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Legislative Council

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**Report of the Panel on Welfare Services
for submission to the Legislative Council**

Purpose

This report gives an account of the work of the Panel on Welfare Services (the Panel) during the 2003-2004 Legislative Council (LegCo) session. It will be tabled at the Council meeting on 30 June 2004 in accordance with Rule 77(14) of the Rules of Procedure.

The Panel

2. The Panel was formed by a resolution of this Council on 8 July 1998 and as amended on 20 December 2000 and 9 October 2002 for the purpose of monitoring and examining Government policies and issues of public concern relating to welfare services matters.
3. The terms of reference of the Panel are in **Appendix I**.
4. The Panel comprises 16 members, with Hon CHAN Yuen-han and Dr Hon LAW Chi-kwong elected as Chairman and Deputy Chairman of the Panel respectively. The membership list of the Panel is in **Appendix II**.

Major work

Support measures for Severe Acute Respiratory Syndrome (SARS) patients and their families in the context of the outbreak from March to June 2003

5. The Administration announced its plan in October 2003 to seek the Finance Committee (FC) approval of a new commitment of \$130 million to establish a Trust Fund for SARS to provide -
 - (a) special ex-gratia relief payments to families with deceased SARS patients; and

- (b) assistance, including special ex-gratia financial assistance, for recovered SARS patients suffering from longer term effects, attributable to SARS, which might result in some degree of physical or psychological dysfunction, subject to medical proof and financial need.

6. The Panel held two joint meetings with the Panel on Health Services to discuss the proposed Trust Fund for SARS. Members generally considered the proposed special ex-gratia relief payments for the surviving dependent family members of deceased SARS patients acceptable. They were, however of the view that the cumulative financial assistance of \$500,000 for recovered SARS patients should be higher than the amount of special ex-gratia relief payment for the families of deceased SARS patients.

7. Although it was reckoned that the financial assistance for recovered SARS patients was not a compensation, some members pointed out that the compensation received by workers who became permanently disabled from injury at work was higher than that for families of those workers who died from injury at work. Taking into account members' comments, the Administration agreed to increase the original estimate for recovered SARS patients from \$50 million to \$70 million, thereby increasing the global amount to \$150 million.

8. At the suggestion of members, the Administration also agreed to expand the scope of the Trust Fund for SARS to cover patients who were clinically diagnosed as having SARS on admission, treated with steroids as medication for SARS, but turned out subsequently not to have SARS.

9. The Administration briefed the Panel on the up-to-date position of the Trust Fund for SARS, following its establishment on 8 November 2003, in December 2003. Members were particularly concerned that of the total 121 applications received involving recovered SARS patients as at the end of November 2003, not one application had been approved.

10. The Administration explained that this was understandable, as time was needed to assess the medical and financial eligibility of the applicants. The Administration however pointed out that if approved, payments would generally begin to count from the date of application rather than the date of approval. This arrangement would minimise the impact of the processing time on the amounts of assistance provided to the successful applicants.

11. The Administration advised the Panel again in March 2004 that up to 10 March 2004, 423 out of a total of 793 applications received had been approved, involving a total amount of \$77.64 million. Of these 423 cases, 225 involved deceased cases with a total amount of \$73.5 million and 198 involved recovered cases with a total amount of \$4.14 million. Only three applications had been received from "suspected" SARS patients treated with steroids so far.

12. Arising from a referral from the Duty Roster Members on a series of complaints against the operation of the Trust Fund for SARS, the Panel requested the Administration in May 2004 to revert to the Panel when it was in a position to discuss the matters.

Preventive measures against SARS amongst elders

13. The Panel discussed the following measures to prevent infectious diseases more likely to affect residential care homes for the elderly (RCHEs), such as respiratory diseases (including SARS) -

- (a) all RCHEs were required to designate an Infection Control Officer (IOC) by 1 November 2003. The objective of the IOC scheme was to achieve early detection and reporting of suspected outbreaks, so that infection control measures as necessary could be stepped up in the homes in a timely manner;
- (b) for early detection and management of outbreaks, an enhanced information exchange system had been set up since mid October 2003 amongst the Department of Health (DH), the Hospital Authority (HA), the Social Welfare Department (SWD) and RCHEs (through the IOC scheme) to delineate procedures and roles of various parties;
- (c) visiting medical officers had been appointed as part-time doctors in October 2003 for a period of one year to manage residents with chronic diseases and their subacute illnesses so as to reduce their incidences of hospital admission;
- (d) apart from providing annual influenza vaccinations to residents of RCHEs, free influenza vaccinations were also provided to non-institutionalised seniors who were at particular high risk of influenza and had financial difficulty at HA's general outpatient clinics and DH's Elderly Health Centres;
- (e) a sentinel surveillance system on selected infectious diseases would be set up in elderly homes to monitor the trend of common infectious diseases in these homes so as to identify outbreaks in a timely manner; and
- (f) volunteer organisations and uniform groups, such as the Hong Kong Red Cross, had been engaged to continue to provide household cleansing and minor repairs services to vulnerable elders in the community after the completion of the "Operation CARE" project launched by SWD from late May 2003 to end of October 2003.

