

立法會
Legislative Council

LC Paper No. CB(2)1153/11-12
(These minutes have been
seen by the Administration)

Ref : CB2/PL/WS

Panel on Welfare Services

**Minutes of special meeting
held on Monday, 22 August 2011, at 2:30 pm
in the Chamber of the Legislative Council Building**

Members present : Hon CHEUNG Kwok-che (Chairman)
Hon Albert HO Chun-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
Hon Paul CHAN Mo-po, MH, JP
Hon IP Wai-ming, MH
Dr Hon PAN Pey-chyou
Dr Hon Samson TAM Wai-ho, JP
Hon Alan LEONG Kah-kit, SC
Hon Albert CHAN Wai-yip

Members absent : Hon WONG Sing-chi (Deputy Chairman)
Hon LEE Cheuk-yan
Dr Hon LEUNG Ka-lau
Hon WONG Kwok-kin, BBS
Hon LEUNG Kwok-hung

Public Officers attending : Item I

Prof Alfred CHAN Cheung-ming, BBS, JP
Chairman of Elderly Commission

Dr Ernest CHUI Wing-tak
Associate Professor
Department of Social Work & Social Administration
The University of Hong Kong

Mrs Angelina CHEUNG FUNG Wing-ping
Principal Assistant Secretary for Labour and Welfare
(Welfare) 3

Miss Cecilla LI
Assistant Director of Social Welfare (Elderly)

Attendance by : Item I
invitation

The Elderly Services Association of Hong Kong

Ms LI Fai
Chairman

The Hong Kong Psychogeriatric Association

Dr Paulina CHOW
Hon Secretary

Miss Anita WONG
Vice President

Home of the Elderly Consultancy Limited

Mr Jeff NG Chi-fung
Chief Executive

The Hong Kong Council of Social Service

Ms Grace CHAN
Chief Officer (Elderly Service)

Democratic Alliance for Betterment of Hong Kong and
Progress of Hong Kong

Miss SIU Ka-yi
Deputy Spokesperson of Welfare Services

Hong Kong Evergreen Association for Elderly

Mr LO Wei-kai
Vice Chairman

Carer Alliance of Dementia

Miss Elsie KWONG
Chairlady

長者社區服務關注組

Mr SIT Pui-yu
Committee Member

安老服務關注組

Miss YUEN Shuk-yan
Community Organizer

Elderly Rights League (HK)

Ms LAU Sau-kam
Committee Member

The Society for Community Organization Limited

Mr NG Wai-tung
Community Organizer

Mr LO Sou-chour, Member of Tai Po District Council

Association for the Rights of the Elderly (A.R.E.)

Ms Brenda SO Kit-yan
Vice-chairperson

Hong Kong Association of Gerontology

Ms Stella CHEUNG Yuk-har
Executive Director

Monitoring Alliance on Elderly Policies

Ms WONG Lan-kwan
Representative

Ms Ann TSUI Yuk-king
Centre-in-charge

The Salvation Army Senior Citizens Service

Ms LI Sau-lin
Vice-Chairperson

Miss CHAN Man-sing
Social Worker

Care-takers' Concern

Ms CHU Moon-chun
Chairperson

Chinese Grey Power

Ms LO Siu-lan
Chairperson

Grassroots Development Centre

Mr NG Kin-wing
Organizer

The Elderly Care Alliance

Ms TONG Leong-kwan
Convenor

長者社區照顧服務關注組

Mr NGAI Chi-tat

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

Staff in attendance : Miss Karen LAI
Council Secretary (2) 4

Miss Maggie CHIU
Legislative Assistant (2) 4

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I. Consultancy Study on Community Care Services for the Elderly initiated by the Elderly Commission

[LC Paper Nos. CB(2)2279/10-11(01), CB(2)2506/10-11(01) to (04), CB(2)2524/10-11(01) to (02) and CB(2)2535/10-11(01) to (06)]

The Chairman said that at its meeting on 11 July 2011, the Panel was briefed on the findings and recommendations of the final report of the Consultancy Study on Community Care Services for the Elderly ("the Report") initiated by the Elderly Commission ("EC") and conducted by The University of Hong Kong ("the Consultant Team"), and members agreed that deputations should be invited to give views on the Report. The meeting was convened to gauge views on the subject. The major views of 20 deputations attending the meeting are summarised below.

