

Funding and Service Agreement¹

District Support Centre for Persons with Disabilities

A. Service Definition

Introduction

A District Support Centre for Persons with Disabilities (DSC) (the Service) provides one-stop district-based community support services to persons with disabilities (PWDs) and their families/carers.

Purpose and Objective

2. The DSC is to enhance the functioning skills of PWDs so as to facilitate their living in the community through a range of community support services, including the provision of training and support services to their families/carers for strengthening their caring capacities and relieving their stress.

Service Nature and Contents

3. The service contents of a DSC include:
- (a) individual and/or group training programmes for PWDs on domestic and community living skills through a multi-disciplinary team approach;
 - (b) centre-based service assessment and treatment² by allied health professionals (in the form of individual or group sessions) for PWDs and/or home-based support service to home-bound PWDs who are members of the DSC, including individual therapy, professional support on home modification and purchase of rehabilitative equipment;
 - (c) care and/or support service³ for PWDs to facilitate their integration into the community and/or relieve stress of carers;
 - (d) social, recreational and personal development programmes for PWDs;

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

² Assessment aims at obtaining the profile of service users' baseline functioning in specific area. Re-assessment of service users' functioning level is also counted toward the total number of assessment sessions. Individual/group treatment sessions refer to all direct and hands-on treatment sessions of not less than 45 minutes conducted by therapists to the service users. DSC should review 95% service users with individual training needs in a period of six months.

³ For example, holiday care or home respite service for members on occasional/need basis.

- (e) psychological services⁴ for PWDs with autism or challenging behaviour;
- (f) 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) groups / activities / programmes / training programmes / educational courses / workshops on care skills for the families/carers of PWDs;
- (h) publicity and community education programmes and volunteer services and activities for promoting positive image/social inclusion/community integration, public acceptance towards PWDs and service promotion⁵;
- (i) referrals of PWDs to other welfare service units, medical and health sector or governmental departments for services and assistance as appropriate;
- (j) dissemination of information about community resources through resource corner and visits to special schools;
- (k) Drop-in service⁶ for the public;
- (l) case management service⁷ including needs assessment, formulation of case plan and counselling service for the PWDs and their families/carers, and referrals for community resources;
- (m) day respite service for persons with disabilities from the age of six or above, if any; and
- (n) early intervention with extra care and support services to the Special School Leavers (i.e. students and/or graduates of special schools) and their families/carers (collectively named Target Cases⁸) by Designated Team for Special School Leavers (Designated Team)⁹ to facilitate a smooth transition from the school to community living¹⁰.

⁴ DSC should review 95% of service users with individual psychological needs in a period of six months.

⁵ Through the service promotion programmes/activities or social networking to enhance the local stakeholders' knowledge of DSCs' services, upon identifying needy PWDs in the community, the local stakeholders may bridge needy cases to the DSCs.

⁶ Drop-in service including general enquiries through telephone or visiting the Centre.

⁷ For Target Cases specified in para. 3 (n) and DSC cases, DSC should review case plans at a rate of no less than 95 % of service users and their families/carers (cases) who receive case management service in a period of six months.

⁸ Target Cases are referred to para. 5 (iii) and (iv) and potential special school leavers as agreed by the SWD. DSC should review case plans at a rate of no less than 95% of Target Cases in a period of six months.

⁹ Composed of at least 2 social workers, 1 paramedical staff, 1 support staff and 1 motor driver.

¹⁰ Transition Subsidy is provided in the form of a Central Item for Target Cases to ensure their smooth transition to the community living.

Note: (a), (b), (d) and (g) may be conducted through on-line mode which should be direct service and interactive in nature as endorsed by the supervisor of DSC.

4. Indirect services include:

- (a) explore and establish partnership with other local stakeholders, such as the SWD, rehabilitation service units, medical and health sector and other local organisations to provide appropriate services to PWDs in the community;
- (b) collaborate with different service units in the community to widen Target Cases' opportunities for receiving comprehensive training in independent living skills and/or rehabilitation/vocational training; and
- (c) collaborate with its partners in the community for meeting the service needs of PWDs in the operating district.

