



Ministry of  
Children and Family  
Development

## Specialized Homes and Support Services (SHSS) Low Barrier Short Term Stabilization Care (LBSTSC) Services Contract Term Sheet

<b>Parties</b>	The Province as represented by an Administrator of the Child, Family and Community Services Act (the "Director"), and the Service Provider
<b>Contract Structure</b>	<ul style="list-style-type: none"> <li>• 133 Pages</li> <li>• 23 Articles</li> <li>• 12 Schedules <ul style="list-style-type: none"> <li>Schedule "A" Definitions</li> <li>Schedule "B" Services</li> <li>Schedule "C" Outcomes Architecture and Performance Management</li> <li>Schedule "D" Personnel Requirements</li> <li>Schedule "E" Policies and Standards</li> <li>Schedule "F" Fees and Pricing Model</li> <li>Schedule "G" Governance, Stewardship and Relationship</li> <li>Schedule "H" Agreement and Services Amendment Processes</li> <li>Schedule "I" Insurance</li> <li>Schedule "J" Privacy Protection</li> <li>Schedule "K" Transition-In Services</li> <li>Schedule "L" Exit Management</li> </ul> </li> </ul>
<b>Purpose of Term Sheet</b>	To provide an overview of the SHSS LBSTSC Services Contract and associated costs.
<b>Background Information</b>	<p>In 2019, the ministry integrated data across government to pull together a comprehensive picture of the children and youth in contracted bed-based services. This data confirmed that the needs of children and youth in care, and specifically of those living in contracted resources are increasing. In addition, it confirmed that children and youth in contracted resources experience higher rates of mental-health challenges, hospitalization, diagnosed support needs and placement breakdowns than other children and youth in care.</p> <p>In response, the Ministry engaged in service design workshops and worked with stakeholders to design a revised approach to Specialized Homes and Support Services (formerly known as Contracted Residential Services). This includes a future state where contracted resources play a very distinct role in the network of care by providing one or more of the following four key services: Respite Care, Emergency Care, Low-Barrier Short Term Stabilization Care, and Specialized Long-Term Care.</p>
<b>Deal Description</b>	This term sheet is for one of four services / contract types for SHSS. Low Barrier Short Term Stabilization Care Services provides culturally safe, individualized supports for children and youth who are experiencing a

	<p>crisis and/or breakdown of their living environment (family, Out-of-Care arrangement or In Care placement).</p> <p>Schedule B (Services) sets out obligations, terms and conditions related to the following:</p> <ul style="list-style-type: none"> <li>• Service Capacity/ #children/youth in the Care Setting receiving the Services</li> <li>• Service Duration</li> <li>• Service Delivery Principles</li> <li>• Overview – Phases of the Core LBSTSC Services</li> <li>• Transition-In, Crisis-Mitigation and Stabilization Phase</li> <li>• Preparation for Transition-Out Phase</li> <li>• Placement</li> <li>• Core Service Planning Principles</li> <li>• SHSS Service Plan</li> <li>• Care Plan</li> <li>• My Support Plan</li> <li>• Collaboration with the Director, SHSS Care Circle and Community</li> <li>• Convening the SHSS Care Circle</li> <li>• Support for everyday living</li> <li>• Supplemental Supports</li> <li>• Clinical Consultation</li> <li>• Transition and Discharge</li> <li>• Key Service Requirements</li> <li>• Intended Outcomes and System-Wide Outcomes</li> <li>• Care Setting Key Requirements</li> <li>• Continuous Improvement Plan (CIP)</li> </ul>
<p><b>Outcomes Architecture and Performance Management</b></p>	<p>The SHSS LBSTSC Contract includes an Outcomes Architecture for measuring performance from the Service Provider.</p> <p>The Architecture consists of five Intended Outcomes for LBSTSC Services. Achievement of these Outcomes is via 8 Indicators. 19 Performance Standards are related to the Indicators. Success in the 19 Performance Standards indicates achievement of the Intended Outcomes.</p> <p>Schedule C includes detail on the targets, methodology, and frequency of measurement for each of the 19 Performance Standards</p> <p>The Outcomes and Indicators are shown in the table below:</p>