Meeting with deputations

The Elderly Services Association of Hong Kong
[LC Paper No. CB(2)2524/10-11(01)]

2. In support of the recommendations of the Report, Ms LI Fai urged the Administration to formulate concrete measures to implement the recommendations. Specifically, the Association considered that private residential care homes for the elderly ("RCHEs") could be utilised for providing respite and day care services for those elderly living in the community. The Administration should promote better interface between the provision of community care services ("CCS") and residential care services ("RCS") taking into account the unique situation of Hong Kong such as cramped living environment and traditional values of taking care of elders at home. In addition, the proposed voucher scheme for CCS should also be applicable to RCS.

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The Hong Kong Psychogeriatric Association

3. Dr Paulina CHOW said that healthy psychogeriatric conditions of elders was an important factor for elders to age in place, but the Report made no concrete recommendation relating to the psychogeriatric needs of elders. Dr CHOW further said that as the assessment mechanism for elderly services, i.e. Standardized Care Need Assessment Mechanism for Elderly Services ("SCNAMES") focused only on the long-term care needs of frail elders, the Administration should develop an assessment tool specifically to assess the psychogeriatric conditions of elders for the provision of appropriate CCS. The Association expressed reservations with the introduction of means test for CCS. To enable elders to stay in the community, users of CCS could be charged with lower fees after they had used the services for a certain period.

Home of the Elderly Consultancy Limited

4. Mr Jeff NG supported the direction of the recommendations of the Report for enhancement of CCS, in particular the concept of equitable allocation of public resources and targeted provision of services to elders with genuine needs. To encourage the private sector to provide CCS, the Administration should on the one hand monitor the elderly services rendered by the private sector and roll out facilitating measures for its development on the other, such as open tender for service delivery. Considering that the high institutionalisation rate in Hong Kong was a result of the unique living environment, he urged the Administration not to cut the funding for RCS.

The Hong Kong Council of Social Service ("HKCSS")
[LC Paper No. CB(2)2535/10-11(01)]

5. Ms Grace CHAN said that to enhance the service quality of CCS, the Administration should first decide on the types of CCS to be offered under the voucher scheme, and then determined the value of voucher carefully. In addition, the Administration should put in place a licensing system to monitor the service delivery and the proper use of public money. The Administration should also plan for the long-term interface between the public and private sector for the provision of elderly services.

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Democratic Alliance for Betterment of Hong Kong and Progress of Hong Kong

6. Miss SIU Ka-yi said that to facilitate ageing in place, the Administration should strive to create an elderly-friendly living environment by, say, providing singleton elders with subsidies for the installation of barrier-free access facilities to enable elders to integrate with the community. Miss SIU further said that in view of the ageing population, the Administration should build more RCHEs, develop an accreditation system for RCS, expand the scope and service volume of CCS, and provide more training for personnel delivering elderly services.

Hong Kong Evergreen Association for Elderly

7. Mr LO Wei-kai said that although it was most elders' wish to age at home, many frail elders should more appropriately be taken care of in nursing homes, and therefore the CCS voucher scheme should be extended to RCS. While encouraging the private sector to deliver RCS and CCS, the Administration should develop a quality assurance system to ensure the provision of quality services.

Carer Alliance of Dementia

[LC Paper No. CB(2)2506/10-11(02)]

8. Miss Elsie KWONG said that the Report had not studied the care needs of demented persons. The Administration should set up a task force to formulate policies for dementia patients and establish dedicated service centres to provide specialised care services to dementia patients. Allowances should be provided to family carers to alleviate their pressure in taking care of demented elders at home. As for the CCS voucher scheme, Miss KWONG considered that it should not be means tested.

長者社區服務關注組

9. Mr SIT Pui-yu said that the Administration should explore ways to shorten the waiting time for subvented RCHE places. For instance, it should formulate policy to set up subvented RCHEs on lower floors of all new public rental housing estates.

