

Specialized Homes and Support Services (SHSS) Respite Care (RC) - Contract Term Sheet

Parties	The Province as represented by the "Director", as Administrator of the Child, Family and Community Services Act, and the Service Provider	
Contract Structure	 128 Pages 23 Articles 12 Schedules Schedule "A" Definitions Schedule "B" Services Schedule "C" Outcomes Architecture and Performance Management Schedule "D" Personnel Requirements Schedule "E" Policies and Standards Schedule "F" Fees and Pricing Model Schedule "G" Governance, Stewardship and Relationship Schedule "I" Insurance Schedule "J" Privacy Protection Schedule "K" Transition-In Services Schedule "L" Exit Management 	
Purpose of Term Sheet	To provide an overview of the SHSS RC Contract and associated costs.	
Background Information	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. 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.	
Deal Description	This term sheet is for one of four services / contract types for SHSS. Respite Care Services are set of family preservation services that provide a culturally safe, developmentally appropriate, and structured environment outside of the primary living arrangement for children and youth with varying complex needs. Schedule B (Services) sets out obligations, terms and conditions related to the following:	

	 Service Capacity / #children/youth in the Care Setting receiving the Services Service Duration Care Setting Service Delivery Principles Placement Core Service Planning Principles SHSS Service Plan Care Plan My Support Plan Collaboration with the Director, SHSS Care Circle and Community Supporting Parents/Guardians, Caregivers and/or Out-of-Care Providers Convening the SHSS Care Circle Support for everyday living Supplemental Supports Clinical Consultation Transition and Discharge Key Service Requirements Intended Outcomes and System-Wide Outcomes Care Setting Key Requirements Continuous Improvement Plan (CIP) 	
Outcomes Architecture and Performance Management	 The SHSS RC Contract includes an Outcomes Architecture for measuring performance from the Service Provider. The Architecture consists of three Intended Outcomes for RC Services. Achievement of these Outcomes is via 5 Indicators. 18 Performance Standards are related to the Indicators. Success in the 18 Performance Standards indicates achievement of the Intended Outcomes. Schedule C includes detail on the targets, methodology, and frequency of measurement for each of the 18 Performance Standards The Outcomes and Indicators are shown in the table below: 	

		Intended Outcomes		
	1	2	3	
	Improved overall family	Children/youth experience	Child's/youth's attachment and	
	functioning supports ongoing	safety and improved wellbeing	emotional ties to family and	
	care for the child/youth		other supportive relationships	
			is improved.	
		Indicators		
	A. Parents/Guardians,	A. Improved experience of	A. Self-assessed quality of	
	caregivers and/or Out-of-Care	day-to-day wellbeing for	relationships with	
	providers report that they have	child/youth	parents/Guardians, caregivers	
	the ability to provide ongoing		and/or Out-of-Care providers,	
	care for the child/youth		and extended family, and	
	(maintaining or improvement)		community is maintained or	
			increased	
	B. Decrease in children/youth			
	coming Into Care		B. Contact with family,	
			community and friends is	
			facilitated and supported by the	
			Service Provider	
Services	 extensions. The "Annual Maximum As Needed Amount" is the maximum amount that may be paid for "Additional Supports" which includes "Supplemental Supports" and Clinical Consultation Administration Fees are 10% of the Annual Maximum and applicable to costs in the Monthly Amount (except for Facility Costs) and As Needed Amounts. 			
Operational Cost Structure	 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 RC Services. These categories include: The Monthly Amount: Wages and Benefits Program Costs Administration Fee (For Wages & Benefits / Program Costs) Facility Costs 2. As Needed Amounts Supplemental Supports Clinical Coordination Administration Fee 			
	If the Service Provider is providing services under other SHSS Contract RC and SLTC), Facility Costs will only be paid according to the earliest co and not more than once for a single care setting.			
Payment Model	The Monthly Amount will be paid to the Service Provider on the 15th of each month.			ch
	If a bed has been vacan Costs (the "Occupancy		an 90 days, some Program	

	As Needed Amounts will be paid within 30 days of the Service Provider invoicing the Director.			
Transition-In Services	Within 5 days of the Effective Date, the Service Provider is required to provide its Transition-In plan to the Director.			
	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.			
Dispute Resolution	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			
	This Protocol includes a three-stage resolution process.			
	Each stage requires both parties to provide a decision-making authority, wis stage three being the most senior authority from each party (Deputy Minister for the Province).			
	Disputes that cannot be resolved via this process would then go to mediation / arbitration, with costs to be shared equally between the parties.			
Insurance	Service Provider is required to carry insurance of no less than \$2M for each of the following:			
	 General Commercial Liability Professional Liability Automobile Liability 			