

立法會
Legislative Council

LC Paper No. CB(2)1761/06-07
(These minutes have been
seen by the Administration)

Ref : CB2/PL/WS

Panel on Welfare Services

Minutes of meeting
held on Thursday, 12 April 2007, at 2:00 pm
in Conference Room A of the Legislative Council Building

- Members present** : Hon CHAN Yuen-han, JP (Chairman)
Dr Hon Fernando CHEUNG Chiu-hung (Deputy Chairman)
Hon Albert HO Chun-yan
Hon LEE Cheuk-yan
Hon TAM Yiu-chung, GBS, JP
Hon LI Fung-ying, BBS, JP
Hon Tommy CHEUNG Yu-yan, JP
Hon Frederick FUNG Kin-kee, SBS, JP
Dr Hon KWOK Ka-ki
- Members absent** : Hon Bernard CHAN, GBS, JP
Hon Mrs Sophie LEUNG LAU Yau-fun, SBS, JP
Dr Hon YEUNG Sum
Hon Alan LEONG Kah-kit, SC
Hon LEUNG Kwok-hung
- Member attending** : Hon Ronny TONG Ka-wah, SC
- Public Officers attending** : Item IV
Ms Carol YIP
Deputy Secretary for Health, Welfare and Food
(Elderly Services and Social Security)

Mr Tony YIP
Assistant Secretary for Health, Welfare and Food
(Elderly Services and Social Security) 4

Miss Nancy LAW
Acting Director of Social Welfare

Mr NG Wai-kuen
Chief Social Security Officer (Social Security) 2
Social Welfare Department

Item V

Mr Tony TANG
Principal Assistant Secretary for Education and Manpower
(Quality Assurance)

Dr Daisy DAI
Chief Manager (Primary and Community Services)
Hospital Authority

Dr Patrick IP
Associate Consultant (Paediatrics and Adolescent Medicine)
Tuen Mun Hospital
Hospital Authority

Items V and VI

Mr Freely CHENG
Principal Assistant Secretary for Health, Welfare and Food
(Family)

Miss SHEA Wing-man
Assistant Secretary for Health, Welfare and Food (Family) 1

Mrs Anna MAK
Assistant Director (Family and Child Welfare)
Social Welfare Department

Dr Shirley LEUNG
Principal Medical and Health Officer (Family Health Service)
Department of Health

**Deputations
by invitation** : Item IV

Concerning CSSA Review Alliance

Mr AU YEUNG Tat-chor
Community Organiser

The Hong Kong Council of Social Service

Ms Mariana CHAN
Chief Officer, Policy Research and Advocacy

Oxfam Hong Kong

Mr Joseph WOO
Manager for Hong Kong Program

Hong Kong Association for the Survivors of Women Abuse
(Kwan Fook)

Ms LIU Ngan-fung
Chairperson

Ms FUNG Mei-yung

Individual

Dr WONG Hung

Item V

Breakthrough

Dr Philemon CHOI

The Boys' and Girls' Clubs Association of Hong Kong

Miss YEUNG Ho-yan
Project Officer

The Hong Kong Paediatric Foundation and the Hong Kong Society of Child Neurology and Developmental Paediatrics

Dr CHAN Chok-wan
Chairman, The Hong Kong Paediatric Foundation
President, The Hong Kong Society of Child Neurology and Developmental Paediatrics

International Social Service – Hong Kong Branch

Mr CHAM Kwok-wing
Director of Programme

Hong Kong Society for the Protection of Children

Ms Susan SO

Against Child Abuse

Ms Jessica HO
Supervisor

Mr Joseph WONG
Co-ordinator

Hong Kong College of Paediatricians

Dr Patricia IP
Member, Professional & General Affairs Committee

Medical Coordinators on Child Abuse of the Hong Kong Hospital Authority

Dr CHEUNG Chi-hung, Patrick

Dr HO Che-shun

The Hong Kong Paediatric Society

Dr Aaron YU

Clerk in attendance : Miss Betty MA
Chief Council Secretary (2) 4

Staff in attendance : Item VI

Ms Elyssa WONG
Deputy Head (Research and Library Services)

Mr Thomas WONG
Research Officer 4

All items

Mr Chris LAI
Senior Council Secretary (2) 7

Miss Maggie CHIU
Legislative Assistant (2) 4

Action

I. Confirmation of minutes

[LC Paper No. CB(2)1469/06-07]

The minutes of the meeting held on 12 March 2007 were confirmed.

