

The Legislative Council Meeting on 8 June 2011
Motion on “Setting out a five-year plan for elderly services”

Progress Report

Purpose

At the Legislative Council meeting on 8 June 2011, the motion on “Setting out a five-year plan for elderly services” moved by the Hon TAM Yiu-chung and amended by the Hon WONG Sing-chi and Dr Hon PAN Pey-chyou was carried. The wording of the motion carried is at **Annex**.

2. This report sets out the Administration’s follow-up actions taken in respect of the above motion.

(I) Financial support for the elderly

3. Hong Kong adopts a three-pillar model for retirement protection: the non-contributory social security system (comprising Comprehensive Social Security Assistance (CSSA) Scheme, and the Social Security Allowance (SSA) Scheme made up of Old Age Allowance (OAA) and Disability Allowance (DA)), the Mandatory Provident Fund (MPF) system and voluntary private savings. The Administration has all along been closely monitoring the operation of the above model, taking into account socio-economic changes, and has made improvements as necessary. As regards the MPF system, the Mandatory Provident Fund Schemes Authority (MPFA) announced in late July this year that it would commission an independent consultancy to study the administration costs of MPF trustees. The Administration and the MPFA will work closely to review and improve the various operational arrangements of the MPF system, including the mode of withdrawal of the MPF accrued benefits upon attaining the age of 65; and the circumstances under which withdrawal before the age of 65 may be permitted. As regards social security, the Community Living Supplement under the CSSA Scheme was extended to cover elders in October this year, with a concurrent increase of the monthly rate of this Supplement from \$120 to \$250.

4. The Central Policy Unit is refining its studies on the retirement protection system in Hong Kong. We will make reference to the findings of CPU’s studies, and make continuous efforts to enhance the existing system.

The SSA Scheme

5. The Steering Committee on Population Policy chaired by the Chief Secretary for Administration has been studying ways to facilitate elders who choose to settle on the Mainland, including the feasibility of providing them with financial support. For older persons returning to take up residence in Hong Kong, as long as they can meet the relevant eligibility criteria, they can have access to various welfare services.

6. DA and OAA have different target beneficiaries. Severely disabled elders who meet the eligibility criteria for both allowances may choose to apply for one of them. This is to avoid double benefit. The Administration has no plan to review or change this rule.

(II) Elderly services

7. We will, as in the past, continue to adhere to the policy objective of “ageing in place as the core, institutional care as back-up”, and allocate resources to provide elderly care services to elders in need.

Measures facilitating ageing in place

8. The Elderly Commission (EC) released the report of its consultancy study on community care services (CCS) for the elderly in July this year. The study examined how to strengthen these services through a more flexible and diverse mode of financing and service delivery; allow elders who are most in need to have priority in using subsidised services; and encourage shared responsibilities among individuals, families and the society, as well as encourage social enterprises and the private market to develop CCS.

9. The consultant considers that the following values and principles should be adopted in the development of long term care services in Hong Kong: (a) services should be “elderly-friendly”; (b) the principle of “ageing in place” should be upheld; (c) the responsibility of care should be shared among the individual, family, community, market and the Government; and (d) there should be equitable allocation of resources, i.e. elders who are most in need should have priority in using subsidised services. EC presented the findings and recommendations of the study report to the Legislative Council Panel on Welfare Services on 11 July. The Administration generally agrees with the overall thrust of the consultancy study. We will examine the feasibility of the specific recommendations thoroughly, and map out the way forward.

10. While promoting CCS, we also understand that some frail elders who cannot be adequately taken care of at home may require residential care services (RCS). In this regard, the Administration would continue to allocate additional resources to increase the provision of subsidised residential care places through a multi-pronged approach, which includes the construction of new residential care homes for the elderly (RCHEs), the purchase of vacant nursing home places from self-financing RCHEs, the continued purchase of care-and-attention places from private RCHEs under the Enhanced Bought Place Scheme, and making use of available space in existing subvented RCHEs to provide places with a continuum of care, etc.