14. To better protect the health of elders, members urged that influenza vaccinations be provided for all needy elders in the community at a concessionary rate. They also raised queries whether volunteer organisations and uniform groups had the resources to reach out to all vulnerable and singleton elders.

15. The Administration advised that not all elders needed to receive influenza vaccinations. Nevertheless, service units of non-governmental organisations (NGOs), such as district elderly community centres (DECCs), neighbourhood elderly centres and social centres for the elderly, had provided needy elders in the community with influenza vaccination at a concessionary rate from September to December 2003. As at the end of December 2003, 173 centres/service units had participated in the campaign.

16. As regards provision of cleansing and maintenance services for needy elders after the discontinuation of the "Operation CARE" project, the Administration advised that SWD's 13 District Social Welfare Offices would continue to co-ordinate these services, such as liaising with relevant service units, DECCs, integrated home care services teams and volunteer organisations of NGOs. Besides, uniform and various community organisations, such as rural committees, schools, religious organisations and mutual aid committees, would render assistance as appropriate.

Residence requirements for social security benefits

17. In view of the Administration's plan to implement the seven-year residence requirements for social security benefits, as recommended by the Task Force on Population, with effect from 1 January 2004, the Panel met with a total of 11 deputations to listen to their views on the new arrangement in December 2003. Although the Director of Social Welfare (DSW) had the discretion to waive the residence requirements under the Comprehensive Social Security Assistance (CSSA) Scheme in cases of genuine hardship, the deputations pointed out that the operation of such was far from transparent. They requested SWD to make guidelines for operating such more specific and promulgate them to the public. One deputation further pointed out that the residence requirements were in breach of the Basic Law. In view of these issues raised, the Panel decided to form a subcommittee to follow them up with the Administration.

18. The subcommittee concluded its work in May 2004. Although the Administration considered it impractical to develop specific rules for waiving of residence requirement under the CSSA Scheme given that each case had to be considered on its own merits, it nevertheless had agreed to the subcommittee's suggestion of publicising a list of "Frequently Asked Questions" on the waiver operation.

19. The subcommittee and the Administration however could not agree on the issue of the compliance of the residence requirements for social security benefits with the Basic Law. The subcommittee maintained its view that the residence requirements were discriminatory. The Administration, however, pointed out that it was a well established legal principle that differences in treatment did not constitute discrimination, provided that there was reasonable and objective justification for such differences, and that the measures adopted were rational and proportionate for the pursuit of a legitimate aim.

Strategy and measures to tackle family violence

20. In the light of the occurrence of the Tin Shui Wai family tragedy on 11 April 2004, the Panel held three joint meetings with the Panel on Security to meet with deputations and the Administration. Some members called upon the Administration to set up a commission of inquiry chaired by a judge to inquire into the circumstances surrounding the occurrence of the Tin Shui Wai murder. They considered the scope of the three-person review panel formed by SWD too narrow, and did not have the power to inquire into the handling of other government departments such as the Police. Other members also called for the replacement of the chairman of the review panel due to his comments made to the press that the existing immigration and CSSA policies were the main causes of the tragedy case in Tin Shui Wai. These members pointed out that such pre-conceived views of the chairman of the review panel had adversely undermined public confidence in the review panel to come up with impartial and credible conclusions and recommendations.

21. The Administration assured members that the review panel would not restrict its review to the work of SWD and the NGOs concerned on family violence, but would also review the roles of other government departments concerned, such as the Police and the Housing Department (HD). The welfare sector was generally supportive of the appointment of the review panel. The Administration also clarified that what the chairman of the review panel meant to say to the press was that the problem of family violence was a complex one involving many contributing factors and immigration and CSSA policies could have a bearing on the problem. There was no cause for concern that the review panel would be prejudiced, as its conclusions and recommendations would be subject to public scrutiny. The chairman of the review panel was requested to provide a written statement clarifying his comments made to the press on the Tin Shui Wai murder.