安老服務關注組

10. Miss YUEN Shuk-yan pointed out that the requirement of applying

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for Comprehensive Social Security Assistance ("CSSA") on a household basis was departed from the principle of ageing in place, as many poor elders had to move out of their families and stay at private RCHEs in order to meet the eligibility criteria for CSSA. While supporting the enhancement of CCS, Miss YUEN urged the Administration not to cut the resources for RCS. In addition, the Administration should explore ways to shorten the waiting time for subvented RCHE places and promote the development of elderly services by the private sector.

Elderly Rights League (HK)

[LC Paper No. CB(2)2506/10-11(03)]

11. Ms LAU Sau-kam said that in recognition of the contribution of the elderly to the community, the Administration should expedite the provision of subsidised RCHE places so as to improve the waitlisting situation and relieve the pressure of family carers in taking care of the elderly at home.

The Society for Community Organization Limited ("SOCO")

[LC Paper No. CB(2)2506/10-11(03)]

12. Mr NG Wai-tung said that consequent upon the requirement of applying for CSSA on a household basis, many elders had to reside in RCHEs such that they could apply for CSSA on an individual basis. This contradicted with the policy of ageing in place. In his view, the provision of CCS alone would not alleviate the pressing demand of RCHE places since poor elders would continue staying at RCHEs in order to receive CSSA payments. Instead, the Administration should provide more subsidised RCHE places to shorten the waiting time. Mr NG cast doubt as to whether the Administration would be committed to allocating adequate resources for the launch of the CCS voucher scheme since the minimum unit costs of existing CCS was around \$3,000.

Association for the Rights of the Elderly

[LC Paper no. CB(2)2535/10-11(02)]

13. Ms Brenda SO held the view that the proposed CCS voucher scheme would be discriminatory against elders if it was means-tested given that other public services such as healthcare and education were non-means-tested. While expressing support for the recommendations of the Report, she considered that Hong Kong was yet ready to implement the principle of equitable allocation of public resources since the private

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market had not yet fully developed and no quality assurance system was in place.

Hong Kong Association of Gerontology
[LC Paper No. CB(2)2535/10-11(03)]

14. Ms Stella CHEUNG expressed the following views -

- (a) the existing CCS should be strengthened in terms of service volume and be revamped with a view to adopting the case management approach and providing one-stop integrated services;
- (b) private RCHEs participating in the Enhanced Bought Place Scheme (Category A places) could be invited to provide CCS; and review should be conducted to evaluate the manpower and service quality of these homes;
- (c) more support for family carers of elderly, such as respite services, should be provided to alleviate their pressure;
- (d) retirement protection and medical insurance schemes for the elderly should be introduced to enable them to meet the expenses for long-term care services;
- (e) in support of the direction of introducing a CCS voucher scheme to be underpinned by the principle of equitable allocation of public resources; and
- (f) publicity should be launched to attract more young talents to join the profession of elderly care services.

Monitoring Alliance on Elderly Policies

15. Ms WONG Lan-kwan said that when inviting the private sector to provide CCS, the Administration should critically assess whether the service providers had adequate manpower and relevant experience for service delivery. On the other hand, the Administration should allocate more resources for the provision of subsidised RCHE places. As for the CCS voucher scheme, Ms WONG objected to the proposal of adopting a sliding scale of subsidies and cautioned that it would increase the financial burden of the middle class. She added that a monitoring body

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comprising representatives of elders and family carers should be in place to ensure the service quality of CCS.

The Salvation Army Senior Citizens Service
[LC Paper No. CS(2)2506/10-11(04)]

16. Ms LI Sau-lin supported the introduction of a means test mechanism for the CCS voucher so that those with better financial means would pay more. The level of subsidies of the voucher could be adjusted according to the financial conditions and long-term care needs of the eligible elders. That said, the application procedures should be simple and easy in order to reduce administration cost, and publicity should be launched on how to use the vouchers. Incentives should also be provided for self-financing/private service providers to encourage them to participate in the provision of CCS.

Care-takers' Concern
[LC Paper No. CB(2)2535/10-11(04)]

17. Ms CHU Moon-chun said that elders should be provided with appropriate long-term care support according to their physical and health conditions, instead of based on their financial conditions. For those elders who were assessed to have intensive care needs or suffering from dementia, the Administration should provide them with immediate RCHE places. As for the principle of equitable allocation of resources for elderly services, Ms CHU took the view that the interests of both the middle and lower classes must be safeguarded.

