

**立法會**  
**Legislative Council**

LC Paper No. CB(2)2278/10-11  
(These minutes have been  
seen by the Administration)

Ref : CB2/PL/WS

**Panel on Welfare Services**

**Minutes of meeting**  
**held on Monday, 9 May 2011, at 10:45 am**  
**in Conference Room A of the Legislative Council Building**

**Members present** : Hon CHEUNG Kwok-che (Chairman)  
Hon WONG Sing-chi (Deputy Chairman)  
Hon Albert HO Chun-yan  
Hon LEE Cheuk-yan  
Hon LEUNG Yiu-chung  
Hon TAM Yiu-chung, GBS, JP  
Hon LI Fung-ying, SBS, JP  
Hon Frederick FUNG Kin-kee, SBS, JP  
Hon Ronny TONG Ka-wah, SC  
Dr Hon LEUNG Ka-lau  
Hon WONG Kwok-kin, BBS  
Hon IP Wai-ming, MH  
Dr Hon PAN Pey-chyou  
Dr Hon Samson TAM Wai-ho, JP  
Hon Alan LEONG Kah-kit, SC  
Hon LEUNG Kwok-hung  
Hon Albert CHAN Wai-yip

**Member absent** : Hon Paul CHAN Mo-po, MH, JP

**Public Officers attending** : Item IV

Ms Irene YOUNG, JP  
Deputy Secretary for Labour and Welfare (Welfare) 2

Mrs Polly CHAN  
Principal Assistant Secretary for Labour and Welfare  
(Welfare) 4

Mr FUNG Pak-yan  
Deputy Director of Social Welfare (Administration)

Items IV and VI

Mr NG Wai-kuen  
Chief Social Security Officer (Social Security) 1  
Social Welfare Department

Item V

Mr Roy TANG Yun-kwong, JP  
Deputy Secretary for Labour and Welfare (Welfare) 1

Mrs Cecilia YUEN  
Assistant Director of Social Welfare  
(Rehabilitation & Medical Social Services)

Dr CHEUNG Wai-lun  
Director (Cluster Services), Hospital Authority

Item VI

Mrs Anna MAK CHOW Suk-har  
Assistant Director of Social Welfare  
(Family and Child Welfare)

Mrs Helen KWOK  
Chief Social Work Officer  
(Rehabilitation & Medical Social Services) 2  
Social Welfare Department

Ms Margaret TAY  
Chief Manager (Integrated Care Programs)  
Hospital Authority

**Attendance by : Item VI  
invitation**

St. James' Settlement

Mr WONG Hung-sang  
Service Manager

Society for Community Organization

Mr NG Wai-tung  
Community Organizer

The Salvation Army Integrated Service for Street  
Sleepers

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Ms TSOI Ling-ling  
In-Charge

Christian Concern for the Homeless Association

Ms CHAU Wai-chun  
Outreaching Supervisor

Ms WONG Man-yin  
Outreaching Officer

Rights For Homeless Concern Group

Mr LAU Ka-hei  
Representative

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

**Staff in attendance** : Ms Yvonne YU  
Senior Council Secretary (2) 4

Miss Karen LAI  
Council Secretary (2) 4

Miss Maggie CHIU  
Legislative Assistant (2) 4

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**I. Confirmation of minutes**

[LC Paper Nos. CB(2)1643/10-11, CB(2)1644/10-11 and CB(2)1687/10-11]

The minutes of the special meetings held on 18 December 2010 and 18 January 2011, and the regular meeting held on 14 March 2011 were confirmed.

**II. Information paper(s) issued since the last meeting**

[LC Paper Nos. CB(2)1549/10-11(01) and CB(2)1661/10-11(01) to (02)]

2. Members noted that the following papers had been issued since the last meeting -

- (a) the Administration's response to concerns raised by Hon WONG Sing-chi about the provision of subvented residential care services;
- (b) the referral from Duty Roster Members regarding the support and assistance for tetraplegic patients living in the community; and
- (c) the referral from Duty Roster Members regarding the welfare policy and support services for new arrivals.

**III. Items for discussion at the next meeting**

[LC Paper Nos. CB(2)1646/10-11(01) to (02)]

3. Members agreed to discuss the following items proposed by the Administration at the next meeting on 13 June 2011 at 10:45 am -

- (a) Progress of the Child Development Fund; and
- (b) Implementation of Financial Assistance Scheme for private residential care homes for the disabled.