22. In order to avoid the recurrence of the Tin Shui Wai family tragedy, the Panel decided to form a subcommittee to consider the more pressing issues prior to the expiry of the current legislative session. These issues might include Police's internal guidelines on handling battered spouse cases, views raised by deputations, in particular, amending the Domestic Violence Ordinance (Cap. 189) to make it more effective, and the latest procedural guidelines developed by SWD for handling battered spouse cases. The

subcommittee will hold its first meeting on 24 June 2004.

Implementation of the review of family services

23. A consultancy study completed in 2001 on the review of family welfare services recommended, inter alia, that a new service model of Integrated Family Services Centres (IFSCs) should be adopted to address service fragmentation and overlapping. To take forward the IFSC model, 15 pilot IFSCs were selected to be implemented for two years from April 2002 to March 2004. Findings of the evaluative study on the 15 IFSCs revealed high user satisfaction. Most noticeable was that users no longer felt inhibited to come forward to seek assistance, for fear of being viewed as weak and useless. Tentative implementation date for re-engineering existing family services centres/counselling units into IFSCs was set for April 2004.

24. Members were supportive of the new IFSC model, but were of the view that funding to the existing five Single Parents Centres should continue until there were findings to support that IFSCs could meet the needs of single parents. A letter conveying members' view was sent to DSW by the Chairman of the Panel on behalf of members, and copied to the Financial Secretary.

Efficiency savings

25. In discussing the impact of efficiency savings on the welfare sector, members were of the view that the Administration should cease imposing further cut in funding allocation to NGOs in 2005-06 as the accumulated reduction in subvented allocation had already amounted to some 21.4% from 2000-01 to 2008-09. The Administration pointed out that the savings targets for 2005-06 and beyond were only indicative at this stage, and adjustments might be made in the light of the economic situation then.

26. A member suggested that the Health, Welfare and Food Bureau (HWFB) should consider adopting the proposed 0-0-X funding arrangement for the University Grants Committee-funded institutions for the 2005-06 to 2007-08 triennium for the welfare sector. Notably, there would be no further funding cut from 2005-06 to 2006-07 for the welfare sector, with an undefined cut at no more than 7%, if the economy still had not fully recovered. If the economy was flourishing nearer the third year, no further funding cut to the welfare sector should continue. The Administration agreed to consider.

27. Members were concerned that the lack of strategic directions in the development of social welfare policies had rendered it not possible for NGOs to plan their services. They urged the Administration to expeditiously propose a blueprint for social welfare policies, as had been done in the past in the form of a five-year plan or ten-year White Paper.

28. The Administration explained why it had abandoned the conventional planning mechanism, which sought to match service provision with population level or other rigid parameters, was that such a mechanism would not serve its purposes having regard to the rapidly changing circumstances. Two new strategies would, however, be adopted as follows -

- (a) first, the Administration would focus on the "social investment" concept as opposed to the "welfare dependence" concept. The objective was to strengthen the capacities and capabilities of individuals, families and communities; foster self-help, mutual help, networking and support; and encourage giving in terms of donations and volunteerism. Such paradigm shifts would encourage self-reliance and self-betterment and facilitate economic and social inclusion and integration at the individual level; and build up human capital and social capital and strengthen intergenerational solidarity and cohesion at the societal level; and
- (b) second, the Administration would engage the third sector in developing new strategic directions in relation to shifting from a purely "service provision" approach to more emphasis on "social enterprise" and "capacity building". Moreover, there would be greater efforts in developing the tripartite partnership between the Government, the business community and the third sector in building up social capital. The latter was important for the sustainability of Hong Kong's welfare system which was financed by a low tax regime.

Measures to address poverty

29. The Panel again discussed measures to address poverty with the Administration and representatives from the welfare sector. The subject was first discussed by the Panel in November 2001.

30. Members shared the view that the various measures taken by the Administration to tackle poverty had not been effective in ameliorating the problem. Members were particularly concerned about the widening disparity between the poor and rich.

31. As the causes of poverty were complicated and inter-related, the Panel passed a motion urging the Administration to set up an inter-departmental committee to alleviate poverty by conducting studies on the issue of poverty, so as to come up with long term goals, strategies and measures to eradicate poverty.

Support for vulnerable elders

32. The Administration briefed the Panel on the latest developments of its strategies and services on support for vulnerable elders in May 2004.

33. Members noted that the number of elderly suicide cases amongst male was much higher than that of female, whereas the opposite was true in elder abuse cases. They asked whether the Administration had conducted any analysis to explain such a phenomenon.