Chinese Grey Power
[LC Paper No. CB(2)2524/10-11(02)]

18. Ms LO Siu-lan said that with the huge reserve surplus, the Administration should allocate more resources for the provision of elderly services, for example, to shorten the waiting time for subvented RCHE places and enhance CCS in terms of quality and quantity.

Grassroots Development Centre
[LC Paper No. CB(2)2535/10-11(05)]

19. Mr NG Kin-wing pointed out that not all elders were suitable for "ageing in place". Elders who were waitlisted for admission to subsidised RCHEs had been assessed to have long-term care needs under

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SCNAMES. He called upon the Administration to formulate long-term elderly policy and allocate more resources for enhancing RCS. This apart, the Administration should implement a universal retirement protection scheme to better protect the retirement life of the poor elderly. Mr NG further said that the Administration should be prudent in taking forward the proposal of privatisation of elderly services and enhance the interface between the medical services and CCS. Lastly, Mr NG opposed to the introduction of any form of means-test elderly care services.

The Elderly Care Alliance

20. Ms TONG Leong-kwan said that in the light of the cramped living environment, it was understandable that the institutionalisation rate was relatively higher in Hong Kong. The Administration should continue to increase the provision of RCS in parallel with further enhancing CCS. Ms TONG expressed support for the introduction of CCS voucher scheme, and the proposal to invite private sector to deliver CCS so as to provide more choices for elders and their carers. This would also alleviate the Administration's imminent pressure to set up new RCHEs. Ms TONG agreed that better interface could be developed between RCS and CCS, for example, CCS operators could collaborate with RCHE operators and utilise RCHEs to provide day care services for the elderly. Lastly, she appealed to the Administration to formulate a long-term elderly policy, allocate more resources for the provision of elderly services, and encourage the private sector to join the market.

長者社區照顧服務關注組

21. Mr NGAI Chi-tat expressed concern that in the absence of a monitoring mechanism and as shown from the experience of substandard services of some private RCHEs, the service quality of CCS under a voucher scheme was doubtful. He also expressed reservations with the means-test mechanism for the voucher scheme. Mr NGAI considered that the value of the voucher should be fixed at a level that elders could buy quality services, and reference could be drawn to the cost for the Enhanced Home and Community Care Service and centre-based day care service, i.e. \$3,200 and \$7,000 respectively. Mr NGAI added that apart from the CCS voucher scheme, the Administration should allocate more resources to enhance the quality and quantity of elderly services and consider introducing carers' allowance for family carers of elders.

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Discussion

22. Prof Alfred CHAN, Chairman of EC, thanked the deputations for their views and suggestions. He said that while it would be for the Administration to decide on its way forward in respect of the recommendations of the Report, EC fully recognised the challenges in the provision of the long-term care services in Hong Kong and would continue to carry out study on individual subjects.

23. Principal Assistant Secretary for Labour and Welfare (Welfare) 3 ("PAS(W)3") said that the Administration agreed in principle with the overall thrust of the Report, but it would take time to study the recommendations in greater detail as it was only released in June 2011. It would revert to the Panel on its way forward for the recommendations in due course. In response to the deputations' concerns about the long waiting time for subsidised RCHE places, PAS(W)3 said that the Administration had been committed to providing more places. Notably, there would be an additional 2 300 subsidised RCHE places from now to 2014-2015, and an additional 1 500 places for the home-based care services and about 200 places for centre-based day care services in 2011-2012. PAS(W)3 advised that the waiting time for subsidised RCHE places would not be very long if elders on the waiting list had no preference for specific RCHEs or location.

24. Dr Ernest CHUI of the Consultant Team said that the consultancy study aimed to, among others, examine ways to strengthen CCS for elders, and the Report set out the findings and recommendations for more focused discussion. The Consultant Team considered that in the development of long-term care services in Hong Kong, certain values and principles should be adopted, notably shared responsibilities among the individual, the family, the community, the market and the Government, and equitable allocation of resources in which the allocation of public subsidised services should be prioritised to those with most genuine needs. In line with the principles, the Consultant Team recommended the introduction of a CCS voucher scheme underpinned by a means test, with the Government subsidy at different levels for users with different care needs and financial conditions.