4. The Chairman said that the Administration had previously advised that it would revert to the Panel on how to take forward the

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recommendations of the Social Welfare Advisory Committee ("SWAC") on the long-term social welfare planning in the second quarter of 2011. Given that the Administration had yet to advise on the timing for discussion of the subject, the Chairman suggested that the Administration should be invited to provide an update on the matter at the next meeting. Members agreed to add an additional item "Update on the long-term social welfare planning" to the agenda of the next meeting.

**IV. Enhanced support for elders, persons with disabilities and persons in ill health under the Comprehensive Social Security Assistance Scheme, and additional provision for social security recipients**

[LC Paper Nos. CB(2)1639/10-11(01) and CB(2)1646/10-11(03)]

5. Deputy Secretary for Labour and Welfare (Welfare) 2 ("DS(W)2") briefed members on the Administration's proposal to enhance the support for elders, persons with disabilities and persons in ill-health under the Comprehensive Social Security Assistance ("CSSA") Scheme. Specifically, it proposed to raise the monthly standard rates for adult CSSA recipients aged below 60 with disabilities or ill health to the same level as those for elderly CSSA recipients in similar health conditions, and increase the rate of the monthly Community Living Supplement ("CLS") from \$120 to \$250 and extend the coverage of CLS to include CSSA recipients who were either persons with disabilities at non-severe levels or in ill health or elders and who were not living in institutions. The enhanced CLS was expected to benefit about 190 000 people, including about 130 000 new beneficiaries.

6. DS(W)2 said that the Administration also proposed to provide an additional one-off payments to recipients of CSSA, Old Age Allowance ("OAA") and Disability Allowance ("DA"), equal to one month of the CSSA standard rate payments and one month of the OAA and DA respectively, so as to ease the pressure of inflation and rising prices on people's livelihood.

7. The Chairman drew members' attention to rule 83A of the Rules of Procedure on personal pecuniary interest to be disclosed.

8. Whilst welcoming the funding proposals, Mr Albert CHAN asked about the justifications for proposing raising the standard rates for adult

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CSSA recipients aged below 60 with disabilities or ill-health only. Mr CHAN was concerned that the eligibility criteria for DA and the definition of "severely disabled" were unclear as different medical doctors might have different understanding of the criteria and thereby making different recommendations on the eligibility of DA. He appealed to the Administration to ensure consistency and objectivity in the medical assessment. To this end, consideration could be given to adopting different percentages of loss of earning capacity as the basis for determining the amount of DA to be accorded, instead of confining only to persons who were either 50% disabled or 100% disabled.

9. DS(W)2 clarified that the proposal to raise the standard rates for adult CSSA recipients aged below 60 who were either persons with disabilities or in ill health would align the payment levels of adult and elderly CSSA recipients in similar health conditions, i.e. both categories of recipients would be entitled to the same level of standard rate payments. As for the eligible criteria for DA, DS(W)2 said that under the social security schemes, all applicants with disabilities had to undergo a medical assessment conducted by public medical officers of the Department of Health or the Hospital Authority ("HA"). A person was considered to be disabled if he/she was certified by a public medical officer as being in a position broadly equivalent to a person with at least 50% loss of earning capacity according to the criteria in the First Schedule of the Employees' Compensation Ordinance (Cap. 282). A person was considered as in ill health if he/she was aged between 15 and 59 and was certified by a public medical officer as having lost earning capacity but not reaching the level of 50% according to the criteria of Cap. 282.

10. Deputy Director of Social Welfare (Administration) ("DDSW(A)") supplemented that the level of standard rates for adult CSSA recipients was determined having regard to their health condition, including those in ill health. He stressed that the funding proposals sought to, among others, raise the standard rates for adult CSSA recipients aged below 60 who were either persons in ill health or with disabilities, to the same level as those for elderly CSSA recipients in similar health conditions. Besides, extension of the coverage of CLS would also benefit CSSA recipients who were either persons with disabilities at non-severe level, persons in ill health or elders, and who were not living in institutions.

11. Mr Albert CHAN remained concerned that the Administration's proposal failed to benefit those elderly CSSA recipients who were in ill

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health.

12. Ms LI Fung-ying raised no objection to the proposals. In view of the impact of high inflation and housing rental on CSSA recipients, she urged the Government to disburse the additional payments as soon as possible to alleviate the hardship of CSSA recipients. Referring to the proposed adjustment to CLS which represented a two-fold increase, Ms LI commented that the amount of \$250 was indeed too meagre for the disabled persons living in the community to meet expenses on medical treatment and healthcare support. Given that most persons with disabilities had to live in the community simply because they were waiting for a subsidised residential care place, she took the view that the Government should consider raising the level of CLS to be comparable with the fee level of a residential care place such that the recipients could make use of the additional provision to employ domestic helpers to take care of their caring needs at home.

