

LEGCO PANEL ON WELFARE SERVICES

Subcommittee on Elderly Services Follow-up Issues of the 22 January 2008 Meeting

Purpose

This paper follows up, and provides Members with the relevant information, on the key points raised at the meeting of the Subcommittee on Elderly Services on 22 January 2008.

Detailed information

2. At the said meeting, Members expressed concern about the waitlisting situation of subsidised residential care services and wished to further look into the issue. This paper provides the information requested by Members.

The demand for subsidised residential care services

3. “Ageing in the community” is an underlying principle of our elderly policy and we are committed to promoting it. We provide elders who have “long-term care” (LTC) needs with subsidised home-based community care services and subsidised day care services to facilitate elders to age in the community. On the other hand, subsidised residential care places for the elderly are meant for those who have LTC needs but cannot be adequately taken care of at home. It is important to note that elders with LTC needs do not necessarily age in residential care homes for the elderly (RCHEs). With the support of family members, carers and a range of subsidised community care services, they can also age in the community. In fact, various governments in the world and international organizations specialized in ageing-related researches and elderly services deem “ageing in the community” equally suitable for elders with LTC needs and can help improve their quality of life.

4. While the Government is committed to promoting “ageing in the community”, we place utmost importance on responding to the demand for subsidised residential care services. As detailed in the paper submitted for the meeting of the Subcommittee on Elderly Services on 22 January 2008, we have increased the number of subsidised residential care places from about 16 000 in 1997 to about 26 000 in 2007, representing a rise of about 60%. In 2007-08, we will provide an additional 743 subsidised residential care places (including 212 places in three new contract homes and 531 places purchased from private RCHEs). We will further increase the number of subsidised residential care places in the coming year.

5. Despite the Government’s strenuous efforts in responding to the demand for subsidised residential care places, such demand will continue to grow and waitlisting is inevitable as a result of the ageing population and other contributing factors. These factors include:

- the continuous growth of the elderly population;
- the increasing life expectancy of the people of Hong Kong;
- that elders are only required to pass the frailty test to become eligible for waitlisting for subsidised residential care places and no means-test is required;
- elders have different needs for the type or even the location of subsidised residential care places;
- some elders who are staying in private/self-financing residential care places are also waitlisted for subsidised residential care places; and
- it takes time to increase the provision of subsidised residential care places. For instance, the construction of purpose-built premises for a contract RCHE takes a number of years from planning to operation.

Response strategy

6. In the face of an ageing population, the Government has been increasing the number of subsidised residential care places. That said, increasing continuously the supply of subsidised residential care places alone will not be sufficient to meet elders' ever-growing LTC needs. Apart from increasing the number of subsidised residential care places, we will continue to enhance the provision of community care services to assist elders to age in the community. At present, more than 24 000 elders ageing in the community are using the following services:

- the non-frailty-tested home-based care services which include homemaking, meal delivery and escort service. The 2006-07 Budget earmarked an additional \$20 million to increase service capacity. At present, there are 19 000 active cases.
- The frailty-tested home-based community care services which include care planning, rehabilitation exercises, homemaking, meal delivery and escort. At present, there are 3 400 elderly users. In 2008, the Social Welfare Department will increase the service volume in districts in need through internal redeployment of resources.
- Day care service: there are about 2 800 elderly users. In early 2008, we will provide an additional 80 day care places in Kwun Tong, Tin Shui Wai and the Eastern district.

7. Apart from elders, we also provide support to their carers, which include:

- respite services at subsidised RCHEs (for those staying overnight) or at day care centres/units (for those not staying overnight).
- Provide support services for carers through most of the District Elderly Community Centres (DECCs) and Neighborhood Elderly Centres (NECs), which include counselling, emotional support, resource centres, training, seminars, carers' groups, and loan of rehabilitation equipment etc.

8. To further strengthen the support to singleton and hidden elders and carers :

- we will allocate a one-off funding of \$200 million to help improve the homes of elderly households in need in the next five years.
- In addition to allocating a recurrent amount of \$38 million to DECCs and NECs by end-2007 to enhance outreach services to singleton and hidden elders, we will provide further resources to DECCs to strengthen referral, counselling and support services for elders.
- In 2007, we launched 11 trial schemes in three districts under which DECCs, in collaboration with community organisations, run carer training courses and develop “carer” services. Around 660 individuals will be trained in the first year.
- We will make use of the \$96 million earmarked in the 2007-08 Budget to implement, for four years, a trial scheme to provide integrated discharge support services to elderly discharges from hospitals who have difficulty taking care of themselves. The first pilot project will be launched in Kwun Tong starting from the 1st quarter of 2008. It is estimated that a total of 3 000 high-risk elderly patients will be served and training for 1 000 carers will be provided in a year. The second pilot will be launched in Kwai Tsing in the 3rd quarter of 2008.

Advice Sought

9. Members are invited to note the contents of the paper.

Labour and Welfare Bureau
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