II. Information paper issued since the last meeting

[LC Paper No. CB(2)1401/06-07(01)]

2. Members noted that an information paper provided by the Administration on the proposal to construct a Government complex at Mei Lai Road, Mei Foo, Lai Chi Kok had been issued since the last meeting.

III. Items for discussion at the next meeting

[LC Paper Nos. CB(2)1470/06-07(01) and (02)]

3. Members agreed to discuss the following items at the next regular meeting scheduled for 14 May 2007 at 10:45 am –

- (a) Review of the system for processing applications for Disability Allowance under the Social Security Allowance Scheme; and
- (b) Proposed review mechanism for fatal child abuse cases.

Action

4. Members noted that at the request of the Administration, discussion on "Proposed establishment of the Family Commission" had been deferred from the April meeting to a future meeting, as the Administration was not ready to discuss its current study on the setting up of a Family Commission.

IV. Further discussion on review of the disregarded earnings under the Comprehensive Social Security Assistance Scheme

[LC Paper Nos. CB(2)1305/06-07(01), CB(2)1470/06-07(03), CB(2)1523/06-07(01) and (03), and CB(2)1570/06-07(01)]

5. Deputy Secretary for Health, Welfare and Food (Elderly Services and Social Security) (DS/HWF(ES)) briefed members on the Administration's paper which provided supplementary information on disregarded earnings (DE) under the Comprehensive Social Security Assistance (CSSA) Scheme and its response to the issues of concern raised by members at the special meeting on 30 March 2007.

Views of deputations

6. The Chairman welcomed deputations to the meeting. The views of the deputations are summarised below.

Concerning CSSA Review Alliance
[LC Paper No. CB(2)1523/06-07(01)]

7. Mr AU YEUNG Tat-chor introduced the submission of the Concerning CSSA Review Alliance. He expressed disagreement with the Administration's analysis that an increase in the level of monthly DE would attract more people to join the CSSA net. Given the severity of the problem of working poverty, Mr AU YEUNG considered that the level of DE should be further increased and the proposed "no DE for the first two months" rule should be further relaxed to facilitate the employment of CSSA recipients. He added that the Alliance had also made some suggestions on the DE arrangements in its submission.

The Hong Kong Council of Social Service
[LC Paper No. CB(2)1523/06-07(03)]

8. Ms Mariana CHAN presented the views of the Hong Kong Council of Social Service (HKCSS) as detailed in its submission. She highlighted the problems of the current DE arrangements and considered the Administration's proposals on the DE arrangements inadequate to assist CSSA recipients to find jobs and remain in employment. Ms CHAN echoed the suggestions of the Concerning CSSA Review Alliance to further raise the level of DE and relax the proposed "no DE for the first two months" rule. She added that HKCSS

Action

proposed to introduce an asset building programme for CSSA recipients under which part of their DE would be set aside for asset-building and personal development purposes.

Oxfam Hong Kong

9. Mr Joseph WOO considered that the amount of the monthly "no-deduction" limit should be raised from \$600 to \$1,000 so as to cover the transport and meal costs arising from employment and provide a better incentive for employable CSSA recipients to work. Mr WOO said that the DE arrangements should be reviewed expeditiously and more support should be given for CSSA recipients to facilitate them to find jobs and remain in employment. In this regard, reference should be made to the Earned Income Tax Credit in the United States under which tax credits were available to low-income workers to encourage them to find better employment.

