South West Community Support Services Support and Developmental Council

Supporting People in Home and Community

South West Local Health Integration Network Community Support Services (CSS) Flexible Short-Term Fund

GUIDELINES

The South West Local Health Integration Network (SW LHIN) has created a time-limited and flexible pool of annualized funding resources (\$231,745.00 19/20) to meet unexpected and/or transitional needs of clients of CSS LHIN-funded organizations in the SW LHIN to assist individuals to remain in their homes, to prevent hospitalization and/or prevent premature admission to a Long Term Care Facility. These funds are limited to \$231,745.00 (19/20) annually and only available to an individual on a temporary basis. These funds are accessible across the 7 counties to LHIN funded Community Support Services (CSS) agencies in the SW LHIN (Grey/Bruce, Huron, Perth, Oxford, Elgin, Middlesex). The South West Community Support Service Council is accountable for the allocation of the funds. Once the funds are depleted the fund will not be renewed until the new fiscal year beginning April 1st.

Flexible Short-Term needs will be defined as one or more of the following:

- The individual is without a safe place to stay because their current home is no longer safe or available and the situation can be rectified within 3 months;
- Resources are required on a time limited basis to stabilize placement, or to maintain a
 person in their own home and prevent a discharge to a potentially more costly resource;
- Primary caregivers are unable to provide care;
- Short term support can prevent family or support breakdown or institutionalization;
- The individual requires equipment (not covered by Assistive Devices Program) due to changing needs. Three quotes are required for equipment over \$ 2,000.00. If an organization is unable to obtain three quotes an explanation of the reason must be included in the application.
- The individual needs temporary support for a variety of reasons which might include:
 - Making a transition to other supports:
 - > Needs have increased and an increase in support for a temporary time will allow the service providers to negotiate a change in the plan of service;
 - An increase in service due to illness of the individual and/or caregiver;
 - An individual's service needs have been identified but the recommended or preferred program destination does not have an immediate opening but an opening/vacancy will be available within 3 months.

The funds will be used to implement interim support plans. All local and available resources must have been investigated and exhausted prior to requesting these funds.

The funds will not be used for subsidy for 3 months to delay using agency subsidy dollars nor are they used to subsidize 100% of meal or transportation costs. Home renovations will be considered if i) they improve accessibility and ii) this is the individual's permanent residence. The CSS Council will use their discretion in these decisions based on the utilization of the fund in a given year.

If the funds have been used to purchase equipment, that equipment becomes the property of the individual and is theirs to maintain. (See page 4 for client signature). If the equipment is no longer needed the equipment cannot be sold for personal or estate gain but should be donated to a non-profit organization or an equipment pool so another person can benefit.

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Some applications may include more than one CSS agency either in the provision of immediate service or the transition plan post 3 months. If so a joint application is required and the payment must be directed to the primary agency providing the services being funded.

Interim support plans may be resources for a period up to three (3) months, and in exceptional circumstances upon review, an additional extension of up to three months may be granted. Any requests for extension requires submission of a new application indicating request for extension.

Currently, there are no limits imposed on the amount of funding that may be approved, or the number of times an agency may request funding, however, an eventual sustainable service commitment to the client must be part of the plan. The need for this support may originate anywhere in the community or service system but only LHIN-funded SW CSS agencies will be approved for funding and the individual must be accessing a community support service program.

PROCESS TO ACCESS THE FUND

The funds will be kept (in trust) with Cheshire Homes of London Inc. (Cheshire) as pay master. Documentation needed to access the fund will be completed and forwarded to Cheshire. Cheshire will ensure that the individual's request for funding will be on the agenda of the next regularly scheduled CSS Council Meeting.

<u>If a situation requiring flexible short-term funds is too urgent to await the next scheduled CSS</u> Council meeting:

- Cheshire will forward the request to the CSS Council members.
- Cheshire will notify the CSS agency contact person who has submitted the request when a
 decision has been rendered by a majority of the council members.

If a situation requiring flexible short-term funds is too urgent to await confirmation, even by email from the CSS council, the CSS council, in its sole discretion, may approve retroactive reimbursement to an agency who has had to provide immediate assistance to an individual.

An example of this would be a situation that occurs on a Friday evening and agency staff must make an immediate decision to increase staffing (for example) to ensure the safety of the client or to prevent hospitalization and/or institutionalization. In the event that the CSS agency has made this decision and asked for retroactive reimbursement the CSS Council cannot guarantee that the request would be approved.

Appeals can be directed to the Co-Chairs of the CSS Council in writing within 15 calendar days of application denial. Appeals must include detailed description of reason for appeal. An appeal will be considered by 3 CSS Council members and 2 additional CSS members who will be identified at the beginning of each fiscal year.

Cheshire will provide a summary of requests to the CSS Council quarterly.

PLEASE SUBMIT YOUR REQUEST TO:

Cheshire

2 – 1111 Elias St., London, Ontario N5W 5L1

Toll Free Phone: 1-800-265-4758; Local Phone: 519 439-4246 ext. 226

Email: info@cheshirelondon.ca

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APPLICATION for CSS Flexible Short-Term Funds

Is this a joint application? ☐ Yes ☐		
If yes, please note that all agencies need to sign off on this application. If yes, the request agency must be the agency that the payment will be directed to.		
if yes, the request agency must be the agency that the payment will be directed to.		
Please complete the following information so we know where and to whom to send the		
cheque and the name of the organization that the cheque is payableto.		
Name of Requesting Agency:		
Name of Person Submitting Request:		
Contact Mailing Address:		
Contact Phone #:		
County of Residence of Client:		
,		
Brief Client Profile:		
Her an application bear made on bake	If af this in dividual hafana	
Has an application been made on behalf of this individual before?		
☐ Yes, an extension of a previous request is being made☐ Yes, but this is a new request		
□ No		
2 110		
Reason for the request for flexible show	rt-term funds	
	ce to stay because their current home is no longer	
safe or available and the situation		
☐ Resources are required on a time	limited basis to stabilize placement, or to maintain a	
	rent a discharge to a potentially more costly resource;	
☐ Primary caregivers are unable to provide care;		
	nily or support breakdown or institutionalization;	
☐ The individual needs temporary support for a variety of reasons which might include:		
Making a transition to other		
	an increase in support for a temporary time will allow	
	gotiate a change in the plan of service; to illness of the individual and/or caregiver;	
	ds have been identified but the recommended or	
	ion does not have an immediate opening but an	
opening/vacancy will be av	i U	
	(that is not covered by ADP) due to changing needs.	
Notes:	, , , , , , , , , , , , , , , , , , , ,	

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Amount and details of funding being requested service, length of time service requested, amount and details of funding being requested service, length of time service requested, amount and details of funding being requested services.	
What services and supports are currently in pla	ace :
What local and available resources have been please explain:	investigated and exhausted? If none,
If staffing is required, identify the organization contact person and information:	that will be providing the staffing and
For the Client (Equipment Requests only): I acknowledge that the CSS Council has no responsit	pility for the maintenance or repair of this equipment
Signature of Client	Date
Signature of Applicant Submitting Request	Date
Signature of Applicant's Supervisor	 Date
Signature of Joint Applicant	 Date

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OFFICE USE ONLY - TO BE COMPLETED BY CSS COUNCIL MEMBER	
Name(s) of CSS Council Members Contacted:	
Declaration of Conflict of Interest of any CSS Council Members:	
REVIEW DATE:	
TOTAL FUNDING APPROVED:	
SIGNATURE OF CSS COUNCIL CO-CHAIR	