25. Mr Albert CHAN expressed concern that the Administration would shrink its responsibility of providing welfare services to those who were financially incapable, if the principle of shared responsibilities of care was to be adopted. Mr CHAN took the view that the Report had not

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elaborated on the role of the Government in the provision of welfare services or formulated the roadmap and timetable for taking forward the recommendations of the Report. Mr CHAN sought clarification from EC about the values and principles underpinned the consultancy study.

26. Chairman of EC advised that the objective of the EC study was to examine ways to strengthen CCS for elders through a more flexible approach and diverse mode of service delivery. In the light of the ageing population and anticipated decreasing workforce, the Consultant Team was tasked to study the sustainability of the elderly services on the assumption that the prevailing low tax regime would remain unchanged and the service provision would be no worse off than the existing ones. The recommendation of introducing CCS voucher based on the principles of affordability and shared responsibility might help to address the varying needs of different sectors of the older population and throw light on the discussion on the effective use of public resources. Chairman of EC further advised that overseas experiences revealed that effective CCS could reduce or delay institutionalisation, this was in line with the Government's policy of "ageing in place as the core, institutional care as back-up". Moreover, service users were also encouraged to share the expenses by co-payment.

27. Mr Ronny TONG held the view that the issues of concern raised by deputations were not something new, but the Report had not addressed the fundamental problems of elderly services. Mr TONG said that it was sometimes beyond the capability of individual families to take care of frail elders at home. He asked if the Administration had conducted study on the respective numbers of elders suitable for ageing in place and elders who needed intensive care at RCHEs.

28. PAS(W)3 said that as shown from the findings of the EC studies on RCS and CCS, it was most elders' wish to age at home. While embracing the principle of ageing in place and further enhancing the provision of CCS, the Administration would continue to increase the provision of subsidised residential care places to take care of those elders in need. PAS(W)3 further said that of the elders who were assessed to be eligible for long-term care services under SCNAMES, more than 30% of those who were assessed to have severe level of impairment and more than 60% of those who had moderate level of impairment were recommended a dual option for subsidised RCS or CCS, meaning that these elders were suitable for ageing at home if sufficient CCS was provided to them.

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29. Chairman of EC pointed out that it was difficult to estimate the number of elders who were suitable to age in place, given that many factors would be attributable to the decision of individual elders, such as the living environment. Chairman of EC advised that the Report aimed to study ways to strengthen CCS for elders through which the elders could choose specific CCS according to their own needs. Chairman of EC said that to his knowledge, one of the major difficulties encountered in increasing the provision of subsidised RCHE places was a lack of suitable premises. He appealed to members to help solicit local support for setting up new homes.

30. Dr Ernest CHUI of the Consultant Team supplemented that while the statistics requested by Mr TONG was beyond the scope of the study of the Consultant Team, reference could be drawn to the relevant statistics released by the Census and Statistics Department. For instance, of the some 230 000 foreign domestic helpers in Hong Kong, about 17% were working in families with elderly members. This apart, the number of families comprising singleton elderly and elderly couple as well as the number of elders who were assessed to have long-term care needs under SCNAMES would provide the basis for projecting the statistics as requested by Mr TONG. That said, the suitability of individual elders to age in the community would be affected by many factors, such as the charges of different types of CCS and the living environment.

31. Dr PAN Pey-chyou expressed disappointment at the Report for not studying how to improve support services for demented elders and their family carers, nor making concrete recommendations on the way forward to address the increasing service demand from people suffering from dementia.

32. Chairman of EC advised that in view of an ageing population, EC had a long-term care working group which looked into the community support services for elders suffering from dementia among others. Dr PAN requested EC to provide the work plan of the working group on dementia to the Panel when available such that the Panel would consider to follow up the subject in due course.