Hong Kong Association for the Survivors of Women Abuse (Kwan Fook)
[LC Paper No. CB(2)1570/06-07(01)]

10. Ms FUNG Mei-yung presented the views of Hong Kong Association for the Survivors of Women Abuse (Kwan Fook) as set out in its submission. Ms FUNG highlighted the difficulties encountered by single parents on CSSA who wished to work but had to take care of their children. She considered the current DE arrangements ineffective to facilitate CSSA recipients to work, as the eligibility criteria were too stringent and the level of DE was inadequate to cover their employment-related expenses. Ms FUNG added that the work requirement under the New Dawn Project should be removed as it had greatly reduced the time available for single-parent CSSA recipients to take care of their children.

Dr WONG Hung

11. Dr WONG Hung said that he had conducted a study on the earnings of low-income women in six remote areas. The findings showed that heavy transport costs for working across districts had acted as a greater disincentive for these workers to work. As such, to facilitate the employment of CSSA recipients, Dr WONG considered that DE should be set at a level which could cover the employment-related expenses for CSSA recipients, including clothing, meal and transport expenses. He estimated that the "no-deduction" limit and the maximum level of DE should be raised to \$1,000 and \$3,000 respectively. Dr WONG added that he supported HKCSS' proposal for introducing asset building programmes for CSSA recipients.

Action

Discussion

12. Dr Fernando CHEUNG expressed disappointment at the Administration's reluctance to take heed of members' views expressed at the last meeting on 30 March 2007. Dr CHEUNG was of the view that the Administration's explanation that raising the no-reduction limit for DE from \$600 to \$1,000 might be a greater disincentive for CCSA recipients to leave the CSSA net was unsubstantiated and unreasonable. Citing the New Dawn Project as an example, single-parent CSSA recipients were required to be under employment for not less than 32 hours a month. Assuming that the hourly rate of the jobs was \$30, the CSSA recipients would receive a monthly income of about \$1,000. As such, he strongly urged the Administration to consider raising the no-deduction limit from \$600 to \$1,000, instead of \$800 as proposed by the Administration. Moreover, the maximum level of DE should be raised correspondingly from \$2,500 to \$2,900 a month, if the no-deduction limit was increased by \$400. Dr CHEUNG added that as the additional recurrent expenditure for further raising the no-reduction limit would only be about \$13 million, he could not understand why the Administration would not accept the proposal. On the proposed "no DE for the first two months" rule, Dr CHEUNG said that as pointed out by some deputations, if the CSSA recipients could find employment during the first month on CSSA, they would likely leave the CSSA net. Therefore, the no DE rule should be relaxed to one month.

13. Acting Director of Social Welfare (Atg DSW) clarified that the estimated recurrent financial implications for raising the "no-deduction" limit for DE from \$600 to \$800 would be about \$23 million, and \$43 million for raising it to \$1,000. The recurrent financial implications for implementing the whole package of the Administration's proposals relating to DE arrangements would be around \$30 million. Atg DSW said that the Support for Self-reliance (SFS) Scheme was implemented in 1999 to assist CSSA recipients to improve their employability. The maximum level of monthly DE had been raised from \$1,805 to \$2,500 in 2003 to provide more financial incentives for employable CSSA recipients to move from welfare to work. On the other hand, the "no DE for the first three months" rule was introduced to deter those who would have sufficient means to meet their basic needs from gaining entry into the welfare system. Atg DSW pointed out that while there was a steady decline in CSSA "unemployment" cases over the past few years, it was difficult to segregate the effect of the DE arrangement from other contributory factors, such as the improved economy, the more favourable labour market conditions, and the strengthening of other measures under the SFS Scheme to help unemployed CSSA recipients move into work. The Administration considered that the current recommendations had struck a reasonable balance between, on the one hand, providing CSSA recipients with more financial incentives through the provision of DE to find and remain in employment and on the other hand, maintaining DE at a level which would not

Action

attract entrance to the CSSA net unless they were in genuine need or delay the exit of employable recipients from the system.

