

# Halton Support Services

Driving innovation and excellence in specialized services  
for individuals with developmental disabilities

## HALTON SUPPORT SERVICES **PAYMENT SCHEDULE 2017-2018** Special Services At Home

Invoices are due on the "Invoice Due Date" to be eligible for payment on direct deposit dates. Invoices received after the "Invoice Due Date" each month will be processed the following month. Payments are made by direct deposit. If you have not previously received direct deposit please provide a void cheque or direct deposit slip (obtainable at your bank) for the person we are paying along with the invoice.

INVOICE DUE DATE	DIRECT DEPOSIT DATE
Friday May 5, 2017	Thursday May 25, 2017
Friday June 2, 2017	Monday June 26, 2017
Wednesday July 5, 2017	Tuesday July 25, 2017
Monday August 7, 2017	Friday August 25, 2017
Friday September 1, 2017	Monday September 25, 2017
Thursday October 5, 2017	Wednesday October 25, 2017
Tuesday November 7, 2017	Monday November 27, 2017
Friday December 1, 2017	Thursday December 28, 2017
Friday January 5, 2018	Thursday January 25, 2018
Monday February 5, 2018	Monday February 26, 2018
Thursday March 1, 2018	Monday March 26, 2018
Thursday March 1, 2018 Please predetermine the hours for the whole month of March. Complete a separate invoice and submit by March 1, 2018. Payments for March hours will be made in April 2018.	Wednesday April 25, 2018

**INVOICES AND TIME SHEETS CAN BE FAXED, E-MAILED, MAILED OR DROPPED OFF AT:**

Halton Support Services  
53 Bond St, Oakville, Ontario, L6K 1L8

Phone: 905-844-7864 x434 Fax: 905-849-6980

E-mail: [hssinfo@cwsds.ca](mailto:hssinfo@cwsds.ca)

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## HALTON SUPPORT SERVICES- TRANSFER PAYMENT AGENCY SPECIAL SERVICES AT HOME FUNDING

### INSTRUCTIONS FOR PARENTS/GUARDIANS AND WORKERS REGARDING THE COMPLETION OF INVOICES

- All invoices follow the guidelines for Special Services at Home directed by the Ministry of Community and Social Services
- Invoices are processed by Halton Support Services once a month. Please refer to the enclosed payment schedule for dates.
- Complete all identifying information. On each invoice, please include your name, address and telephone number along with signatures from parent/guardian and worker, as proof of service delivery.
- Please note that the payments for worker's services will be made directly to the parents /legal guardians only.
- It is important that you complete a line for each day worked. (I.e. if you worked one week and are authorized to work 2 hours, 5 days a week, you should have 5 entries of 2 hours each).
- Halton Support Services makes payment by direct deposit. **If you have not previously received direct deposit please provide a void cheque or direct deposit slip** (obtainable at your bank) for the account of the Parent/guardian who is being paid.
- Parents/guardians are required by the Ministry to keep programming and financial records related to the provision of their Special Services at Home contract. They must make these records available to the Ministry as required.
- Invoices and direct deposit information can be faxed, e-mailed, mailed or brought into our office.
- Halton Support Services will not be able to reimburse for any fees beyond the authorized amount allocated by the Ministry of Community and Social Services.
- It is the responsibility of parents/guardians to keep a record of the balance of their family member's allotment. It is important that Parents/guardians inform their support workers to keep a record of their payments. The Ministry of Social Services do not issue copies of the invoices or T4 slips, as workers are considered self-employed.

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## HALTON SUPPORT SERVICES Transfer Payment Agency – Special Services at Home Letter of Understanding

2017 – 2018

This 'Letter of Understanding' is to ensure that families/guardians are aware that workers are not employees of Halton Support Services.

The family/guardian is responsible for ensuring their satisfaction with the worker initially before engaging them. Once the worker is engaged, it is the family's/guardians responsibility to monitor the performance of the worker and to ensure the worker is meeting the requested expectations.

For service provided, the undersigned hereby agrees to waive any claims, actions or proceedings of any kind against Halton Support Services or Central West Specialized Developmental Services or any of their respective directors, officers, members, employees, agents, divisions, predecessors, successors or assigns (hereinafter collectively referred to as the 'Released') arising out of or as a result of my/our participation in or involvement with Special Services at Home Program, including, but not limited to, my/our use of service providers funded through this program. The undersigned hereby agree to release the Released from any such claims, actions or proceedings.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Name of Individual Receiving Support \_\_\_\_\_  
(Please Print)

Signature of Parent/Guardian \_\_\_\_\_

Please return to: Halton Support Services  
53 Bond Street  
Oakville, ON L6K 1L8  
Phone: 905-844-7864/1-800-600-2013  
Fax: 905-849-6980  
E-mail: hssinfo@cwsds.ca