Funding and Service Agreement¹

Integrated Community Centre for Mental Wellness

I. Service Definition

Introduction

1. The Integrated Community Centre for Mental Wellness (ICCMW) is to provide one-stop, district-based and integrated community social rehabilitation support services for persons diagnosed with mental illness or with suspected mental health problems living in the service area and their family members/carers. The ICCMW also provides public education on mental wellness to residents living in the service area.

Purpose and objectives

- 2. The objectives of the ICCMW are:
 - (a) to provide one-stop, district-based and outreaching support services for persons with mental health problems or suspected mental health problems living in the service area in order to improve their social adjustment capabilities, to prepare them to re-adjust to community living, and to help them develop their social and vocational skills to the fullest extent;
 - (b) to enhance family members'/carers' knowledge of mental illness and coping abilities in taking care of their family members with mental health problems or suspected mental health problems living in the service area;
 - (c) to raise public awareness on the importance of mental wellness; and
 - (d) to enhance the social functioning and the linkage with the community of the residents with mental health problems or suspected mental health problems living in the private residential care homes for

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

persons with disabilities in the serving district.

Nature of service

- 3. The Service Operator is required to meet the holistic and individual needs of service users by providing a range of services facilitative to their rehabilitation and integration into society. To this end, the Service Operator shall provide the following services tailor-made for target service users from 1 October 2010 in accordance with the service plan as stipulated in the proposal submitted to the Social Welfare Department (SWD):
- 3.1 Provision of social work services including:
 - (a) Formulation of individual rehabilitation plan;
 - (b) Outreaching visits;
 - (c) Counseling; and
 - (d) Referral to/networking with local welfare resources if necessary.
- 3.2 Provision of occupational therapy services including:
 - (a) Occupational needs assessment;
 - (b) Life skill training in the following areas, including but not limited to:
 - i. self-care skill training such as personal hygiene, clothing, eating habit and arrangement of daily routine;
 - ii. home management skill training such as laundry, menu planning, cooking, home safety, handling of emergency, etc.;
 - iii. health management training such as basic health knowledge, relaxation strategies, awareness of seeking medical assistance and drug compliance; and
 - iv. basic community living skill training such as usage of community facilities, purchase of daily necessities, banking, social skills, road safety, building up social network, etc.

- (c) Pre-vocational training on:
 - i. occupational skill training and work attitude; and
 - ii. self-confidence, motivation, interpersonal skills, etc.
- 3.3 Provision of nursing services including counseling on medication, drug compliance and personal hygiene, mental health talks, seminars, etc.
- 3.4 Supervision on follow-up attendance at psychiatric hospital/clinic for half-way house dischargees.
- 3.5 Provision of therapeutic groups.
- 3.6 Referral of needy cases to the Community Psychiatric Service of respective clusters of the Hospital Authority for clinical assessment and necessary psychiatric treatment.
- 3.7 Provision of supportive groups, interest classes, linkage activities, volunteer groups, social and recreational programmes, etc. to meet the needs of the service users.
- 3.8 Provision of community and public education programmes with the theme of mental wellness.

Target groups

- 4. The service users of the ICCMW include the following persons aged 15 and above living in the service area:
 - (a) Discharged mental patients and/or out-patients of psychiatric hospitals/clinics;
 - (b) Persons with, or suspected to have, mental health problems;
 - (c) Family members/carers of the persons with mental health problems and/or suspected mental health problems;
 - (d) Local residents with interest in improving their mental health; and

(e) Residents with mental health problems or suspected mental health problems living in the private residential care homes for persons with disabilities.

Referrals

5. These service users can self-approach the ICCMW or can be referred by social workers, psychiatrists, allied health workers, teachers, staff of other government departments, etc. for services as appropriate.

II. Performance Standards

6. The ICCMW is required to achieve the performance standards including output standards in accordance with the team size in the specified districts and outcome standards as shown at Annex I.

Essential service requirements

- 7. The essential service requirements of the ICCMW are as follows:
- 7.1 Number of opening hours for ICCMW is not less than 44 hours per week.
- 7.2 Number of opening sessions for ICCMW is not less than 11 sessions per week.
- 7.3 Staffing requirement of the ICCMW includes occupational therapist, qualified nurse (psychiatry) and registered social workers, at least two of the social workers have at least three years of social work experience in mental health service.

Value-added service to be provided

8. The value-added service, if available, is proposed by the Service Operator and indicated at Annex I.

Quality

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

III. Obligations of SWD to Service Operator

10. 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

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

Funding

- 12. An annual subvention (excluding rent and rates) 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 registered social workers, 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.
- 13. 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 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.

Payment Arrangement, Internal Control and Financial Reporting Requirements

- 14. Upon the Service Operator's acceptance of the FSA, payment of the LSG subventions will be made on a monthly basis.
- 15. 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.
- 16. 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 practising 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.

V. <u>Validity Period</u>

- 17. This FSA is valid for a time-defined period. Should the Service Operator be in breach of any terms of condition of the Agreement 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 Agreement by giving 30 days' notice in writing to the Service Operator.
- 18. 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.

19. 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.

VI. Other References

20. Apart from this FSA, the Service Operator should also comply with the requirements/commitments set out in the Service Operator's service plans 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.