Target Service Users and Eligibility Criteria

5. The target service users of DSC are:

- (i) PWDs 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; and
- (ii) The target service users of DC/SD should meet following criteria:
 - (a) For persons with severe intellectual/physical disability -
 - aged between 15 and 59;
 - disability level should be equivalent to those eligible for Care and Attention Home for Severely Disabled Persons 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 not waitlisting for residential care services.
 - (b) For ageing persons with intellectual disability -
 - aged between 15 and 59 (Service Operator should provide justifications 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 attached on the SWD's notification letter on "Social Welfare Subventions for New/ Renewal of Service Contract for Time-defined Project";
 - 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 not waitlisting for residential care services.

- (iii) Special School Leavers who are:
 - (a) students going to graduate from school in no more than 6 months¹¹; and
 - (b) graduates having left¹² schools within 18 months.
- (iv) Families /Carers of PWDs as stated in paragraph 5 (i) to (iii) above.

Referrals

6. PWDs and their families/carers may directly approach the DSC for services. For DC/SD and Designated Team, referrals should be made by social workers to the DSC.

B. Service Performance Standards

Essential Service Requirements

7. The Service Operator must comply with the following Essential Service Requirements-
- (a) the DSC shall operate at least 6 days a week with a minimum of 48 hours per week with full flexibility in order to best fit the needs of service users;
 - (b) the core service hours of DC/SD are Mondays to Fridays, from 9:00am to 6:00pm;
 - (c) the DSC shall have a supervisor who is a registered social worker with recognised degree in social work and social work experience for at least five years; and
 - (d) there must be qualified physiotherapist, occupational therapist, nurse, speech therapist and 4 registered social workers as the essential staff¹³ for the service.

Service Output and Outcome Standards

8. The Service Operator is required to meet the following service performance standards including the service output and service outcome standards:

¹¹ If school social worker consider “boarding students” in need of Designated Team’s service, he/she may refer them to receive service before the student’s leaving school in about 12 months. The period can be counted by the estimated time of student’s last school day.

¹² Persons who have graduated from special schools within 18 months counted by the actual last school day with effect from mid-2024 or later.

¹³ For the flexibility of service provision as well as for those Service Operators which may encounter severe difficulties in engaging qualified therapists, nurses for providing services, the Service Operator may hire qualified physiotherapists/ occupational therapists/ speech therapists/ nurses from qualified professionals or concerned organisations.

Service Outputs

<u>Service Output Standard (OS)</u>	<u>Service Output Indicator</u>	<u>Premises Size/ HBTS¹⁴ Capacity</u>	<u>Agreed Level</u>
1	Total number of service hours provided to meet all the following needs of persons with disabilities (PWDs) in a year¹⁵ (a) personal development needs ¹⁶ (b) social and recreational needs ¹⁵ (c) training needs for enhancing independent living abilities (d) care and/ or support needs	Size 1	37 200 hours
		Size 2	49 600 hours
		Size 3/ 80 HBTS cases	62 000 hours
		120 HBTS cases	87 000 hours
	Occupational Therapy/ Physiotherapy/ Speech Therapy Services		
2	Total number of assessment, individual / group treatment sessions ¹⁷ delivered by therapists in a year	Size 1	954 sessions
		Size 2	1 205 sessions
		Size 3/ 80 HBTS cases	1 456 sessions
		120 HBTS cases	1 706 sessions
		(w.e.f. 1.4.2024)	
3	Total number of group sessions/ activities/ programmes held to meet all the following objectives in a year: (a) to provide support services for families/ carers ¹⁸ of PWDs; (b) through publicity and community education to	Size 1	71 times
		Size 2	92 times

¹⁴ Home-based Training and Support Service.

¹⁵ The service hours provided to meet all the training, care and support needs of PWDs can be counted regardless of whether the relevant services are provided in the form of individual/ group sessions/ activities/ programmes.

¹⁶ **Group sessions/activities/programmes held to meet the personal development, social and recreational needs** for PWDs refer to structured activities conducted for PWDs with objectives of meeting their developmental, social and recreational needs. Each **session** of these programmes should last not less than 1 hour excluding preparation time and follow-up work.