14. DS/HWF(ES) supplemented that the provision of DE was only one of the measures introduced to encourage and assist CSSA recipients to move towards self-reliance. The Social Welfare Department had implemented, among other things, the SFS Scheme to assist CSSA recipients to improve their employability and maximize their chances to obtain paid employment. She stressed that the amount of earnings of CSSA recipients that was disregarded would not be credited to the government general revenue, but would be included for assessing the amount of monthly CSSA payable to families with an employed member. DS/HWF(ES) said that if the maximum level of monthly DE was raised to \$3,500, a four-member CSSA family could receive \$12,844 per month, which was higher than the average monthly income (\$9,500) of a four-member non-CSSA household in the lowest 25% income group. As such, the Administration did not see a case for further raising the maximum level of DE.

15. Mr AU YEUNG Tat-chor of the Concerning CSSA Alliance said that the lack of employment opportunities for vulnerable groups made it difficult for CSSA recipients to move towards self-reliance. Mr AU YEUNG further said that according to a survey conducted jointly by the Justice and Peace Commission of the Hong Kong Catholic Diocese and the Alliance, single parents had less time for their families and children after joining the New Dawn Project.

16. Regarding the suggestions of further raising the monthly DE level, Atg DSW stressed that the current CSSA benefit levels for larger households were already appreciably higher than the market wages for low-skilled jobs. A higher level of monthly DE would push the total resources of CSSA families with an employed member further above market wages.

17. Dr Fernando CHEUNG said that it was inappropriate to compare the CSSA levels with the earnings of low-income families. Dr CHEUNG pointed out that the provision of DE aimed to provide financial incentives for CSSA recipients who could work to find work and increase their earnings. Therefore, the Administration should make provisions for job searching and employment-related expenses. Dr CHEUNG expressed support for Dr WONG Hung's suggestion of setting up a fair mechanism to review regularly the DE levels.

18. Atg DSW said that as an additional measure to encourage the unemployed and low-income workers to find employment and work across districts, a pilot Transport Support Scheme would be launched in mid 2007 to provide transport subsidy for eligible residents in remote districts to find jobs and work across districts, including employable CSSA recipients.

Action

19. In closing, the Chairman said that Panel members belonging to different political groupings expressed support for further relaxing the DE arrangements. She strongly urged the Administration to take into account members' views in preparing the funding proposal to the Finance Committee. The Chairman further said that as the review of the DE arrangements was a complex issue which required detailed discussion, it should be followed up by the Subcommittee on the Review of CSSA Scheme.

20. Dr Fernando CHEUNG said that as the subject of DE arrangements was related to the employment of CSSA recipients, a joint meeting could be held with the Panel on Manpower to discuss the subject. The Chairman said that the meeting would be arranged after the Administration had decided on the institutional structure to deal with policies concerning employment and welfare services. Members agreed.

V. Comprehensive Child Development Service : Review of Pilot Implementation

[LC Paper Nos. CB(2)1470/06-07(04) to (09), CB(2)1523/06-07(04) and CB(2)1570/06-07(02)]

21. With the aid of powerpoint presentation, Principal Medical and Health Officer (Family Health Service), Department of Health briefed members on the review findings of the pilot implementation of the Comprehensive Child Development Service (CCDS) in four selected communities.

22. Principal Assistant Secretary for Health, Welfare and Food (Family) (PAS/HWF(F)) added that in the light of the encouraging outcome of the CCDS pilot, subject to additional resources being available, the Administration planned to extend CCDS to all districts in phases by 2012 and strengthen social services support. As the next step, the Administration would extend CCDS to Tung Chung, the whole district of Yuen Long and Kwun Tong in 2007-2008.