33. Noting that most elders preferred to age at home, Mr TAM Yiu-chung held the view that in addition to further enhancing the existing CCS, other support services such as providing more day respite services could relieve the demand for RCS. Mr TAM considered that the

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proposed means-test voucher scheme for CCS should also be extended to RCS to enable elders to have more choices for RCHEs according to their own needs. Mr TAM added that the delivery points of CCS should be located in the vicinity of the residence of the service users. Moreover, in implementing the CCS voucher scheme, the Administration should develop a quality assurance system to ensure the delivery of quality service.

34. Chairman of EC said that should the Administration accept the proposed voucher scheme for CCS, EC could offer further advice on how to take it forward.

35. Mr LEUNG Yiu-chung took a strong view that elders with long-term care needs should be admitted to nursing homes if they so wished. Hence, instead of exploring ways on how to further enhance CCS to enable elders to age in place, the Administration should increase the provision of RCHE places to alleviate the shortage situation. He appealed to EC to play an active role in this respect.

36. Chairman of EC explained that the Report aimed to examine ways to strengthen CCS for elders such that they could have more choices of service delivery if they wished to age in place. Dr Ernest CHUI added that as shown from overseas experience, most elders had expressed their wish to age in place and it was against this background that the consultancy study was conducted. He stressed that further enhancement of CCS did not necessarily imply that the provision of RCS should be reduced correspondingly.

37. Sharing the concerns of Dr PAN Pey-chou, Mr LEUNG Yiu-chung took the view that the provision of support services for demented persons should not be studied under the context of elderly services, having regard to the increasing trend of younger people suffering from dementia. Mr LEUNG called upon the Administration to provide dedicated service centres for all demented patients and their families.

38. PAS(W)3 responded that as dementia was one of the common diseases that struck in the old age, the Administration adopted an integrated approach to ensure a continuum of care for the demented elders. In addition, Dementia Supplement was provided to subvented RCHEs, private RCHEs participating in the Enhanced Bought Place Scheme and subsidised day care centres for the elderly.

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39. The Chairman pointed out that demented persons aged below 60 were not eligible for subsidised CCS. In view of an increasing younger population suffering from dementia, he called on the Administration to critically examine the support services for the younger demented persons.

Admin

40. Chairman of EC responded that EC had since 2010 discussed with the Food and Health Bureau ("FHB") the support services for persons with dementia including the younger patients. At the request of Mr LEUNG Yiu-chung, the Administration would provide further information on the care and support services for dementia patients, in particular those aged below 60.

(Post-meeting note: The information requested was provided in the Administration's paper (LC Paper No. CB(2)428/11-12(01)) for the joint meeting of the Panel on Health Services and Panel on Welfare Services held on 5 December 2011.)

41. Mr IP Wai-ming said that to support the policy of ageing in place, it was incumbent upon the Administration to create an enabling environment for elders to stay at home, such as the provision of carers' allowance to family carers of elders. In his view, the provision of RCS should be the policy objective for meeting the long-term care needs of the elderly. Noting from the Report that the provision of CCS would serve as incentive to encourage elderly applicants for subsidised long-term care services and who were offered a dual option for CCS and RCS under SCNAMES to opt for CCS, Mr IP sought more information as to whether EC had studied the details of the voucher scheme, for example, the value of the proposed CCS voucher and monitoring mechanism to be put in place.

42. Chairman of EC agreed that an elderly-friendly environment was crucial for elders to age in place. The Report had looked into the provision of existing CCS and recommended improvements to subsidised CCS such as service hours and mode of services. The Report also recommended encouraging social enterprises and the private sector to develop related services. On the value of the CCS voucher, Chairman of EC said that EC had not yet recommended a specific value of the CCS voucher, and reference could be drawn from the unit costs of subsidised CCS, which ranged from \$1,300 to \$6,000. Chairman of EC further said that the provision of CCS voucher would serve as an incentive to encourage eligible elders who were waiting for RCS to opt for CCS under the dual option system, and they would remain on the waiting list for subsidised RCHEs while using the voucher.

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43. The Chairman was of the view that elders who were assessed to be eligible for subsidised long-term care services under SCNAMES had demonstrated their needs for RCS. These elders had to stay in the community simply because of lacking subsidised RCHE places to accommodate them right away. Referring to the proposed CCS voucher scheme, the Chairman enquired about the types of CCS to be covered under the voucher scheme and the implementation timetable as well as the financial implications of the means test for the voucher scheme on the middle class users. The Chairman further enquired about the manpower projection for implementing the case management approach if so adopted.