¹⁷ **Assessment aims** at obtaining the profile of service users' baseline functioning in specific area. Re-assessment of service users' functioning level is also counted toward the total number of assessment sessions. **Individual/group treatment sessions** refer to all direct and hands-on treatment sessions of not less than 45 minutes conducted by therapists to the service users. DSC should review 95% service users with individual training needs in a period of six months.

¹⁸ **Support services for families/carers** of PWDs refers to structured activities conducted for the family members or

<u>Service Output Standard (OS)</u>	<u>Service Output Indicator</u>	<u>Premises Size/ HBTS¹⁴ Capacity</u>	<u>Agreed Level</u>
	achieve social inclusion ¹⁹ ; and (c) through networking with local stakeholders and/or service promotion to meet the welfare needs of the persons with disabilities	Size 3/ 80 HBTS cases/ 120 HBTS cases	112 times
(w.e.f. 1.4.2024)			
	Clinical Psychology Service		
4	Total number of therapeutic individual/group sessions delivered in a year ²⁰	Size 1	90 sessions
		Size 2	120 sessions
		Size 3/ 80 HBTS cases / 120 HBTS cases	150 sessions
	Day Care Service for Persons with Severe Disabilities (DC/SD)		
5	Average monthly occupancy rate ²¹ in a year	80 HBTS cases / 120 HBTS cases	90%
6	Rate of reviewing care plan in a period of six months ²²	80 HBTS cases / 120 HBTS cases	100%

carers of PWDs with objectives of strengthening their caring capacities. These services include provision of mutual support groups (e.g. care café), training activities, workshops and educational courses. Each session of these programmes should last not less than 1 hour excluding preparation time and follow-up work.

¹⁹ **Publicity and community education** refers to those programmes organized with objectives of promoting positive image and social inclusion of PWDs; promoting the services of DSC as well as volunteer recruitment. Session/ activity/ programme should last not less than 1 hour excluding preparation time and follow-up work.

²⁰ **Therapeutic individual/ group treatment sessions** refer to both assessment and treatment session. **Assessment** aims at identifying needs and assessing service users' baseline functioning in specific area. Reassessment of service users' functioning levels also included in the counting for the total number of assessment sessions. Individual/group treatment sessions refer to all direct and hand-on treatment sessions of not less than 45 minutes each delivered by clinical psychologist to the service users.

²¹ **Average monthly occupancy rate of DC/SD with capacity of 5 /10/15 places per day**

i. Capacity in the month refers to the total capacity for days opened in the month (Number of days opened x 5 /10/15 places)

ii. Occupancy in the month is counted by head

$$\frac{\text{Number of occupancy in the month (ii)}}{\text{Number of capacity in the month (i)}} \times 100\%$$

²² **Rate of reviewing care plan of day care service need in a period of six months**

$$\frac{\text{Number of care plans reviewed in the six-month period}}{\text{Number of care plans due for review in the six-month period}} \times 100\%$$

Rate of reviewing care plans should be calculated on a half-yearly basis, covering two periods, i.e. April to September or October to March. For initial needs assessments, they should not be regarded as reviews of care plans. For drop-out cases within the reporting period, they should not be counted.

<u>Service Output Standard (OS)</u>	<u>Service Output Indicator</u>	<u>Premises Size/ HBTS¹⁴ Capacity</u>	<u>Agreed Level</u>
	Case Management Service		
7	Monthly average number of cases receiving case management service with agreed case plan ²³ in a year	Size 1	66
		Size 2	88
		Size 3/ 80 HBTS cases / 120 HBTS cases	110
8	a. Monthly average number of counselling session ²⁴ for DSC cases in a year; and	Size 1	48
		Size 2	64
		Size 3/ 80 HBTS cases / 120 HBTS cases	80
	b. Monthly average number of office interview or home visit ²⁵ / school visit ²⁶ conducted to the Target Cases by social workers in a year	Size 1/ Size 2/ Size 3/ 80 HBTS cases/ 120 HBTS cases	6 times (w.e.f. 1.4.2024)
9	Monthly average number of Target Cases ²⁷ in a year	Size 1/ Size 2/ Size 3/ 80 HBTS cases/ 120 HBTS cases	14-30
10	Number of consultation ²⁸ provided to school personnel, social workers, teachers, carers and Special School Leavers and other work partners for Target Cases in a year	Size 1/ Size 2/ Size 3/ 80 HBTS cases/ 120 HBTS cases	500 session/ times