13. DS(W)2 advised that after obtaining the Finance Committee ("FC")'s approval, the Social Welfare Department ("SWD") would make necessary adjustments to its computer system to implement the proposals. It was expected that the additional one-off payments to CSSA, OAA and DA recipients would be effected in July 2011. As for the proposals to increase the standard rates for adult CSSA recipients aged below 60 with disabilities or in ill health and to enhance CLS, SWD would need some time to adjust its computer system to implement the proposal. It was therefore expected that the new payments could be effected in phases in the second half of 2011. DS(W)2 further advised that CLS aimed to provide additional assistance for CSSA recipients who were either persons with disabilities at non-severe levels or in ill health or elders, and who were not living in institutions so as to better support their stay in the community. DS(W)2 stressed that apart from CLS, the CSSA Scheme provided higher standard rates for persons with disabilities together with a range of supplements and special grants. These included grants to cover fees for the Home Help Service/Integrated Home Care Service, costs of the Enhanced Home and Community Care Services and costs of Community-based Support Projects for People with Disabilities and Their Families for those requiring special attention in caring services. For those medically certified to be in need of constant attendance, a care and attention allowance would also be provided to cover the costs of care and attention services at home (including the cost of hiring a carer) on social worker's recommendation.

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14. While expressing support for the proposal to enhance the support for elders, persons with disabilities and persons in ill-health under the CSSA Scheme, Mr LEE Cheuk-yan took the view that the enhanced support should also be extended to those who were living in institutions. Given that the latter had similar special care needs, he saw no reason why they should not be benefitted from the additional assistance. Moreover, in the absence of co-payment arrangement, the additional assistance would help relieve the financial burden of residents of residential care homes to meet the anticipated increased home fees resulting from the implementation of statutory minimum wage. Mr LEE commented that the proposal also failed to provide assistance to those severely disabled who were not on CSSA and were living in the community. As severely disabled persons would normally live with family members such that they could be taken care of, these severely disabled were not eligible for applying for CSSA because of the requirement to make applications on a household basis. He strongly urged the Administration to review such requirement and allow the severely disabled to apply for CSSA on an individual basis.

15. DS(W)2 clarified that all adult recipients aged below 60 who were either persons with disabilities or ill health would be covered under the proposal to raise the standard rates under the CSSA Scheme, irrespective of whether they were living in the community. DS(W)2 said that the Administration was mindful of the need to continuously increase the provision of subsidised residential care places. Additional resources had been earmarked in the 2011-2012 Budget for the provision of more than 1 000 subsidised residential care places for the elderly (including places in nursing homes and care and attention homes) to shorten the waiting list.

16. Pointing out that a motion urging the Administration to enhance support for family carers, including introducing a carer allowance was carried at the Council meeting, Mr WONG Sing-chi expressed disappointment that the Administration had turned a deaf ear to members' repeated requests for the introduction of a monthly carer allowance of \$1,000 to relieve the burden of family carers in taking care of disabled or ill-health family members. He strongly urged the Administration to actively consider the proposal.

17. Sharing a similar view with Mr WONG Sing-chi, Dr PAN Pey-chyou held the view that family carers had devoted considerable efforts to taking care of the elders/disabled persons at home. Some might have quitted their jobs so as to take up the caring responsibilities. To

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enable the elderly in ill health and persons with disabilities to stay in the community had helped relieve the acute waitlisting situation of various types of subvented residential care services. Dr PAN strongly urged the Administration to actively consider the proposal of introducing a carer allowance.

18. DS(W)2 said that the Administration was mindful of the contributions and stress of family carers, and had taken various measures to address their needs. As explained earlier, the CSSA Scheme provided higher standard rates for persons with disabilities together with a range of supplements and special grants to meet their specific needs. Moreover, various types of support services had been provided by the Government to family carers which aimed at helping them discharge their family responsibilities and alleviating their stress, without substituting family functions. This apart, additional funding was earmarked in the 2011-2012 Budget to strengthen the rehabus services. The Government had also launched the Pilot Scheme on Home Care Service for Persons with Severe Disabilities to provide tailor-made home-based support to the severely disabled and to relieve the pressure on their family members.