Views of deputations

Breakthrough

23. Dr Philemon CHOI expressed support for the implementation of the pilot CCDS to facilitate early identification and prevention of problems encountered by high-risk families, and welcomed the review findings which provided a fair assessment on the pilot CCDS. He said that the use of the Maternal and Child Health Centres (MCHCs) as the service platform, development of assessment tools and training for frontline staff were the crucial factors to the success of the pilot CCDS. In view of the encouraging outcome of the pilot run, Dr CHOI hoped that CCDS could be extended gradually to all districts.

Action

The Boys' and Girls' Clubs Association of Hong Kong

24. Miss YEUNG Ho-yan said that while the Association welcomed the implementation of CCDS, it was concerned about the effectiveness of CCDS in providing timely welfare services for cases identified for follow-up. She hoped that the Administration would provide information on the number of cases identified for follow-up and the outcome of these cases. Miss YEUNG further said that adequate resources should be provided for MCHCs and the Integrated Family Service Centres (IFSCs)/Integrated Services Centres (ISCs) to alleviate the additional workload faced by frontline workers. Miss YEUNG suggested that apart from IFSCs and ISCs, Integrated Children and Youth Services Centres, which offered a wide range of services for children and youth, could also be engaged to provide welfare services in this respect.

The Hong Kong Paediatric Foundation and the Hong Kong Society of Child Neurology and Development Paediatrics
[LC Paper No. CB(2)1470/06-07(06)]

25. Dr CHAN Chok-wan presented the views and suggestions of the Hong Kong Paediatric Foundation and the Hong Kong Society of Child Neurology and Development Paediatrics as detailed in their joint submission. Dr CHAN pointed out that children aged between five to seven were not being looked after under CCDS nor the Student Health Service for primary students. A mechanism should be established to bridge the service gap.

International Social Service – Hong Kong Branch

26. Mr CHAM Kwok-wing briefed members on the experience of the International Social Service – Hong Kong Branch, which operated IFSCs in Sham Shui Po and Tin Shui Wai, in implementing the pilot CCDS. Mr CHAM suggested that efforts should be made to further enhance collaboration between MCHCs and IFSCs. CCDS should also introduce outreaching service with a view to identifying and providing assistance for families which had not attended MCHCs for services.

Hong Kong Society for the Protection of Children

27. Ms Susan SO said that according to the experience of the Hong Kong Society for the Protection of Children in implementing the pilot CCDS, most parents and schools in the four selected communities were not aware of the pilot CCDS. Ms SO considered that more publicity programmes should be launched to enhance the public awareness of the service. Ms SO said that under the pilot CCDS, identified families who so consented were referred to IFSCs and ISCs for follow-up services. Therefore, more training on counselling skills should be

Action

provided for frontline staff to facilitate them to identify families in need of the service and to encourage these families to receive assistance.

Against Child Abuse

[LC Paper No. CB(2)1523/06-07(04)]

28. Ms Jessica HO presented the views of the Against Child Abuse as set out in its submission. Ms HO said that outreaching service such as home visitation programme should be introduced to identify at-risk families which were unwilling to approach MCHCs for help and to provide them with appropriate assistance. More training and support should be provided for social workers to alleviate their work pressure. Ms HO added that as one-third of the newborn babies were from families with one parent who was a Two-way Permit holder, the Administration should give due regard to the specific needs of these children when formulating the long-term arrangement for CCDS. Ms HO hoped that the interests of children would be safeguarded in the study of the establishment of a proposed Family Commission.

29. Citing a home visitation programme run by the Against Child Abuse in Tuen Mun, Yuen Long and Tin Shui Wai as an example, Mr Joseph WONG said that paying regular visits to mothers with newborn babies could alleviate their feelings of depression and loneliness, thereby reducing the chance of child abuse.