	<table border="1"> <thead> <tr> <th colspan="5">Intended Outcomes</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> </tr> </thead> <tbody> <tr> <td>Crisis is mitigated and/or improved stability and wellbeing for child/youth</td> <td>Children/youth experience safety and improved wellbeing</td> <td>Child/youth's attachment and emotional ties to family and other supportive relationships is improved</td> <td>Child/youth is able to move or return to a stable living environment at discharge from Low-Barrier Short-Term Stabilization Care</td> <td>Child/youth and family have supports in place for continued stabilization upon discharge</td> </tr> <tr> <th colspan="5">Indicators</th> </tr> <tr> <td>A. Day-to-day functioning of the child/youth is improved  B. Child/youth believes/assesses the crisis is improved</td> <td>A. Improved experience of day-to-day wellbeing for child/youth</td> <td>A. Self-assessed quality of relationships with parents/Guardians, caregivers and/or Out-of-Care providers, and extended family and community, is maintained or increased  B. Self-reported feelings of belonging, positive relationships and attachment</td> <td>A. Child/youth returns home  B. Child/youth transition to a stable alternative living arrangement</td> <td>A. (Re)connection to community supports and services</td> </tr> </tbody> </table>	Intended Outcomes					1	2	3	4	5	Crisis is mitigated and/or improved stability and wellbeing for child/youth	Children/youth experience safety and improved wellbeing	Child/youth's attachment and emotional ties to family and other supportive relationships is improved	Child/youth is able to move or return to a stable living environment at discharge from Low-Barrier Short-Term Stabilization Care	Child/youth and family have supports in place for continued stabilization upon discharge	Indicators					A. Day-to-day functioning of the child/youth is improved  B. Child/youth believes/assesses the crisis is improved	A. Improved experience of day-to-day wellbeing for child/youth	A. Self-assessed quality of relationships with parents/Guardians, caregivers and/or Out-of-Care providers, and extended family and community, is maintained or increased  B. Self-reported feelings of belonging, positive relationships and attachment	A. Child/youth returns home  B. Child/youth transition to a stable alternative living arrangement	A. (Re)connection to community supports and services
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<p><b>Budget for LBSTSC Services</b></p>	<p>Costs are based on a "Contract Maximum" for the Term including all extensions.</p> <p>The "Annual Maximum As Needed Amount" is the maximum amount that may be paid for "Additional Supports" which includes "Supplemental Supports" and Clinical Consultation</p> <p>Administration Fees are 10% of the Annual Maximum and applicable to costs in the Monthly Amount (except for Facility Costs) and As Needed Amounts.</p>																									
<p><b>Operational Cost Structure</b></p>	<p>This Agreement is structured around specific categories of costs and expenses in respect of which the Director will reimburse the Service Provider for its delivery of the LBSTSC Services. These categories include:</p> <ol style="list-style-type: none"> <li>1. The Monthly Amount: <ul style="list-style-type: none"> <li>• Wages and Benefits</li> <li>• Program Costs</li> <li>• Administration Fee (For Wages &amp; Benefits / Program Costs)</li> <li>• Facility Costs</li> </ul> </li> <li>2. As Needed Amounts <ul style="list-style-type: none"> <li>• Supplemental Supports</li> <li>• Clinical Coordination</li> <li>• Administration Fee</li> </ul> </li> </ol> <p>If the Service Provider is providing services under other SHSS Contracts (e.g. LBSTSC and SLTC), Facility Costs will only be paid according to the earliest contract, and not more than once for a single care setting.</p>																									

<p><b>Payment Model</b></p>	<p>The Monthly Amount will be paid to the Service Provider on the 15th of each month.</p> <p>If a bed has been vacant for a period greater than 90 days, some Program Costs (the “Occupancy Based Variable Amounts”) will not be paid</p> <p>As Needed Amounts will be paid within 30 days of the Service Provider invoicing the Director.</p>
<p><b>Transition-In Services</b></p>	<p>Within 5 days of the Effective Date, the Service Provider is required to provide its Transition-In plan to the Director.</p> <p>The Transition-In plan should be of a duration of no greater than 90 days from the Effective Date, by which the Transition-In Services should be completed.</p>
<p><b>Dispute Resolution</b></p>	<p>The Contract stipulates that disputes will be referred to and resolved in accordance with the MCFD Conflict Resolution Protocol, which is external to the Contract</p> <p>This Protocol includes a three-stage resolution process.</p> <p>Each stage requires both parties to provide a decision-making authority, with stage three being the most senior authority from each party (Deputy Minister for the Province).</p> <p>Disputes that cannot be resolved via this process would then go to mediation / arbitration, with costs to be shared equally between the parties.</p>
<p><b>Insurance</b></p>	<p>Service Provider is required to carry insurance of no less than \$2M for each of the following:</p> <ul style="list-style-type: none"> <li>• General Commercial Liability</li> <li>• Professional Liability</li> <li>• Automobile Liability</li> </ul>