19. Mr WONG Sing-chi questioned the basis for determining the proposed amount of CLS. In his view, an increase of the monthly CLS to \$250 remained meagre and fragmented to enhance support for the severely disabled to stay in the community, not to mention meeting the expenses for medical consultation and ancillary services. DS(W)2 advised that the proposal to increase the monthly CLS from \$120 to \$250 was drawn up having regard to the needs of the recipients and the resources already available to assist them.

20. While welcoming the funding proposals, the Chairman said that the Administration should consider reviewing the level of monthly CLS as it was on the low side. The Chairman expressed concern about the monitoring mechanism in place to prevent residential care homes for the elderly and persons with disabilities from using the additional CSSA payments of their residents for subsidising home fees.

21. DDSW(A) advised that following the announcement of the proposal to provide one-off payments to CSSA recipients in the past years, SWD would issue letters to individual residential care homes operators reminding them the provision of such payments was a one-off relief measure for CSSA recipients and should not be used for subsidising home fees. SWD

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would follow up complaints and suspected cases on the mishandling of residents' CSSA payments. Should individual residential care homes operators be suspected to have embezzled residents' CSSA payments, the case would be reported to the Police for follow-up and investigation.

22. The Chairman urged the Administration to enhance monitoring of residential care homes to prevent them from embezzling the additional CSSA payments of the residents, and not to act on complaints only.

23. In concluding, the Chairman said that the Panel supported the Administration's proposals for submission to FC.

**V. Proposed Injection into the Trust Fund for Severe Acute Respiratory Syndrome**

[LC Paper Nos. CB(2)1645/10-11(01) and CB(2)1646/10-11(04)]

24. Deputy Secretary for Labour and Welfare (Welfare)1 ("DS(W)1") briefed members on the latest position of the Trust Fund for SARS ("the Trust Fund") and the Administration's proposal to inject \$50 million into the Trust Fund to provide continued financial assistance to incumbent recipients who had not yet recovered from SARS-related dysfunctions, as detailed in the Administration's paper.

25. The Chairman drew members' attention to rule 83A of the Rules of Procedure on personal pecuniary interest to be disclosed.

26. Mr LEUNG Kwok-hung noted that some incumbent recipients had raised concern about the long-term support for them and longer-term arrangement for the Trust Fund. In response to Mr LEUNG's concern about the latest situation of the incumbent recipients, DS(W)1 said that as at mid-April 2011, 147 persons were receiving assistance from the Trust Fund. Of them, one was suffering from musculo-skeletal dysfunction, 61 were suffering from bone-related dysfunction, 11 were suffering from pulmonary dysfunction, 73 whose SARS-related dysfunction was more of psychological nature, and one whose health condition was unsuitable for medical assessment. Apart from receiving medical assessment every six months, each incumbent recipient was being followed up by a dedicated medical social worker or a caseworker of SWD. DS(W)1 added that HA had since 2005 implemented a life-long medical fee waiver arrangement for patients with medical problems relating to SARS. In 2007, the

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Administration had adjusted the criteria for the Trust Fund, which included, among others, lifting the accumulative assistance ceiling of \$500,000 so as to provide continued ex-gratia financial assistance to the recovered and suspected SARS patients upon their reaching the \$500,000 ceiling. DS(W)1 assured members that the Administration would continue to support those patients who had not yet recovered from the SARS-related dysfunctions and were still in need of assistance from the Trust Fund. The Administration would seek Members' support for further injection into the Trust Fund if necessary.

27. Director (Cluster Services) of HA ("D(CS)/HA") added that HA would provide continuous free follow-up medical care to all recovered and suspected SARS patients for their SARS-related dysfunction.

28. The Chairman asked about the basis for proposing an injection of \$50 million into the Trust Fund and when the Trust Fund would be expected to be used up after the commitment of the Trust Fund had been increased.

29. DS(W)1 stressed that the Administration was committed to supporting those patients who had not yet recovered from the SARS-related dysfunctions and were still in need of assistance from the Trust Fund. He said that the proposed additional commitment for the Trust Fund was projected based on the financial assistance currently being provided to the incumbent recipients. He elaborated that of the 147 persons who were receiving assistance from the Trust Fund, about 100 of them were receiving monthly medical assistance ranging from \$1,000 to \$1,500. A total of 44 persons were receiving monthly financial assistance ("MFA") in the region of \$1,000 to \$10,000, 10 were receiving MFA in the region of \$10,000 to \$20,000, and four were receiving MFA over \$20,000. It was reckoned that the total annual payouts would be in the region of \$6 million to \$8 million, and therefore the proposed injection of \$50 million into the Trust Fund should be sufficient to provide continued financial assistance to incumbent recipients under the Trust Fund up to 2018.

