Service-specific Sections Funding and Service Agreement

Funding and Service Agreements

Care and Attention Home for Severely Disabled Persons

I Service Definition

Care and Attention Homes for Severely Disabled (C&A/SD) provide home living for persons with a severe mental/physical disability who are unlikely to benefit from a regular day training placement. They are in need of nursing and intensive personal care but do not yet require infirmary care.

Purpose and objectives

The objectives of C&A/SD are:

- to provide residential care and facilities;
- to promote the quality of life of the residents through a caring and stimulating environment;
- to help them maintain their health and to assist them in routine personal care tasks and daily living activities.

Nature of service

The services provided by C&A/SD include:

(a) provision of accommodation and meals;
(b) provision of nursing care and intensive personal care including assistance with activities of daily living;
(c) provision of therapeutic exercise and treatment to maintain or improve the functioning of the residents;
(d) provision of maintenance programmes on basic living skills;
(e) provision of regular activities to meet their social and recreational needs, and to enable them to maintain contact with their families and the community.

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

Severely mentally handicapped/severely physically handicapped persons aged 15 and above.

Eligibility criteria

To be eligible for a place in C&A/SD, an applicant should be:

- unfit for day training placement
- in need of intensive personal care, such as assistance in dressing, toileting and meals
- not being bed-ridden or requiring substantial medical/nursing care

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

<table>
<thead>
<tr>
<th>Output Standard</th>
<th>Output indicator</th>
<th>Agreed Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Average enrolment rate within one year</td>
<td>95%</td>
</tr>
<tr>
<td>2</td>
<td>Rate of achieving individual plans within one year</td>
<td>95%</td>
</tr>
</tbody>
</table>

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

Essential Service Requirements

(a) Staff on shift duty to provide 24 hours service

(b) Provision of regular meals each day with varied food.

(c) Registered social worker*, qualified nurse and professional therapist**, e.g. physiotherapist/occupational therapist are the essential staff of the service.

Quality

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

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

** Registered physiotherapist/occupational therapist refers to the definition governed by the Supplementary Medical Ordinance (Chapter 359).
III  Obligations of SWD to Service Operators

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

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 Central Referral System for Rehabilitation Services 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 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.

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

The 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.

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

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2 This Funding and Service Agreement (FSA) is a sample document for reference only, and there are longer version of Section IV in some FSAs.
service operator. SWD reserves the right to reallocate the project.

VI Other Reference

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** =

\[
\text{Rate of achieving individual plans} = \frac{\text{No. of plans completed during the period}}{\text{Total no. of plans required during the period}} \times 100\%
\]

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

<table>
<thead>
<tr>
<th>Length of stay of the resident at the time of calculation</th>
<th>0 to 3 months</th>
<th>&gt;3 to 6 months</th>
<th>&gt;6 to 9 months</th>
<th>&gt;9 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. of residents (a)</td>
<td>a1</td>
<td>a2</td>
<td>a3</td>
<td>a4</td>
</tr>
<tr>
<td>Proportion of plans to be counted (b)</td>
<td>0 (Not counted)</td>
<td>a2 x 1/3 P</td>
<td>a3 x 2/3 P</td>
<td>a4 x P</td>
</tr>
</tbody>
</table>

\[ P = 2 \text{ (minimum number of plans required for each individual resident in a year)} \]

\[ 1 = \text{Total no. of plans completed for all residents in a year.} \]

\[ 2 = \text{Summation of all residents’ plans that will be counted in a year i.e. summation of (b)} \]