activities to meet service users' social and recreational needs and to enable them to maintain contact with the community;
 - (g) training programmes/educational courses/workshops on caring techniques for the families/carers of persons with disabilities;
 - (h) community education programmes, volunteer services and activities for the promotion of community integration and increase in public acceptance towards persons with disabilities;
 - (i) referrals of persons with disabilities to other welfare service units, medical and health sector or governmental departments for services and appropriate follow-up assistance; and
 - (j) resource corner to provide information on community resources and drop in service.
 - (k) provision of case management service including conducting need assessment, formulation of case plan and rendering counselling service to the persons with disabilities and their families and to bridging up community resources.

Indirect services to be provided by DSC include:

- (a) to explore and establish partnership with other local stakeholders, such as SWD, rehabilitation service units, medical and health sector and other local organizations to provide appropriate services to persons with disabilities in the community; and

- (b) to identify service needs in the operating district and to respond to those needs in collaboration with its partners in the community.

Target group

- (a) The target service users of DSC are:
- i. Persons with disabilities living in the community, including persons with intellectual disabilities, persons with physical disabilities, persons with autism, persons with hearing impairment, and persons with visual impairment;
 - ii. Families/carers of persons with disabilities as stated in (a) above; and
 - iii. Community at large.
- (b) The target service users of DC/SD should meet following criteria:
- i. For persons with severe intellectual/severe physical disability -
 - aged between 15 to 59;
 - disability level should be equivalent to those eligible for Care and Attention Home for Severely Disabled Home or Hostel for Severely Physically Handicapped Persons or Hostel for Severely Mentally Handicapped Persons;
 - not bed-ridden or requiring infirmary care;
 - without severe aggressive behaviour endangering self and/or others;
 - without infectious disease;
 - in need of day care service; and
 - priority to be given to those without waitlisting for residential care services.
 - ii. For ageing persons with intellectual disability -
 - aged between 15 to 59 (service provider should provide clear documentation with genuine supporting reasons for admitting those who are beyond the age of 59 and in special need of DC/SD);
 - living in the community assessed to be in need of DC/SD services through the assessment checklist at Appendix (not attached in this sample);.
 - without severe aggressive behaviour endangering self and/or others;
 - without infectious disease;
 - in need of day care service; and
 - priority to be given to those without waitlisting for residential care services.

Service Capacity

The capacity of DC/SD is 5/10/15 places per day.

Referral Procedure

Persons with disabilities and their families/carers can directly approach the DSC for services. For DC/SD, referrals should be made by social workers to the DSC direct.

II. Performance Standards

The Service Operator will meet the following performance standards:

Outputs

<u>Output Standard (OS)</u>	<u>Output Indicator</u>	<u>Agreed Level</u>
1.	Total number of service hours provided to meet all the training, care and support needs of persons with disabilities per year	62,000 hours (for centres with 80 HBTS cases before re-engineering/ centres with capacity of 80 HBTS cases after being topped up with additional resources) 87,000 hours (for centres with 120 HBTS cases)
2.	Total number of groups sessions/activities/ programmes on publicity and community education per year, including:	10 sessions
	a. volunteer recruitment, development and services b. public education to promote positive image and social inclusion of persons with disabilities	
	Occupational therapy/physiotherapy services	
3.	Total number of assessment, individual/group treatment sessions delivered by therapists in a year	750 sessions (for centres with 80 HBTS cases before

<u>Output Standard (OS)</u>	<u>Output Indicator</u>	<u>Agreed Level</u>
		re-engineering/ centres with capacity of 80 HBTS cases after being topped up with additional resources) 1,000 sessions (for centres with 120 HBTS cases)
4.	Rate of reviewing individual training needs in a period of six months	95%
5. Total number of groups sessions/activities/ programmes held to meet all the following needs of persons with disabilities per year:		
	a. personal development needs b. social and recreational needs c. support services including mutual support groups and training activities/workshops/educational courses, etc. for families/carers of persons with disabilities	450 sessions
Clinical psychology service		
6.	Total number of therapeutic individual/group sessions delivered in a year	150 sessions
7.	Rate of reviewing individual psychological needs in a period of six months	95%
Day care service for persons with severe disabilities (DC/SD)		
8.	Average monthly occupancy rate within a year	90%
9.	Rate of reviewing care plan in a period of six months	100%
Case Management Service		