30. In response to the Chairman, D(CS)/HA said that no new confirmed case of SARS had been recorded since June 2003. DS(W)1 said that new applications for the Trust Fund had ceased to be accepted as from January 2006, unless HA had medical indication that the potential applicant was likely to be suffering from SARS-related dysfunction.

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31. The Chairman concluded that the Panel supported the funding proposal.

**VI. Support services for street sleepers**

[LC Paper Nos. CB(2)1646/10-11(05) to (06)]

32. Assistant Director of Social Welfare (Family and Child Welfare) ("ADSW(FCW)") briefed members on the existing support services for street sleepers, as detailed in the Administration's paper. ADSW(FCW) elaborated that since April 2004, SWD had been providing subvention to three non-governmental organisations ("NGOs"), namely the Salvation Army, St. James' Settlement and the Christian Concern for the Homeless Association, to each operate an Integrated Services Team for Street Sleepers ("IST") which provided a package of tailor-made and one-stop services for street sleepers. Since the commencement of service in April 2004 and up to March 2011, the three ISTs helped a total of 1 012 street sleepers give up street sleeping and move into different types of accommodation. ADSW(FCW) advised that street sleepers in financial hardship could apply for CSSA to meet their basic needs. Rent allowance was payable to eligible CSSA recipients for meeting accommodation expenses. The maximum rates of the rent allowance ("MRA") were adjusted annually in accordance with the movement of the Consumer Price Index (A) rent index for private housing ("the rent index"). This apart, an allocation of \$70,000 was provided for each of the three ISTs as emergency funds. ADSW(FCW) further advised that SWD would, in collaboration with ISTs and other parties concerned, continue to monitor the street sleeper services and consider introducing further measures if necessary.

Meeting with deputations

*St. James' Settlement*

[LC Paper Nos. CB(2)1336/10-11(01) and CB(2)1726/10-11(01)]

33. Mr WONG Hung-sang said that as revealed from the findings of the survey jointly conducted by St. James' Settlement and Richmond Fellowship of Hong Kong on the health conditions of street sleepers in July 2010, nearly 60% of street sleepers had different levels of symptoms of mental illness. With reference to his experience in providing services to street sleepers, Mr WONG said that public medical officers of the Queen Mary Hospital had repeatedly declined his requests to provide outreach

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assessment services for street sleepers with suspected mental illness. He was disappointed to learn from the Administration's paper that the healthcare staff and social workers might arrange for street sleepers with mental illness to receive services at a safe place agreeable by parties concerned, provided that the safety of the patient, social worker and health worker could be safeguarded. In his view, this implied that outreach services would not be provided at all as it was unable to identify a safe place which was agreeable by parties concerned. Mr WONG further said that as stipulated in the Funding and Service Agreement ("FSA") of the Integrated Community Centres for Mental Wellness ("ICCMWs"), the latter would not provide services to street sleepers.

*Society for Community Organization ("SOCO")*

*[LC Paper Nos. CB(2)1336/10-11(01) and CB(2)1726/10-11(01)]*

34. Mr NG Wai-tung said that the number of street sleepers (414) registered by SWD was underestimated because the computerised Street Sleepers Registry would disregard cases in which the street sleepers had given up street sleeping within the same month. According to SOCO, there were more than 1 000 street sleepers in the territory and 30% of them had given up street sleeping in one month's time. About 38.8% of street sleepers were low-income earners whose monthly median income was \$3,000. Mr NG further said that as a result of an upsurge in rentals for private housing in the recent years, it was difficult, if not impossible, for street sleepers to rent a cubicle in an old private building and live off the street. While the Administration had advised members that there were two multi-storey purpose-built singleton hostels, namely the "Sunrise House" and the "High Street House" remaining in the Singleton Hostel Programme, Mr NG pointed out that the monthly rentals of these two hostels, which ranged from \$1,100 to \$1,265, were beyond the affordability of street sleepers. To meet the accommodation needs of street sleepers, Mr NG strongly urged the Administration to re-open the singleton hostels previously operated by the Home Affairs Department ("HAD") such that street sleepers could live off the street and move into private tenement or temporary shelters.

