

Funding and Service Agreements¹

Hostel for Moderately Mentally Handicapped

I Service Definition

Hostels for Moderately Mentally Handicapped (HMMH) provide home living for persons with moderate intellectual disability who are capable of basic self-care but lack adequate daily living skills to live independently in the community.

Purpose and objectives

The objectives of HMMH are:

- to provide residential care and facilities;
- to promote the quality of life of the residents and to maximize their potentials through the provision of a caring and stimulating environment;
- to maintain their health and capability and to provide care support to enable them to live as independently as possible in the community.

Nature of service

The services provided by HMMH include:

- (a) provision of accommodation and meals;
- (b) provision of daily health care service to maintain or improve residents' general health conditions;
- (c) provision of maintenance programmes of self-care skills;
- (d) provision of opportunities and activities to develop daily living, social and communication skills;
- (e) provision of opportunities and activities to meet social and recreational needs;
- (f) provision of opportunities and activities to enable residents to maintain contact with the community and families.

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

Target group

The target group for HMMH is those persons aged 15 or above with moderate intellectual disability.

Eligibility criteria

To be eligible for a HMMH place, an applicant should be:

- actively occupied in or being arranged for admission to a day placement.
- physically and mentally suitable for group living, such as physically healthy with no active infectious disease.

Referrals are via the Central Referral System for Rehabilitation Services (CRSRehab) operated by SWD.

II Performance Standards

The service operator will meet the following performance standards:

Outputs

<u>Output Standard</u>	<u>Output indicator</u>	<u>Agreed Level</u>
1	Average enrolment rate within one year	95%
2	Rate of achieving individual plans within one year	95%

(Notes and Definitions attached at Annex of this Agreement.)

Essential Service Requirements

- (a) 24 hours care per day with at least one staff member present at all times.
- (b) Provision of regular meals each day with varied food.
- (c) Registered social worker² and health worker(s)³ are essential staff for the service.

² **Registered Social Worker** refers to the definition governed by the Social Workers Registration Ordinance.

³ **Health worker** refers to any person whose name appears on the register maintained by the Director of Social Welfare under Section 5 of the Residential Care Home (Elderly Persons) Regulation. Employment of nurse [i.e. any person whose name appears either on the register of nurses maintained under Section 5 of the Nurses Registration Ordinance, Cap. 164, or the roll of the enrolled nurses maintained under Section 11 of that Ordinance] is allowed if health worker is not available.

(d) All services to comply with the latest CRSRehab Guidelines and Procedures.

Quality

The service operator shall meet the requirements of the 16 Service Quality Standards (SQSs).

III Obligations of SWD to Service Operators

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 Section.

In addition, SWD will meet the following service-specific standard of performance. The actual performance of the department in relation to this obligation is expected to affect the ability of the service operator to meet its required standard of performance.

- to provide a referral from the CRSRehab within **28 days** of written notification of a vacancy, provided that there is a referral with updated and complete information in hand. Should a referral not be in hand, SWD will negotiate with the service operator as appropriate.

IV Basis of Subvention

The basis of subvention is set out in the offer and notification letters issued by SWD to the service operator.

Funding

An annual subvention will be allocated on a Lump Sum Grant (LSG) mode to the service operator. This lump sum has taken into account personal emoluments, including provident fund for employing registered social workers 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 service unit and recognized 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 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 government-wide price adjustment factor. 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

Upon the service operator's acceptance of the FSA, payment of the LSG subventions will be made on monthly basis.

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 representatives.

The service operator has to submit annual financial report (AFR) and statements reviewed 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*)

This FSA is valid for a time-defined period. Should the service operator be in breach of any term 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.

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.

VI Other References

Apart from this FSA, the service operator should also comply with the requirements / commitments set out in the respective Service Specification, and the service operator's proposals and supplementary information, if any. Where these documents are in conflict, this FSA shall prevail. The service operator's compliance to all these

documents will be closely monitored by SWD.

Notes and Definitions

1. **Enrolment** refers to the total number of enrolled person as at the end of each month.
2. **Average enrolment rate** = $\frac{\text{Sum of month-end enrolment of the 12 months} \div 12}{\text{Capacity}} \times 100\%$
3. **Individual plan** refers to the plan conducted by the home to meet individual resident’s needs. It should include objectives, specific goals, process for service delivery, programme content and time frames for achieving or reviewing goals. The no. of individual plans is set at **two** for each individual resident for each year. These individual plans should form the basis of regular case reviews which should be conducted at least annually for each resident. **Achieving individual plans** refer to individual plans completed.
4. **Rate of achieving individual plans** =

$$\frac{\text{No. of plans completed during the period}^1}{\text{Total no. of plans required during the period}^2} \times 100\%$$

Formula for calculating the total no. of plans required during the period

Length of stay of the resident at the time of calculation	0 to 3 months	> 3 to 6 months	> 6 to 9 months	> 9 months
No. of residents (a)	a1	a2	a3	a4
Proportion of plans to be counted (b)	0 (Not counted)	a2 x 1/3 P	a3 x 2/3 P	a4 x P

P = 2 (minimum number of plans required for each individual resident in a year)

1 = Total no. of plans completed for all residents in a year.

2 = Summation of all residents’ plans that will be counted in a year i.e. summation of (b)