Annex I

Integrated Community Centre for Mental Wellness (ICCMW)

Organisation:

1. Performance Standards

Outputs

The agreed level of each output standard of a service unit is on a pro-rata basis with reference to the team size of each service unit.

Output Standards (OSs)	Output Indicators & [Notional Team Agreed Level per year]	Agreed Level (per year) XX District ICCMW (1.0 Team Size)
1	Total number of members ¹ served in a year ² [1 000]	1 000
2	Number of new members ³ served in a year [330]	330

3	Total number of new/reactivated cases ⁴ in a year	330
	[330 (with no less than 80 cases involving families/carers)]	
4	(a) Total number of outreaching visits ⁵ /office interview sessions ⁶ in a year	
	[2 820 (with no less than 240 outreaching visits/office interview sessions	2 820
	involving families/carers)]	
	(b) Total number of outreaching visits in a year	No less than 2 000
	[No less than 2 000]	
5	Total number of individual centre-based or outreaching needs	1 500
	assessment/training sessions ⁷ of occupational therapy in a year [1 500]	
6	Total number of therapeutic groups ⁸ conducted in a year	No less than 20
6	[No less than 20]	
7	Total number of sessions of interest classes/supportive groups ⁹ conducted	
	in a year	No less than 500
	[No less than 500]	
8	Total number of linkage activities ¹⁰ and/or programmes ¹¹ in a year [45]	45
9	Total number of participants ¹² in linkage activities or programmes in a year	3 500
	[3 500]	
10	Total number of sessions of psycho-educational groups/programmes ¹³ for	
	families/carers in a year	20
	[20 (including no less than 2 groups with at least 4 sessions each) or no less	20
	than one group with at least 4 sessions for ICCMW of 0.4 team size	

Outcomes

Outcome Standards (OCs)	Outcome Indicators	Agreed Level (%) (per year)
1	Percentage of service users ¹⁴ indicating satisfaction after receiving ICCMW service	75
2	Percentage of service users ¹⁴ indicating enhancement of problem coping and solving capability after receiving ICCMW service	75
3	Percentage of service users ¹⁴ indicating enhancement of community support after receiving ICCMW service	75

2. Value-added services to be provided

Subject to the service operator's proposal

Explanatory notes:

¹ Members refer to those who are individuals with diagnosis of mental illness or suspected mental health problems. For members with suspected mental health problems, social worker's assessment is required. To count the members with valid membership, they should receive service in the ICCMW in the reporting year. A member should not be counted more than once in the reporting year no matter the

membership of a member has any changes within the reporting year.

- ² A reporting year refers to the financial year from 1 April to 31 March of the next year.
- ³ New members refer to those who are (i) individuals with mental health problems or suspected mental health problems; and (ii) re-registered members whose membership has already ceased for no less than six months.
- ⁴ New/reactivated cases refer to service users with mental health problem, suspected mental health problem and/or their family members/carers, receiving active intensive counseling/brief counseling/supportive casework in the centre.
- ⁵ Outreaching visits refer to the visits to service users with mental health problems, suspected mental health problems and/or their family members/carers, conducted at their residence or other places outside the premises of the service unit.
- ⁶ Office interview sessions refer to face-to-face interviews by professional staff, such as social worker, nurse, etc, with service users with mental health problems, suspected mental health problems and/or their family members/carers, other than group sessions at the premises of the service unit, which last for no less than 30 minutes.
- ⁷ Each session of individual centre-based or outreaching needs assessment/training should last no less than one hour.
- ⁸ Therapeutic groups are defined as the groups conducted to ICCMW's members by the qualified professionals in the ICCMW with structured content and the major objective(s) of any desired therapeutic effects to be achieved in relation to the mental wellness of the group members. The number of sessions and members of the group should not be less than four respectively. Each session of the therapeutic groups should last no less than one hour.
- ⁹ The interest classes/supportive groups can also serve the family members/carers of ICCMW's target service users as well as residents of the serving district. The number of sessions and members of each class/group should not be less than four respectively. Each session of the interest classes/supportive groups should last no less than one hour.
- ¹⁰ Linkage activities are geared to promote better understanding of persons with mental health problems and their needs, be jointly organised with other types of social services, schools, local community organisations, commercial sector, etc. to promote inclusion, integration and

community participation of persons with mental health problems, to support/educate their carers, to develop the potential and positive personal value of persons with mental health problems, and enhance their family and interpersonal relationship.

¹¹ Programmes refer to social/recreational/educational activities to enhance participants' personal growth, social skills and awareness of the importance of mental wellness, etc.

¹² Participants can include residents of the serving district.

¹³Psycho-educational groups/programmes are defined as the groups/programmes primarily conducted to the families/carers of ICCMW members by qualified professionals, such as social worker, nurse, occupational therapist, clinical psychologist, doctor, etc., with structured content and the major objectives are to facilitate the participants to have better understanding of mental illness and mental health, to strengthen their coping ability as caregivers, to alleviate their stress and to consolidate their mutual help network. ICCMW members can also be enrolled in these groups/programmes with justification(s) recorded. Each session of the psycho-educational groups/programmes should last no less than one hour. For psycho-educational groups, the number of sessions and members should not be less than four respectively.

¹⁴ Service users include those having completed "User Satisfaction Form" (服務使用者意見調查問卷) as provided by SWD upon case closure or completion of therapeutic / supportive groups.