*The Salvation Army Integrated Service for Street Sleepers*

*[LC Paper Nos. CB(2)1336/10-11(01) and CB(2)1726/10-11(01)]*

35. Ms TSOI Ling-ling said that the staffing establishment of the five urban hostels subvented by SWD was not the same. Having regard to the

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impact of statutory minimum wage on manpower requirement, Ms TSOI pointed out that these hostels were operated under slim workforce. She urged the Administration to review the staffing establishment of these subvented hostels. Ms TSOI further said that the movement of the rent index reflected the movement of the private housing rental of those households whose monthly income ranged from \$4,000 to \$15,000, but not the low-income earners including street sleepers whose monthly income was less than \$4,000. She urged the Administration to review MRA under the CSSA Scheme and increase MRA so as to catch up with the high rental of private housing.

*Christian Concern for the Homeless Association*

*[LC Paper Nos. CB(2)1336/10-11(01) and CB(2)1726/10-11(01)]*

36. Ms CHAU Wai-chun expressed concern about the location and the hygienic environment of the temporary cold shelters provided by HAD. She pointed out that the location of most shelters were usually distant from where street sleepers clustered. In addition, the blankets and mattresses provided to the shelter users were not clean and unhygienic. This explained the relatively low patronage rate of these shelters. She appealed to the Administration to improve the hygienic standards of these centres. To strengthen the outreach services for street sleepers, Ms CHAU urged the Administration to provide more resources to NGOs providing such services.

*Rights for Homeless Concern Group*

37. Mr LAU Ka-hei told the meeting about the difficulties faced by street sleepers. Citing his personal experience as an example, he elaborated on the accommodation needs of street sleepers and their difficulties to reintegrate into the community. Although street sleepers in financial hardship could apply for CSSA, the recipients could hardly save up to cover rental deposit and various expenses. Moreover, those CSSA recipients living in private housing had to cut other expenses so as to top up the difference between the actual rental and the rent allowance under the CSSA Scheme because of the rapid increase in private housing rentals. Mr LAU urged the Administration to review MRA under the CSSA Scheme.

38. In response to the deputations' views, ADSW(FCW) made the following salient points -

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- (a) the Administration had been providing adequate manpower resources for NGOs to operate subvented urban hostels. Under the Lump Sum Grant Subvention System, NGOs were provided with the flexibility to devise their own staffing structure to best suit their unique needs. Nevertheless, the Administration would be happy to review and discuss with individual NGOs about the manpower resources taking into consideration their operational needs and concerns;
- (b) the Administration had always been concerned about the difficulties faced by street sleepers, and would continue to dedicate efforts to helping street sleepers. While SWD had not kept the number of street sleeper who gave up street sleeping in the same month of registration on the Street Sleeper Registry, the Administration was open to have further exchanges with the NGOs concerned for a better way to capture information on the number and service demand of this target group;
- (c) MRA was adjusted annually in accordance with the movement of the rent index. The Administration would closely monitor the latest situation and propose adjustment to MRA if necessary;
- (d) as ICCMW was a new service mode and had just commenced operation in October 2010, its service was currently focused on providing one-stop district-based community support services to discharged mental patients, persons with suspected mental problems, their families/carers and residents living in the community. Nevertheless, some ICCMWs had worked collaboratively with the ISTs in providing services to street sleepers on a case-by-case basis. The Administration would discuss with the service operators later in the year about the scope of services; and
- (e) the Administration attached equal importance to the safety of the patients, social workers and healthcare staff in providing outreach services.

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ADSW(FCW) added that she would convey views relating to the management of the temporary cold shelters and singleton hostels to the

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Home Affairs Bureau ("HAB").

39. Chief Manager (Integrated Care Programs)/HA ("CM(ICP)/HA") said that HA would provide various mental health services to patients in need, including community outreach services, although it would be most suitable if the patients with suspected mental illness would seek assessment services and treatment at the psychiatric outpatient clinics of HA where professional medical staff were there. Notwithstanding this, HA would set up Crisis Intervention Teams in all the seven clusters in 2011 to provide rapid and prompt response to emergency referrals in the community.

Discussions

40. Ms LI Fung-ying noted with concern about the hygiene standards and environment of temporary cold shelters as cited by some deputations. She appealed to the Administration to take concrete actions to ensure that an acceptable hygienic environment was provided for users of temporary cold shelters. Noting that the allocation for emergency funds to each of the three ISTs had been increased from \$50,000 to \$70,000, Ms LI was concerned whether the allocation was adequate to meet the specific purposes of the funds.

41. Mr WONG Hung-sang of St. James' Settlement said that emergency funds were provided for eligible users to cover various expenses, such as short-term rental payment and rental deposit, living costs, travelling expenses for job seeking, and one-off medical expenses, etc. The scope of services provided to street sleepers would depend very much on the availability of funding.

