

Funding and Service Agreement¹

Multi-programme Integrated Service (Type 1)

I Service Definition

Introduction

Integrated service aims at providing comprehensive and holistic services to residents to fulfil their multifarious needs. The guiding principles and concepts of the integrated service model include: comprehensive service coverage, holistic concern for individuals, family-oriented focus, multi-level intervention, flexibility in resource allocation, and integrated approach in planning and service delivery.

Purpose and objectives

The purpose of the integrated centre is to meet the needs of all age groups including children, youth, disabled persons, adults and elderly persons and their carers in the community.

The specific objectives of the integrated centre are:

- to enhance physical, psychological, intellectual and social functions of residents living in the community;
- to facilitate social relationships among residents, enhancing family and other interpersonal relationships

Nature of service

On the service content, the centre provides a balanced programme on the developmental, preventive and remedial functions, assisting vulnerable groups, and addressing current issues and local needs. The services provided by the integrated centre shall include:-

- a. Preventive service

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

Primary prevention programmes aiming at promoting family life education to residents, and good health to elderly people in the community.

b. Developmental service

Providing residents the opportunity to develop skills and individual potential, to enhance interpersonal relationship and to promote the spirit of volunteerism and participation in the community affairs.

c. Supportive service

Supportive service aiming at facilitating mutual support among people under deprived circumstances, enhancing their personal and social functioning and enabling them to deal with their difficulties and success.

d. Social and recreational activities

Social and recreational activities aiming at providing opportunity to cultivate individuals' own aptitudes, interests, and connection with community.

In regard to elderly service, the NEC should provide a range of comprehensive services to elderly persons, carers and the community at large, as stipulated in the Specifications on Re-engineering Community Support Services for Elders.

Target group

The target groups of each type of service will be in line with the relevant parts in the FSA for that type of service operated in a standalone manner.

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	Total number of new and renewed members in the year ending 31 March	1800 ^{Note 2}

^{Note 2} Agreed level of 1800 is being made up of 1400 for CYC cum S/R Rm and 400 for NEC.

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<u>Output Standard</u>	<u>Output Indicator</u>	<u>Agreed Level</u>
2	Average attendance per session within one year	120 ^{Note 3}
3	Total number of core programme ^{Note 4} sessions within one year	1000 ^{Note 5}
4	Total attendance at core programme sessions within one year	11040 ^{Note 6}
5	Rate of achieving #core programme plans conducted with goals achieved within one year	80%
6	Average number of active cases within one year	58.5 x establishment of social worker of the service unit as at 1.4.2000+ 80 ^{Note 7}
7	Average no. of cases closed having completed the agreed plan per month within one year	1.5 x establishment of social worker of the service unit as at 1.4.2000+ 20 ^{Note 8}
8	Average no. of counselling hours provided per month within one year	71 x establishment of social worker of the service unit as at

^{Note 3} Agreed level at 120 is being made up of 60 for CYC cum S/R Rm and 60 for NEC.

^{Note 4} Core programmes refer to programmes designed to achieve the 6 operational goals, namely, (i) enhancing individual functioning, (ii) strengthening family functioning, (iii) community care, (iv) integration among different sectors and (v) for volunteer recruitment, development and services and (vi) providing support services and training activities to carers who take care of elderly persons.

^{Note 5} Agreed level at 1000 is being made up of 800 for CYC cum S/R Rm and 200(groups, activities and programmes) for NEC.

^{Note 6} Agreed level at 11040 is solely for CYC cum S/R Rm

^{Note 7} Agreed level is being made up of 58.5 x establishment of social worker providing family casework of the service unit as at 1.4.2000, and 80 for NEC .

^{Note 8} Agreed level is being made up of 1.5 x establishment of social worker providing family work of the service unit as at 1.4.2000, and 20 for NEC

<u>Output Standard</u>	<u>Output Indicator</u>	<u>Agreed Level</u>
		1.4.2000
9	Total number. of cases of home help teams at any one time	60 x no. of teams in the service unit as at 1.4.2000
10	Total no. of weighted units of service delivered by home help team within one year	20000 x no. of teams in the service unit as at 1.4.2000
11	Total number of volunteers within one year	100
12	Total number of carers served within one year	140
13	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 (total number of closed case total number of cases served x 100%)	20%
14	Total number of activities of building up rapport with local stakeholders for service promotion and/or establishing strategic partnership within one year	12
15	Total number of Minimum Data Set-Home Care (MDS-HC) Version 2.0 ^{Note 9} assessments conducted within one year ^{Note 10}	35

Essential service requirements

- Opening hours of at least 11 sessions per week.
- Provision of study/reading room.
- There should be Registered Social Worker in all services. Family caseworkers as well as the supervisor and team leader of the home help team should be Registered

^{Note 9} MDS-HC Version 2.0 or the prevailing version of MDS-HC adopted by SWD.

^{Note 10} SWD will take into consideration the availability of referrals should the agreed level not being met.

Social Workers.

- The needs of individuals receiving home help service should be reviewed at least every 6 months to establish their continuing need and eligibility to receive the service.
- Home help service will be provided for priority cases as far as possible, unless
 - the home help team has no capacity to take on further cases
 - the case falls in the categories listed under priority cases, where the service operator has discretion in the provision of service

Quality

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

III Obligations of SWD to Service Operators

The SWD will undertake the duties set out in the General Obligations of SWD to service operators.

IV Basis of Subvention

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

The service unit is required to comply with the rules on the use of the social welfare subventions in accordance with the latest Lump Sum Grant Manual and circular letters in force issued by the SWD on subvention policies and procedures.