²³ **Case plan** refers to the case plan formulated with the disabled persons and/or their family members who receive case management service. The case plan should include four components: i) a plan worked out between the case manager and the disabled persons and/or their family members with agreed direction on a feasible rehabilitation plan; ii) a specific time frame for achieving the plan; iii) specific actions to be taken by the case manager, the disabled persons and/or the family members in working together towards the agreed targets; iv) output/outcome evaluation.

²⁴ **Counselling Session** refers to the session through face-to-face interview or home visit to DSC cases with each session last for at least 30 minutes.

²⁵ **Office interview or home visits** of Designated Team shall last for at least 30 minutes.

²⁶ The number of school visits shall be counted according to the number of Target Cases involved. For example, if there are two Target Cases involved in one school visit, the number of school visits will be counted 2.

²⁷ **Target Cases** should not duplicate with OS 7 and refer to PWDs and/or their family members/carers going to live/living in the community who face transition issue in the coming months. If the target case is in need of extension of follow-up services beyond 18 months upon graduation, this case should be reviewed by Designated Team in every three months.

²⁸ The consultation (should be at least 3 minutes) can be delivered in the form of face-to-face, online or telephone for Target Cases.

Service Outcomes

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

<u>Service Outcome Standard (OC)</u>	<u>Service 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%

Service Outcome Standard for Case Management Service

i. Service Users

<u>Service Outcome Standard (OC)</u>	<u>Service 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>Service Outcome Standard (OC)</u>	<u>Service 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%

Service Quality Standards

9. The Service Operator shall meet the requirements of the 16 Service Quality Standards .

C. Subvention

10. The Service is subvented by the SWD under the Lump Sum Grant Subvention System for a time-defined period. The Service Operator is required to observe the guidelines and rules of subvention as set out in the latest Lump Sum Grant Subvention Manual, circulars, management letters and relevant correspondence issued by the SWD. The Government will not accept any liabilities or financial implications arising from the Service other than the amount of subvention as approved by the SWD. The basis of subvention is set out in the offer and notification letter issued by the SWD to the Service Operator.

11. The amount of subvention has taken into account the personal emoluments of staff, including provident fund for employing qualified professionals and supporting staff, and other charges (covering all other relevant operating expenses including programmes, air-conditioning, travelling and vehicles-related expenses, central administration, employees' compensation insurance and public liability insurance, etc.) applicable to the operation of the Service and recognised fee income, if any. Rent and rates in respect of the premises recognised by the SWD for delivery of the Service will be reimbursed separately on an actual cost basis. Subvention for the Designated Team is subject to adjustment by the SWD with regard to any change in the number of special schools allocated.

12. Upon the Service Operator's acceptance of the Funding and Service Agreement (FSA), payment of subventions will be made on a monthly basis.

D. Validity Period

13. 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 the SWD, the SWD may after expiry of such notice, terminate this FSA by giving 30 days' notice in writing to the Service Operator.

14. Where there is any change to the performance standards within the agreement period, the 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.

15. 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. The SWD reserves the right to reallocate the Service.

16. The SWD may immediately terminate the FSA upon the occurrence of any of the following events –

- (a) the Service Operator has engaged or is engaging in acts or activities that are likely to constitute or cause the occurrence of offences endangering national security or which would otherwise be contrary to the interest of national security;
- (b) the continued engagement of the Service Operator or the continued performance of the FSA is contrary to the interest of national security; or
- (c) the SWD reasonably believes that any of the events mentioned above is about to occur.

E. Others

17. Apart from this FSA, the Service Operator shall also comply with the requirements/commitments set out in the Service Specifications, and the Service Operator's proposals and supplementary information, if any. When these documents are in conflict, this FSA shall prevail.