Training for the elderly services sector

11. The Social Welfare Department (SWD) will continue to collaborate with the Department of Health (DH) in organising training courses in various districts for RCHE staff, covering topics such as drug management, nursing knowledge, etc. The Visiting Elderly Health Teams of DH also provide on-site training and education in nursing services for staff at RCHEs. At the same time, the Centre for Health Protection runs infectious diseases control training programmes every year for RCHE staff. Furthermore, training institutes approved by SWD have been providing Health Worker Training Courses which are either subsidised by the Employees Retraining Board or operating on a self-financing basis.

Measures relating to dementia patients

12. Adopting an integrated and a continuum-of-care approach, the Administration provides a range of subsidised care services for dementia patients with long-term care needs, including RCS, day care services and home care services. In recent years, the Administration has been allocating resources to elderly service units continuously in order to enhance the care services for dementia patients. For instance, we are providing dementia supplement to subsidised RCHEs and day care centres (DEs) /units for the elderly and have improved their facilities. We are also strengthening the care ability of front-line care workers.

13. At present, the Hospital Authority (HA) and DH provide demented elders with health assessment, treatment and rehabilitation services. HA will gradually strengthen its psychogeriatric outreach service to enhance the coverage for medium and large-sized RCHEs. In 2011-12, we have allocated additional funding of \$13 million to HA to extend its outreach service to about 80 additional RCHEs.

(III) Health care services

14. In view of the ageing population, demand for primary health care services for elders will only increase in the long run. To enhance primary health care services, the Food and Health Bureau has taken forward the Elderly Health Care Voucher Pilot Scheme and various other pilot projects in collaboration with the private sector to provide more service choices for elders.

The Elderly Health Care Voucher Pilot Scheme

15. Having regard to the findings of the interim review in respect of the Elderly Health Care Voucher Pilot Scheme, the Administration will extend the Pilot Scheme for another three years to 31 December 2014, after the current three-year pilot period draws to a close by this year end. During the extended pilot period, the Administration will increase the annual voucher amount per eligible elderly person from \$250 to \$500. To extend the service coverage, Optometrists (Part I registration) will be included as eligible healthcare service provider under the Pilot Scheme.

The elderly drug subsidisation policy

16. In recent years, HA has been expanding the scope of the drug formulary, at standard fees and charges, to patients (including the elderly) who meet specified clinical conditions. Having regard to the latest scientific evidence and medical technology development, HA further expanded the scope of the drug formulary in April this year for treatment of various diseases. The Administration has also allocated an additional recurrent funding of \$237 million to HA to meet the growth in drug expenses. Meanwhile, HA has in this year included three additional drugs in the scope of the Samaritan Fund (the Fund), and expanded the clinical indications of another drug under the Fund. At present, a total of 17 drugs are included in the scope of the Fund. Furthermore, HA has been allocated funding from the Community Care Fund (CCF) for implementing the First Phase Programme of the CCF Medical Assistance Programmes with effect from 1 August this year to subsidise eligible HA patients to use six specified self-financed cancer drugs which have not yet been brought into the Samaritan Fund safety net.

Elderly dental care services

17. The Steering Committee on the CCF announced earlier that it had reserved funds for providing financial assistance on dental services (including dentures) for the elderly, and its Medical Sub-committee is studying the proposal.

18. The Administration launched a Pilot Project, in partnership with non-governmental organisations (NGOs) for a period of three years starting from April this year, to provide elderly people residing in RCHEs or receiving services in DEs with outreach primary dental care and oral health care services free of charge, including dental check-up, scaling, polishing and any other necessary pain relief and emergency dental treatments. Fourteen NGOs are participating in the Pilot Project. Together they have 25 dental care out-reach teams which are expected to serve more than 100 000 attendances, benefiting about 80 000 elders in RCHEs and DEs.

Public Chinese medicine clinics

19. The Administration has so far set up a total of 15 Chinese Medicine Clinics (CMCs) over the territory. We have also firmed up the site for the public CMC in Kowloon City District, and plan to have it opened within this year. We will continue to identify suitable sites in the remaining districts of Yau Tsim Mong and Islands, with a view to setting up public CMCs in 18 districts as planned at the earliest.