<u>Output Standard (OS)</u>	<u>Output Indicator</u>	<u>Agreed Level</u>
10	Monthly average number of cases receiving case management service with agreed case plan	90
11	Monthly average number of counselling session conducted through face to face interview/home visit	60
12	No. of new target ² / vulnerable ³ cases in a year	24
13	Rate of reviewing case plan in a period of 6 months	95%
14	Total number of activities/programmes for networking with local stakeholders and/or service promotion within one year	12

Outcome Standard for Overall Services/Programmes delivered to Service Users and/Families/Carers

<u>Outcome Standard</u>	<u>Outcome Indicator</u>	<u>Agreed Level</u>
1	Rate of service users being satisfied with the overall services/programmes delivered to them within one year	80%
2	Rate of families/carers being satisfied with the overall services/programmes delivered to them within one year	80%

² New target cases refer to persons with disabilities and/their family members/carers living in the community who are not receiving service in subvented or self-financing social service units.

For new DSC members, they are regarded as new target users on the condition that they are not receiving any social services when they enroll as a member.

For existing DSC members, they are regarded as new target users on the condition that they have no contact point with social worker.

Cases regarded as new target user: i) special school leavers while social workers making a referral only; and ii) discharged in- patients/ out-patients while their cases had already been closed by medical social workers.

³ Vulnerable cases generally refer to persons with disabilities (PWD) under the care of aged parents/carers, PWD at risk (e.g. hoarding case, health hazard, records of misdeeds, potential risk for being abuse, etc.), singleton PWD or aged PWD couples without family and with limited social support, PWD students living in private residential care homes for disabilities (RCHDs), etc.

Outcome Standard for Case Management Service**i. Service Users**

<u>Outcome Standard</u>	<u>Outcome Indicator</u>	<u>Agreed Level</u>
3	Rate of service users indicating improvement in the quality of life after receiving case management service in a year	80%
4	Rate of service users indicating bridging up community resources after receiving case management service in a year	80%

ii. Family Members/Carers

<u>Outcome Standard</u>	<u>Outcome Indicator</u>	<u>Agreed Level</u>
5	Rate of family members/carers indicating improvement in the quality of life after receiving case management service in a year	80%
6	Rate of family members/carers indicating bridging up community resources after receiving case management service in a year	80%

Essential service requirements

The Service Operator is required to comply with the Essential Service Requirements (ESRs) as follows -

- (a) the DSC should operate at least 6 days a week with a minimum of 48 hours per week;
- (b) core service hours of DC/SD are Monday to Friday, from 9:00am to 6:00pm;
- (c) registered social worker, qualified physiotherapist, occupational therapist, nurse and clinical psychologist are the essential staff for the service; and
- (d) the operation of DSC should be under the supervision and guidance of registered social worker.

Quality

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

III. Obligations of SWD to Service Operator

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

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

V. Funding

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

In receiving the LSG, the Service Operator is accorded flexibility in the use of the grant but required to observe the guidelines set out in the latest LSG Manual, LSG Circulars, management letters and correspondence in force as issued by SWD on subvention policies and procedures. The LSG will be subject to adjustments including salary adjustments in line with civil service pay adjustments and other charges in line with the price adjustment factor, currently the Composite Consumer Price Index. The Government will not accept any liabilities or financial implication arising from the project beyond the approved funding.

VI. Payment Arrangement, Internal Control and Financial Reporting Requirements

Upon the Service Operator's acceptance of the FSA, payment of the LSG subventions will be made on a monthly basis.

The Service Operator is responsible for maintaining an effective and sound financial management system, including budget planning, projection, accounting, internal control 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.

The Service Operator shall submit the Annual Financial Report (AFR) as reviewed and the annual financial statements of the NGO as a whole as audited by a certified public accountant holding a practicing certificate as defined in the Professional Accountants Ordinance (Chapter 50) and signed by two authorised representatives of the NGO, i.e. Chairperson/NGO Head/Head of Social Welfare Services in accordance with the requirements as stipulated in the latest LSG Manual. The AFR should be prepared on a cash basis and non-cash items such as depreciation, staff leave accrual etc. should not be included in the AFR.

VII. Validity Period

This FSA is valid for a time-defined period. Should the Service Operator be in breach of any terms 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 SWD that the same be remedied, SWD may after expiry of such notice, terminate this FSA by giving 30 days' notice in writing to the Service Operator.

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.

Continuation of service for the next term will be subject to the 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.

VIII. Other References

Apart from this FSA, the Service Operator should also comply with the

requirements/commitments set out in the Service Specification, and the Service Operator's proposal and supplementary information, if any. When these documents are in conflict, this FSA shall prevail. The Service Operator's compliance with all these documents will be closely monitored by SWD.