42. Mr LEE Cheuk-yan took the view that the phenomenon of street sleepers was a satire on an affluent society like Hong Kong. Mr LEE expressed grave concern about the trend of a younger age profile of street sleepers and an increasing number of Hong Kong residents who used to work in the Mainland had returned to Hong Kong due to loss of jobs. These returnees were not eligible for applying for CSSA immediately after their return as they could not satisfy the one-year-continuous-residence requirement under the CSSA Scheme, even though they were in genuine hardship. In his view, street sleepers would give up street sleeping only if their accommodation needs were addressed. To this end, the Administration should re-open the singleton hostels to provide affordable hostel places and review MRA such that the rent allowance under the

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CSSA Scheme should be sufficient to meet the actual rental.

43. ADSW(FCW) said that having regard to the practical needs, the allocation for emergency funds for each of the three ISTs had been increased from \$50,000 to \$70,000. This apart, social workers of SWD or NGO service units would, having regard to individual circumstances, assist needy individuals and families through applying for charitable trust funds to help them tide over financial difficulties arising from emergencies. The Administration would monitor the situation and consider adjusting the allocation for emergency funds if such needs arose. ADSW(FCW) further said that the Administration attached great importance to the trend of young street sleepers, and its established policy was to help street sleepers live off the street as early as practicable. While the Administration was mindful of the difficulties faced by the returnees, ADSW(FCW) clarified that in view of the court judgement on the judicial review of the one-year-continuous-residence requirement for CSSA applicants, SWD had shelved this requirement in handling applications for CSSA.

44. Mr LEE Cheuk-yan reiterated his view that HAB should be requested to actively consider re-opening the singleton hostels so as to provide an interim accommodation for street sleepers.

45. Mr IP Wai-ming said that the crux of street sleeping problem was due to an inadequacy of rent allowance for CSSA recipients to meet the rising rental expenses. To address the accommodation needs of street sleepers, he strongly urged the Administration to advance the timetable for a review of MRA without further delay. Mr IP noted that the three ISTs had helped a total of 1 012 street sleepers give up street sleeping and move into different types of accommodation since the commencement of service in April 2004 and up to March 2011, he asked how many of them had returned to street sleeping.

46. ADSW(FCW) explained that MRA was adjusted annually in accordance with the movement of the rent index, and the Administration had no intention to change the adjustment mechanism at the moment. The MRA levels had been reduced in 2003 and frozen since then despite the rent index indicated that there was further room for downward adjustment. The room for downward adjustment of MRA had been reduced gradually over the past few years. The twelve-month moving average of the rent index had returned to more or less the level with reference to which the 2003 adjustment was made. The Administration would monitor closely the

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latest situation, and would adjust MRA in accordance with the established mechanism when necessary. ADSW(FCW) added that the current rent allowance was adequate to cover the actual rental expenses of nearly 90% of CSSA households who were living in private or public housing. The Administration would provide assistance to those who had difficulties in meeting the actual rental having regard to individual circumstances of each case. At the request of Mr IP, ADSW(FCW) would provide information on the number of de-registered cases of street sleepers which were re-registered again, if available.

47. Mr WONG Sing-chi said that to his understanding, ICCMWs would not provide outreach community mental health support services for street sleepers as such service was not stipulated in the relevant FSAs. Given that the Administration had explained earlier that outreach service would be provided in this regard, he sought clarification about the procedure for seeking such services from ICCMWs.

48. ADSW(FCW) said that under the new service mode of ICCMW, according to the collaboration guidelines among ICCMWs and other relevant parties, street sleepers with mental health / suspected mental health problems would be handled by IST and /or the Integrated Family Service Centre first and case could be referred to ICCMW when the street sleeping problem was settled. The Administration would review the service scope and collaboration of ICCMWs with other welfare service units, including ISTs, later in the year. To her knowledge, ICCMWs generally had raised no objection to assisting in the assessment of the street sleepers' need for psychiatric attention, and some of them had in fact worked with ISTs in delivery of services for street sleepers on a case-by-case basis.

49. Responding to Mr WONG Sing-chi, CM(ICP)/HA said that HA would strengthen mental health services through extending the case management program, and setting up crisis intervention teams in all clusters to provide prompt response to crisis involving patients with mental illness who were living in the community and provide enhanced support for high-risk mental patients. If a patient refused treatment and his condition warranted his detention in a mental hospital for observation or treatment, his doctor might apply to the Court for an order for the detention of the patient in a mental hospital for observation and treatment under the Mental Health Ordinance.

