LEGISLATIVE COUNCIL PANEL ON WELFARE SERVICES

Central Waiting List for Subsidized Long Term Care Services for the Elderly

PURPOSE

This paper updates Members on the implementation of the Standardized Care Need Assessment Mechanism for Elderly Services (SCNAM(ES)), and the progress made in establishing a central waiting list (CWL) for all subsidized long term care (LTC) services.

BACKGROUND

2. The SCNAM(ES) (then called the Gate-keeping Mechanism for Elderly Services) has been implemented by phases. When SCNAM(ES) commenced in November 2000, it covered only residential care services, namely homes for the aged (H/As), care and attention (C&A) homes and nursing homes (NHs). From June 2001, SCNAM(ES) applied also to community support services including enhanced home and community care services (EHCCS), day care centres for the elderly (D/Es), and personal/nursing services as applicable under home help service and home care service.

3. In April 2001, a questionnaire survey was conducted on the advice of the Steering Committee on the Implementation of SCNAM(ES) to collect feedback from

accredited assessors, caseworkers, officers-in-charge and service providers as well as service users on the implementation of the mechanism. The survey results showed satisfactory response as to clarity and comprehensiveness of the operational procedures, including the provision of information on the assessment results by the accredited assessors. Elders who went through the assessments also responded positively to the mechanism.

4. In November 2001, another review of the mechanism was conducted particularly on the effectiveness of including community support services. The results indicated positive feedback by both the professionals and staff involved and the service users. They also showed increasing acceptance of the mechanism as a tool to help ascertain the impairment levels and service needs of the service users, which in turn facilitates the formulation of care plans.

5. In the light of the positive implementation experience of SCNAM(ES) as described in paragraphs 3 and 4 above, we are in the process of establishing a single entry point, i.e. a CWL, for subsidized LTC services as pledged in the 2001 Policy Address Booklet on Care for Elders. The Social Welfare Department (SWD) is enhancing its computer system in order to facilitate centralized registration of both residential and community care services. SWD has made good progress and we plan to put CWL in place in August/September 2003 after conducting briefings to parties concerned.

CENTRAL WAITING LIST (CWL)

Objectives

6. At present, applications for residential care services are centrally administered by SWD, whereas applications for different types of home and community care services are managed by different parties, including

non-governmental organizations and SWD's SCNAM(ES) Offices. This situation is not satisfactory in particular from the point of view of elders who are required to approach different service units in order to apply and waitlist for different services.

7. CWL aims to centralize applications for all subsidized LTC services under the umbrella of SWD. In doing so, we aim to streamline the existing application and placement processes. Elders will no longer need to go through multiple registration and assessment procedures, or to queue up for LTC services not suitable for their needs.

Scope

8. To reflect recent developments in the provision of home and community care services as well as residential care services, the CWL will cover the following services -

- (a) Community care services
 - (i) Integrated Home Care Services (IHCS) in respect of frail cases with moderate and severe levels of impairment
 - (ii) EHCCS
 - (iii) D/Es
- (b) Residential care services
 - (i) H/As (for applicants prior to 1 January 2003)
 - (ii) C&A Homes
 - (iii) NHs

9. As reported to Members on 21 January 2003, SWD has recently completed a major re-engineering exercise of a wide range of community support services for elders. We have upgraded 138 Home Help Teams to Integrated Home Care Services Teams to take care of frail elders. For both healthy and frail elders, we have upgraded 35 Multi-services Centres for the Elderly to District Elderly Community Centres (DECCs) and established another five DECCs, and upgraded 110 Social Centres for the Elderly to Neighbourhood Elderly Centres (NECs) and established another four new NECs. The new enhanced home and centre based services will be provided in phases within 2003-04. Furthermore, an in-situ expansion of D/Es with a total increase of 220 places by July 2003 was conducted to enhance the functions and caring capability of D/Es to look after frail elders, including those with dementia.

10. We briefed Members on the progress made in phasing out self-care hostels and H/As on 14 April 2003. SWD has ceased accepting applications for waitlisting for admission to self-care hostels and H/As as from 1 January 2003. For applicants for these services on and after that date, caseworkers will assess their needs and make prompt and direct referral for community support services and housing assistance as appropriate. For elders already on the waiting lists for self-care hostels and H/As as at end December 2002, and who choose to remain on the waiting lists rather than receive alternative community support services, SWD will arrange placement for them when vacancies arise subject to the assessment result under SCNAM(ES).

11. Elders with the service matching result of 'beyond NH' will either be referred to nursing homes, subject to the agreement of the NHs and the elders concerned, or referred for waitlisting of infirmary service under the Hospital Authority. We are now conducting a review on the provision of infirmary care, including the feasibility of transferring infirmary service from the hospital setting to a non-hospital setting. Our longer term objective is to achieve continuum of care up to infirmary level in our LTC system and to incorporate infirmary care services into CWL.

Arrangements

12. The arrangements for new applicants upon implementation of CWL are as follows -

- (a) applicants will no longer need to indicate a specific service or approach different organizations. Rather, they will apply to a single point for subsidized LTC services, and appropriate services will be arranged according to the assessment results;
- (b) assessment will be conducted for elders at the time when they apply for LTC services. Those assessed to have care needs (i.e. impairment levels moderate and above) will be registered on CWL and provided with or waitlisted for the appropriate services as applicable. Elders assessed to have no care needs (i.e. no or low impairment levels) will be referred to other district-based support services as appropriate, e.g. home help under IHCS, DECC, NEC, elderly health centre, counselling, outreaching service for the elderly, etc.; and
- (c) to encourage ageing in place, applicants who wish to stay at home will be given the choice of community care service, even if matched to any residential care service.

13. The new arrangements described in paragraph 12(a) and (b) above will not apply to applicants already on existing waiting lists for residential and community care services prior to implementation of CWL. Their applications will be automatically transferred to the new system. In line with current practice, these applicants will undergo assessment when they are called for admission to the services which they waitlist for, and the appropriate services arranged in accordance with the assessment results.

14. We briefed the Elderly Commission about the implementation of CWL at its meeting held on 23 June 2003. Members of the Elderly Commission consider CWL a right move and support the arrangement to ascertain elders' care needs before registering them on the CWL for allocation of or waitlisting for the appropriate LTC services.

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NEXT STEPS

15. SWD is drawing up a manual of procedures for caseworkers and service providers in respect of CWL. A briefing on CWL arrangements for service providers is scheduled to be held on 4 July 2003. In addition, SWD will brief the Working Group and Steering Committee on the Implementation of SCNAM(ES) and frontline workers in the next couple of months, prior to implementation of CWL. Progress on implementation of CWL will be reported to Members in due course.

ADVICE SOUGHT

16. Members are invited to note the progress made in respect of SCNAM(ES) and CWL.

Social Welfare Department July 2003