Hong Kong College of Paediatricians

[LC Paper No. CB(2)1470/06-07(07)]

30. Dr Patricia IP introduced the submission of the Hong Kong College of Paediatricians. Dr IP said that many difficulties outlined in the evaluation report on CCDS could be alleviated if a high level independent body was established to oversee policies on children. Dr IP further said that given that the mothers of about one-third of the newborn babies in Hong Kong were Mainland residents, the Administration should take measures to ensure that these babies and their families were aware of the benefits of CCDS. Dr IP hoped that the future staffing of CCDS would match the anticipated workload, and the programme would be extended to other districts as early as possible.

Medical Coordinators on Child Abuse of the Hong Kong Hospital Authority

[LC Paper No. CB(2)1470/06-07(08)]

31. Dr Patrick CHEUNG presented the views of the Medical Coordinators on Child Abuse (MCCA) of the Hong Kong Hospital Authority. Dr CHEUNG said that while MCCA expressed support for the implementation of CCDS, it raised some issues of concern relating to the expertise of staff, service coverage and outcome measures of CCDS as set out in the submission. He further said that MCCA was disappointed with the absence of a comprehensive child

Action

protection policy and an independent authority to monitor child protection measures; it strongly requested the establishment of an independent institution for the purpose.

The Hong Kong Paediatric Society
[LC Paper No. CB(2)1570/06-07(02)]

32. Dr Aaron YU presented the views of the Hong Kong Paediatric Society as detailed in its submission. Dr YU said that the Society was supportive of the underpinning philosophy of CCDS and the use of MCHCs as a platform to deliver the service. However, the Society was concerned about the difficulties faced by frontline staff in providing services for vulnerable children because of their complicated family background. Therefore, comprehensive training on managing childhood health and developmental problems should be provided for frontline staff.

Hong Kong Family Welfare Society

33. Members noted that the Hong Kong Family Welfare Society had provided a written submission (LC Paper No. CB(2)1470/06-07(09)) but had not sent representatives to the meeting.

Discussion

34. Responding to the deputations' views and suggestions, PAS/HWF(F) said that though the CCDS pilot had completed, the Administration would continue to monitor the progress of its implementation and fine-tuned the CCDS model as appropriate. He pointed out that an additional resource of \$20 million had been allocated for the pilot since it was launched, the bulk of which was used to enhance staffing support. Training was provided for pre-primary educators to identify and support children with physical, developmental or behavioural problems. The major problem was the shortage of professional staff, especially nursing staff.

35. PAS/HWF(F) said that the Administration fully understood the heavy workload faced by the implementing agencies. He pointed out the CCDS pilot provided useful statistics for the Administration to bid for additional resources to further enhance and improve the CCDS and extend the service to other districts. The Administration believed that as CCDS could facilitate early identification and prevention of family problems, the demand for follow-up services would decrease in the long run, thereby alleviating part of the work pressure of frontline social workers. Efforts would also be stepped up to improve the collaboration among service units under CCDS and interested welfare agencies could also take part in the service.

Action

36. While expressing support for the implementation of CCDS, Mr Albert HO expressed concern that in the absence of additional resources for the social welfare agencies, the latter would find it difficult to offer prompt follow-up services even if problems were identified in CCDS. He held the view that additional resources should be allocated to the implementing agencies. Mr HO added that a longitudinal study should be conducted to evaluate the effectiveness of CCDS.

37. PAS/HWF(F) responded that initial findings showed that there was an increase in the number of referrals to IFSCs when compared with the service statistics before the implementation of the pilot. About 420 cases had been identified and they were mainly referred to the 14 IFSCs in the pilot communities. The additional workload for each IFSC was considered acceptable. Nevertheless, the Administration was conscious of the need to enhance the follow-up services to deal with the varied needs of children and families identified under CCDS. To this end, additional resources had been allocated to IFSCs and other relevant social service units to launch a Family Support Programme to reach out to vulnerable families which were unwilling to seek help. As regards Mr Albert HO's suggestion of conducting a longitudinal study, PAS/HWF(F) said that it was difficult to conduct the study in a small territory such as Hong Kong due to a lack of a control group.