(IV) Elderly housing and the environment

Land use planning

20. The objective of the Administration's elderly policy is to promote "ageing in place", to encourage mutual care among old and young family members and mutual support among neighbours, and to ensure that the elderly living in different locations may receive various types of support conveniently, rather than requiring the elderly to live together. Furthermore, land resources in Hong Kong are limited; any suggestion of earmarking sites¹ for elderly housing purposes should be carefully considered.

The Reverse Mortgage Programme

21. The Hong Kong Mortgage Corporation Limited launched the Reverse Mortgage Programme on 11 July this year to provide an additional financial planning option for meeting living expenses to homeowners who are aged 60 or

¹ At present, land designated for residential use on Outline Zoning Plans can be used for residential development. According to the "Definitions of Terms / Broad Use Terms Used in Statutory Plans" of the Town Planning Board, "elderly housing" is regarded as a kind of "residential institutions". This type of land use is always permitted in "Residential (Group A)" and "Residential (Group B)" zones. In other zonings such as "Commercial", "Government, Institutions or Community", "Residential (Group C)", "Residential (Group E)" and "Comprehensive Development Area", "elderly housing" may be permitted through application for planning permission.

above. Currently, seven banks have participated in the Programme, and 82 applications have been approved.

Barrier-free environment

22. The Housing Authority has devised a retrofitting programme to improve the accessibility of 233 premises/facilities under its management (covering public housing estates, commercial centres, carparks and factory buildings). Most of the improvement works will be completed by 30 June 2012.

(V) Active ageing and concessions for the elderly

23. The promotion of “active ageing” is one of the emphasis of the Administration’s elderly policy. In line with our work in the past few years, the Labour and Welfare Bureau and the EC will continue to join hands and implement various initiatives to promote care and respect for the elderly. These include an eight-episode TV series “Being Good Neighbours” jointly produced with Radio Television Hong Kong and broadcast in the summer; a new phase of the Neighbourhood Active Ageing Project which will be launched in the second half of this year to foster harmonious family relations as well as to enhance the support network for elders at the community level; and the promotion of the sustainable development of the Elder Academy Scheme to encourage life-long learning for elders. Other Government and related organisations have also been offering elders concessions and implementing facilitation measures. For instance, the Labour Department has set up special counters in all Job Centres to provide priority registration and employment services for job-seekers aged 50 or above, whereas the Leisure and Cultural Services Department will continue to take care of senior citizens’ needs in using museum services, and review its concessionary measures as appropriate.

24. As regards transportation, the Administration will continue to encourage public transport operators to introduce fare concessions as far as possible to help meet the travelling expenses of passengers (including the elderly). At present, major public transport operators are providing the elderly with fare concessions and are supportive of the annual “Senior Citizens’ Day”, offering free rides to the elderly on that day.

Labour and Welfare Bureau

Commerce and Economic Development Bureau

Financial Services and the Treasury Bureau

**Food and Health Bureau
Home Affairs Bureau
Security Bureau
Transport and Housing Bureau**

October 2011

(Translation)

**Motion on
“Setting out a five-year plan for elderly services”
moved by Hon TAM Yiu-chung
at the Legislative Council meeting
of Wednesday, 8 June 2011**

Motion as amended by Hon WONG Sing-chi and Dr Hon PAN Pey-chyou

That, at present, the trend of the ageing of the society in Hong Kong is accelerating, this Council urges the Government to plan in full speed and formulate as early as possible a more comprehensive elderly policy, and also set out a five-year plan for elderly services, so as to set specific development objectives and pledges for elderly services every five years, with a view to rectifying the serious problems of imbalance between supply of and demand for services, a large number of persons waiting for services and prolonged waiting time, as well as strengthening the care for the needs of elderly persons' living, and vigorously improving people's livelihood; the relevant measures should include:

- (a) to establish a five-year plan and service pledges in respect of residential care services for the elderly and community care for the elderly, and strive to increase the number of residential care places for the elderly and community care places for the elderly; to review the Standardized Care Need Assessment Mechanism for Elderly Services; to provide elderly services subsidies for elderly persons by making reference to the mode of the existing education voucher scheme; and to enhance complementary measures for the elderly policy of 'ageing in place';
- (b) to abolish the absence limit in respect of application for Old Age Allowance ('OAA') to enable elderly persons to spend their twilight years on the Mainland without worries, and allow elderly recipients of Disability Allowance to also receive OAA, so as to improve their living;
- (c) to intensify the policy of portable elderly welfare benefits; to provide allowances to elderly persons who return to their hometowns to live, enabling those elderly persons who choose to spend their twilight years in their hometowns to receive a monthly living supplement; to proactively study in conjunction with the relevant Mainland departments the introduction of medical insurance schemes for Hong Kong elderly