44. Chairman of EC said that the introduction of case management approach in CCS delivery could enhance effective coordination between the service users and various service providers. Successful implementation of case management approach would depend on the availability of competent case managers in the frontline. Currently, professionals such as nurses, physiotherapists and occupational therapists had been playing the role of case managers in elderly service delivery. Nonetheless, more resources should be provided to strengthen the manpower resources for taking forward the case management approach. As regards the proposed CCS voucher scheme, Chairman of EC advised that elders who were assessed to be eligible for subsidised long-term care services under SCNAMES would be eligible for the CCS voucher. To adopt the principle of shared responsibility, it was proposed that a sliding scale of varying degrees of provision or fee charged to the subsidised services, so that those of better financial conditions would be required to pay higher fee. Nonetheless, subsidised CCS would be provided to those who were financially incapable. Dr Ernest CHUI of the Consultant Team referred members to Table 3.6 of the Report and added that the scope of existing CCS in Hong Kong met the international standards.

45. PAS(W)3 said that following the release of the Report in June 2011, the Administration was carefully considering the recommendations of the Report having regard to views of the stakeholders. It would revert to the Panel on its way forward in the next legislative session.

46. At the invitation of the Chairman, the following deputations had made supplementary views -

- (a) Mr NG Wai-tung of SOCO expressed disappointment at the

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Government's lack of sincerity to alleviate the waitlisting situation for subsidised RCHE places and identify suitable sites for setting up new RCHEs as well as refusal to remove the requirement for elders to apply for CSSA on a household basis;

- (b) Miss Anita WONG of the Hong Kong Psychogeriatric Association urged the Administration to critically examine the policy of "ageing in place be the core service and residential care services as supporting", having regard to the long waitlisting situation for subsidised RCHE places. To pursue the principle of co-payment for CCS, she drew members' attention to the fact that family carers had already met partial cost of CCS in kind by taking care of elders at home;
- (c) Ms LI Sau-lin and Ms CHAN Man-sing of the Salvation Army Senior Citizens Service called on the Administration to introduce a carers' allowance for family carers of elders to enable elders to age in place and increase the supply of RCS by, say, earmarking sites in new public housing estates for setting up new homes;
- (d) Ms TONG Leong-kwan of the Elderly Care Alliance considered that Dementia Supplement should also be provided to private RCHEs and demented elders living in the community and receiving subsidised CCS. She called on the Administration to abolish the requirement for elders to apply for CSSA on a household basis;
- (e) Ms Grace CHAN of HKCSS urged the Administration to gauge views of the stakeholders and roll out concrete action plans to implement the recommendations of the Report as early as practicable;
- (f) Ms Brenda SO of the Association of the Rights of the Elderly called on the Administration to study the recommendations of the Report to further enhance the provision of CCS; and
- (g) Mr LO Wei-kai of the Hong Kong Evergreen Association and Mr NG Kin-wing of the Grassroots Development Centre reiterated that the provision of CCS alone could not fully meet the long-term care needs of elders. It was Government's

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responsibility to allocate more resources for increasing the supply of subsidised RCHE places to meet the long-term care needs of elders.

47. Responding to the deputations, PAS(W)3 stressed that the Administration was committed to increasing the provision of subsidised RCHE places. Notably, it had earmarked 10 sites for setting up new RCHEs in the coming years. She pointed out that should individual elders have no specific preference for a RCHE or its location, the waiting time for a subsidised place would be much shorter. As for the requirement for elders to apply for CSSA on a household basis, Assistant Director of Social Welfare (Elderly) said that the CSSA Scheme, which was a non-contributory scheme, aimed to provide a safety net of last resort to those with genuine financial needs. The requirement for applicants to apply for CSSA on a household basis was in line with the policy of promoting family support to each other.

48. In closing, the Chairman urged the Administration and EC to give due consideration to the views and concerns of the stakeholders in taking forward the recommendations of the Report. The Panel would follow up the subject again when the Administration reverted to the Panel in the next legislative session.

II. Any other business

49. There being no other business, the meeting ended at 5:22 pm.