38. Dr KWOK Ka-ki said that in the light of the complexity of the problems faced by high-risk families, the amount of recurrent resources allocated for the pilot CCDS was insufficient to provide them with necessary follow-up services and support. It would not be of much help to at-risk families if they had been identified but not provided with timely assistance. Dr KWOK enquired about the concrete measures to be introduced to bridge the service gap for children aged between five and seven, improve the coordination between different service units under CCDS, and outreach those pregnant women who did not approach MCHCs for assistance. Noting that the Administration planned to complete the territory-wide extension of CCDS by 2012, Dr KWOK considered that the pace of the extension was too slow. He urged the Administration to expedite the implementation plan and report progress to the Panel.

39. Ms LI Fung-ying was concerned about the resources for the implementation of CCDS. She pointed out that due to a lack of space, there were no interview rooms in MCHCs to ensure privacy for interviewing clients. This hampered the desire of the potential clients to disclose their privacy and caused additional workload for MCHC staff. She enquired about the capacity of IFSCs in coping with the increased number of referrals, if no additional resources were provided. Ms LI held the view that the Administration should ensure that adequate resources were available for the implementation of CCDS.

40. Dr Fernando CHEUNG welcomed the release of the evaluation report on

Action

the pilot CCDS and hoped that the Administration would implement all the recommendations in Chapter 9 of the report. On the manpower issues, Dr CHEUNG said that apart from nursing staff, more social workers were needed for the implementation of CCDS. However, the additional resources so far provided by the Administration could barely alleviate the existing problem of staffing shortage in most welfare service agencies, not to mention coping with the additional workload. As the mothers of one-third of the newborn babies were Two-way Permit holders, Dr CHEUNG requested the Government to review the population policy and the seven-year residence requirement for new arrival mothers for receiving subsidised welfare services.

41. The Chairman concluded that while members were generally supportive of CCDS, they were concerned about the lack of a comprehensive policy on the long-term development of children and youth services in Hong Kong. Moreover, additional resources should be provided for welfare service agencies for the implementation of CCDS. The Chairman hoped that the Administration would expedite the plan to extend the pilot CCDS to other districts and report the implementation progress to the Panel.

42. PAS/HWF(F) said that since CCDS aimed to identify and prevent problems of children and their families at an early stage, cases identified to be in need of welfare services would be referred to appropriate social service units for follow-up. The Administration would monitor closely the impact of CCDS on social services support and the resource implications as appropriate. The Administration would keep the Panel posted of the implementation progress.

Admin

VI. Research report on "Child Protection in Selected Overseas Places"

[RP03/06-07 – Research report prepared by the Research and Library Services Division of the LegCo Secretariat]

43. Members noted the research report prepared by the Research and Library Services Division of the Legislative Council Secretariat.

44. Dr KWOK Ka-ki pointed out that child protection legislation and policies in Hong Kong lagged far behind the selected places in the research study. He suggested that the Panel should follow up the matter with the Administration.

45. Dr Fernando CHEUNG agreed that the Panel should follow up on the subject of child protection, and invite deputations to give views on the subject. Dr CHEUNG expressed dissatisfaction at the absence of a statutory body to coordinate and monitor the implementation of child protection and the slow progress of introducing a consolidated child protection ordinance in Hong Kong.

Action

46. PAS/HWF(F) said that the rights and well-being of children were protected under different pieces of legislation at present. Different bureaux and departments had made various efforts to safeguard the rights of children. The Administration was also studying the feasibility of setting up a Family Commission and would take the opportunity to examine how the proposed Family Commission could better protect the well-being and interests of different social groups, including children. A report on the study would be available in mid 2007.

VII. Any other business

47. There being no other business, the meeting ended at 4:50 pm.

Council Business Division 2
Legislative Council Secretariat
11 May 2007