- persons living on the Mainland, and consider collaborating with the Mainland to run hospitals or provide out-patient services, so as to serve the Hong Kong people living on the Mainland;
- (d) to propose the introduction of an entirely new ‘elderly maintenance grant scheme’ in addition to OAA and Comprehensive Social Security Assistance (‘CSSA’) Scheme, so as to provide financial assistance to elderly persons who are not eligible for applying CSSA to help them improve their living;
 - (e) to increase the amount of Elderly Healthcare Vouchers to \$1,000, lower the age requirement to 65, streamline administrative arrangements, and encourage the participation of more doctors; and to relax the elderly drug subsidization policy;
 - (f) to expedite resource allocation from the Community Care Fund for providing tooth filling and restoration allowances to the elderly, and strengthen elderly dental care services, including the establishment of dental clinics in the 18 districts, introduction of elderly dental care services and opening public dental clinics for elderly persons’ use, etc.;
 - (g) to expedite the establishment of public Chinese medicine clinics in the 18 districts, and establish additional elderly health centres and increase their membership;
 - (h) to devote resources to strengthen occupational training related to the elderly care service industries, so as to increase manpower for elderly services and care and enhance practitioners’ professional knowledge and quality;
 - (i) to formulate a comprehensive and long-term elderly housing policy, examine afresh the current land planning for earmarking sites for elderly housing purposes, proactively study the introduction of the ‘mixed use development’ concept in private and public housing, and design a residence model which integrates elderly housing and complementary facilities;
 - (j) to expedite the implementation of a ‘mortgage scheme for the elderly’ (i.e. ‘reverse mortgage’), so as to assist elderly persons with private properties in enhancing their finances and improving living environment

- and lives in twilight years, and launch a scheme on ‘making use of residential properties to provide for the twilight years of the elderly’ for elderly property owners who have no means of living and do not have any children;
- (k) to implement the elderly-friendly policy in all public places, effectively enforce the requirements of barrier-free facilities, and provide various types of facilities for elderly persons to facilitate their entry and exit;
 - (l) to motivate various transport operators to offer comprehensive and permanent fare concessions to elderly persons; to enrich elderly persons’ retirement life by introducing ‘recreation and sports vouchers for the elderly’ and waiving admission fees for elderly persons in all exhibition halls under the Leisure and Cultural Services Department, and set up an ‘elderly employment fund’, so as to assist healthy elderly persons in sustaining their employment and giving full play to their abilities; and
 - (m) to ensure that the elderly will be able to maintain a reasonable standard of living, and establish a universal retirement protection system;
 - (n) focusing on the varying quality of private residential care homes for the elderly at present, to take the operating conditions of the sector seriously, and study providing the market with venues which are suitable for operating private residential care homes for the elderly by perfecting the land planning and housing policy; at the same time, to ensure that purchase prices are able to meet the costs of providing quality services; and to promote the voluntary accreditation system for private residential care homes for the elderly, so as to encourage the sector to upgrade its quality;
 - (o) focusing on the continuous increase in the number of dementia patients in the society and the impact on the healthcare, social welfare, law, public order and ethics, etc., to take the gravity of the problem seriously and formulate corresponding proposals, so as to protect dementia patients and their family members;
 - (p) to encourage local radio stations to provide dedicated channels for the elderly, and also to encourage television stations to produce more elderly programmes, so as to provide senior citizens with more free audio-visual entertainment;

- (q) through publicity and education, to proactively advocate the spirit of respecting, loving and caring for the elderly; and
- (r) focusing on the incessant return of Hong Kong elderly persons from the Mainland to Hong Kong in recent years, to formulate a more comprehensive strategy so as to assist such poor and helpless elderly persons in settling down in Hong Kong again and living their twilight years without worries.