34. The Administration explained that given the complexity of the elderly suicide issues, more studies needed to be made to analyse the information captured by the Central Suicide Information System, which was established under HWFB in 2002 to collect figures on suicide and attempted suicide, and the findings obtained from the Coroners Court. As to why elder abuse rate of women was higher than of men, the Administration pointed out that it was too early to draw a conclusion since the figures were only from 1 March 2004 up to 8 April 2004.

35. Some members urged SWD and HD not to wait until serious physical harm had been done to the elders by their family members, before arranging compassionate rehousing or splitting of household for these elders.

36. The Administration advised that in 2003, SWD had recommended 247 cases involving elders for compassionate rehousing to HD. A total of 80 cases for tenancy transfer or splitting involving were also recommended to HD in 2003. The Administration, however, pointed out that not all elders abused by their family members were willing to live away from their abusers, because of their close relationship with and ambivalent feeling towards the abusers. Although it was always assumed that the reason why these victims chose to stay with their abusers was because they were dependent on the abusers, the research on elder abuse revealed that some of the abusers were in fact dependent on the victims either financially or in daily living, e.g. the abuser being a chronically-ill patient. This made the victims not willing to move away from the abusers, as the abusers were usually the ones whom the victims cared very much about.

37. A member urged the Administration to relax the residence requirement for the Old Age Allowance, so as to enable elders to reside in the Mainland longer if they so wished. The Administration responded that it did not have any plan to change the present arrangements. Responding to the suggestion of setting up more outreach teams in areas populated by elders, the Administration advised that through the re-engineering of community support for elders, a network had been developed in each district to reach out to needy elders.

Support and assistance for paralysed patients living in the community

38. The story of "Pun Tsai", a paralysed patient requesting the Government to legalise euthanasia, had aroused much public concern over the plight of paralysed patients. In this connection, the Panel discussed the issue of support and assistance for paralysed patients with the Administration and representatives of three concerned groups in May 2004.

39. Members expressed support for all of the recommendations made by the deputations, in particular, providing a monthly subsidy of \$8,000 for the caregivers and a special monthly allowance of \$5,000 for all paralysed patients living in the community, in addition to the Higher Disability Allowance, to help meet the high medical cost.

40. A member also urged the Administration to take prompt action to address the access problem of people with disabilities to buildings and public transport. The Administration advised that the Buildings Department was presently reviewing the barrier-free guidelines on building design for further improving accessibility for people with disabilities. Consultation with the building industry and representatives of disability groups on the revised guidelines would be conducted before implementation.

Other issues/items discussed

41. Other issues/items discussed by the Panel included progress reports of the healthy ageing campaign, the Community Investment and Inclusion Fund and the intensified support for self-reliance measures under the CSSA Scheme, empowerment of women, final report on the "Three-year Action Plan to Help Street Sleepers", evaluation report on the ending exclusion project for single parents on CSSA and provision of disregarded earnings under the CSSA Scheme. The Panel was consulted on the planned introduction of the standardised needs assessment tool for admission to residential homes for people with disabilities.

Meetings held

42. The Panel held a total of 17 meetings, including two joint meetings with the Panel on Health Services to discuss the proposed Trust Fund for SARS and three joint meetings with the Panel on Security to discuss strategy and measures to tackle family violence, from October 2003 to June 2004.

Panel on Welfare Services

Terms of Reference

1. To monitor and examine Government policies and issues of public concern relating to welfare and rehabilitation services matters.
2. To provide a forum for the exchange and dissemination of views on the above policy matters.
3. To receive briefings and to formulate views on any major legislative or financial proposals in respect of the above policy areas prior to their formal introduction to the Council or Finance Committee.
4. To monitor and examine, to the extent it considers necessary, the above policy matters referred to it by a member of the Panel or by the House Committee.
5. To make reports to the Council or to the House Committee as required by the Rules of Procedure.

Panel on Welfare Services

Membership list for 2003 - 2004 session

Chairman	Hon CHAN Yuen-han, JP
Deputy Chairman	Dr Hon LAW Chi-kwong, JP
Members	Dr Hon David CHU Yu-lin, JP Hon Cyd HO Sau-lan Hon LEE Cheuk-yan Hon Fred LI Wah-ming, JP Hon Mrs Sophie LEUNG LAU Yau-fun, SBS, JP Hon LEUNG Yiu-chung Dr Hon YEUNG Sum Hon CHOY So-yuk Hon LI Fung-ying, JP Hon Henry WU King-cheong, BBS, JP Hon Michael MAK Kwok-fung Hon Albert CHAN Wai-yip Hon WONG Sing-chi Hon Frederick FUNG Kin-kee (Total : 16 Members)
Clerk	Miss Mary SO
Legal Adviser	Mr LEE Yu-sung
Date	31 October 2003