50. Mr LEUNG Kwok-hung considered it unacceptable for the existence

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of street sleeping problem in an affluent society like Hong Kong. He expressed grave concern about the hardship faced by street sleepers and called on the Administration to re-open the singleton hostels to address their accommodation needs. In his view, street sleepers were needy persons who should be eligible for the Community Care Fund. As a caring Government, the Administration should adopt a zero tolerance approach in respect of the street sleeper problem and render every assistance to them.

51. Referring to the deputations' joint submission, Dr PAN Pey-chyou noted with concern about an increasing number of street sleepers who were young people with relatively high educational attainment. He also noted from a survey finding which revealed that there was an increasing number of low-income earners in the lowest decile income group had attained tertiary educational qualification. He was gravely concerned about the problem of social upward mobility. Dr PAN said that to his understanding, HA had been providing outreach community psychiatric service. He sought clarification from the deputations under what circumstances did HA refuse to provide outreach assessment and treatment services for street sleepers.

52. Mr NG Wai-tung of SOCO elaborated that while HA would provide outreach community psychiatric service at a place agreeable by the healthcare staff concerned, it was unwilling to provide outreach assessment and treatment services to street sleepers elsewhere. Mr NG added that it was an anomaly that the actual rental of about 50% CSSA households living in private housing exceeded MRA on the one hand, but the Administration advised that on the other hand that the current rent allowance was adequate to cover the rental expenses of nearly 90% of CSSA households.

*[To allow more time for discussion, the Chairman directed that the meeting be extended for 15 minutes from the appointed time.]*

53. Mr Albert CHAN criticized that the assistance and support services for street sleepers had fallen short of those for refugees. Mr CHAN took the view that the housing and social security policies were discriminatory against singleton applicants. This apart, the one-year-continuous residence requirement under the CSSA Scheme would also pose difficulties to street sleepers in seeking immediate assistance to tide over the financial hardship. Given that the street sleeper problem straddled across different

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policy areas, he called on the Administration to strengthen the cross bureaux/departmental efforts to enhance support services for street sleepers.

54. Mr NG Wai-tung of SOCO, Ms TSOI Ling-ling of Salvation Army Integrated Service for Street Sleepers and Mr LAU Ka-kei of Rights for Homeless Concern Group reiterated the difficulties and hardship faced by street sleepers, and urged the Administration to enhance and strengthen the support services for street sleepers, and in particular the provision of temporary accommodation and the community outreach services. To address the accommodation needs of street sleepers, they called on the Administration to review MRA as it could not catch up with the prevailing rental of private housing. They also urged the Administration to review the adjustment mechanism for rent allowance as MRA was adjusted in accordance with the movement of rent index in the past months under the existing adjustment mechanism for rent allowance.

55. ADSW(FCW) said that the rent index was compiled by the Census and Statistics Department based on the movement of the rent index for private housing. As explained earlier, MRA had been frozen since 2003 despite the continuation of a downward trend in the index in subsequent years before rising again in the recent years. She assured members that the Administration would closely monitor the latest situation and propose adjustment to MRA as necessary.

56. CM(ICP)/HA said that it was sometimes difficult for healthcare staff to provide outreach services to conduct preliminary assessment as they could not ascertain the location of the street sleepers with suspected mental illness, although healthcare staff were willing to provide such services. It would be useful if healthcare staff were provided with more information relating to the patients beforehand so that they could provide appropriate assessment and treatments based on the needs of the patients. Nevertheless, it was most desirable for street sleepers with suspected mental illness to receive assessment and treatment services at the psychiatric outpatient clinics of HA.

57. In concluding the discussion, the Chairman said that members generally agreed that the provision of singleton hostels at affordable fees would be a more suitable interim measure to assist the street sleepers, who were mostly unemployed and financially unstable, to live off the street. The Panel would write to HAB requesting it to consider re-opening the

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singleton hostels. This apart, HAB would also be requested to provide a response on the concerns about the location and hygiene standards of temporary cold shelters as raised by some deputations. Members would then consider whether it was necessary to follow up the subject matter at a future meeting after receipt of the response.

58. Regarding the rent allowance, the Chairman said that the Administration should consider reviewing the mechanism for MRA adjustment having regard to the views of members and deputations. He also called on the Administration to take note of the impact of statutory minimum wage on urban hostels and discuss with the NGOs concerned the level of subvention if necessary.

**VII. Any other business**

59. There being no other business, the meeting ended at 1:05 pm.

Council Business Division 2  
Legislative Council Secretariat  
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