

For information on
11 March 2013

**Legislative Council
Panel on Welfare Services**

**Manpower Situation of Non-professional Front-line Care Staff in
Subvented Residential Care Homes for the Elderly and
Community Care Services for the Elderly**

Purpose

This paper informs Members of the manpower situation of non-professional front-line care staff in subvented residential care homes for the elderly (RCHEs) and community care services for the elderly (CCS) in Hong Kong.

Background

2. The Administration informed Members of the general manpower situation of RCHEs in Hong Kong vide LegCo Paper No. CB(2)632/12-13(01) at the Joint meeting of the Panel on Manpower and Panel on Welfare Services on 19 February 2013. This paper focuses on the manpower situation of non-professional front-line care staff in subvented RCHEs and CCS.

3. Subvented RCHEs are operated by non-governmental organisations (NGOs) receiving lump sum grant (LSG) subventions from the Social Welfare Department (SWD). Under LSG, the NGO management has autonomy and flexibility in the deployment of subvention resources to meet the service needs. As of 1 January 2013, there were 127 subvented RCHEs, including six nursing homes, 115 care-and-attention (C&A) homes, five aged home cum C&A homes, one aged home cum self-care hostel.

4. Subsidised CCS include subsidised day care services provided at day care centres/units for the elderly (DEs/DCUs), and subsidised home care services (i.e. the Integrated Home Care Services (IHCS) and Enhanced Home and Community Care Services) run by NGOs. As of 1 January 2013, there were a total of 64 DEs/DCUs and 85 home care teams.

Manpower Situation of Subvented RCHEs

5. The Residential Care Homes (Elderly Persons) Ordinance (Cap. 459) and the Residential Care Homes (Elderly Persons) Regulation (Cap. 459A) provide for the regulation of all RCHEs, including subvented RCHEs, through a licensing system administered by the Director of Social Welfare (DSW). While the manpower provision of subvented RCHEs is regulated by the statutory requirements, they are also bound by service requirements. Details are given below.

(A) Statutory Requirements for all RCHEs

6. The minimum staffing requirements of non-professional front-line care staff of the respective types of RCHEs as set out in Schedule 1 of Cap. 459A are as follows:

Type of Staff	Type of RCHEs ¹		
	C&A Home	Aged Home	Self-care Hostel
Care worker (CW)	a. 1 CW for every 20 residents or part thereof, between 7 a.m. and 3 p.m.; b. 1 CW for every 40 residents or part thereof, between 3 p.m. and 10 p.m.; c. 1 CW for every 60 residents or part thereof, between 10 p.m. and 7 a.m.	No CW is required	No CW is required

¹ As at end of December 2012, there were a total of 750 licensed RCHEs, of which 731 were C&A homes, 18 were aged homes and 1 was a self-care hostel.

Type of Staff	Type of RCHEs ¹		
	C&A Home	Aged Home	Self-care Hostel
Health worker (HW)	Unless a nurse is present, 1 HW for every 30 residents or part thereof, between 7 a.m. and 6 p.m.	Unless a nurse is present, 1 HW for every 60 residents or part thereof	No HW is required

Note :As an additional requirement for a C&A home or an aged home, any two persons, being a home manager, an ancillary worker, an CW, an HW or a nurse, shall be on duty between 6 p.m. and 7 a.m.

7. While respective types of RCHEs should at all times meet the above minimum staffing requirements, those RCHEs providing NH places have to be registered under the Hospitals, Nursing Homes and Maternity Homes Registration Ordinance (Cap. 165) enforced by the Department of Health (DH) and are required to meet the staffing standard under that Ordinance too.

(B) Service Requirements for subvented RCHEs

8. Subvented RCHEs, in addition to the staffing standard as specified under Cap. 459A, are required to comply with the staffing provision under the “essential service requirements” of the Funding and Service Agreements (FSA)² signed between the RCHE operators (i.e. NGOs) and SWD. Under the LSG approach, NGOs have the flexibility in deploying the allocated provisions to arrange suitable staffing and determine the salary level in order to meet service needs and ensure service quality.

Manpower Situation of CCS

9. NGOs running DEs/DCUs and home care teams are also required to comply with the staffing provision under the “essential service

² For example, the staffing requirement for C&A homes under FSA includes “registered social worker, qualified nurse and professional therapist, e.g. occupational therapist/physiotherapist”, while additional CWs are required for C&A home with a continuum of care.

requirement” of FSA³ signed between the NGO operators and SWD. Similarly, under the LSG approach, the NGO operators have the flexibility in deploying the allocated provisions to arrange suitable staffing and determine the salary level. The major type of non-professional front-line care staff engaged in CCS are CWs.

SWD’s measures in increasing the manpower supply of front-line care staff for the elderly care sector

10. The Administration fully understands the escalating manpower demand of the sector in view of the existing service provision and the planned service expansion in the coming years. To this end, SWD has put in place the following measures to increase the manpower supply of front-line care staff with a view to enhancing the service quality of the sector.

HW

11. It is specified in Cap. 459A that only HWs registered under the Regulation can be employed as HW in RCHEs. To qualify for the HW registration, a person should have completed an approved training course and satisfy DSW that he is a suitable person to be so registered. As of 1 January 2013, there were around 12 200 registered HWs in Hong Kong.

12. Training courses for HWs are offered by different training bodies in Hong Kong. All these courses have been approved by DSW in accordance with the requirement under the Cap. 459A with standardised training content, training hours and format of assessment. As of 1 January 2013, there were 31 training bodies, including NGOs and tertiary institutions, organising 54 approved training courses for HWs for RCHEs. More than 1 500 HWs are trained by these training bodies annually to meet the manpower demand of the RCHE sector. In 2012-13, 16 out of the 54 approved courses are funded by the Employees Retraining Board (ERB) while others are offered on a self-financing basis.

CW

³ For example, the staffing requirement for DEs/DCUs (after in-situ expansion) under FSA is that “there should be enrolled/registered nurse at DE/DCU at all times during the service hours”, while that for IHCS is that “there should be registered social worker in the agency and district-based IHCS Team”.

13. There is no specific qualifications requirement for the post of CW. As of 1 January 2013, around 8 600 CWs were employed by RCHEs in Hong Kong. SWD does not keep the number of CWs working in DEs/DCUs or home care teams. Although there is no compulsory training for CWs required by law, various training bodies provide training courses or topical training courses on elderly care for CWs. For instance, ERB offers training course on “Certificate in Care Worker Training” and “Certificate in Elderly Home Care Training” for in-service CWs or interested persons. In 2012-13 (up to end-December 2012), there were about 600 persons enrolled in the “Certificate in Care Worker Training”⁴. Moreover, SWD and DH have been jointly providing training for RCHE care staff including CWs on a regular basis. About 2 100 care staff of RCHEs attend these training programmes annually.

Higher Care Supplements

14. Apart from providing training to front-line care staff in the elderly care sector, SWD also provides Dementia Supplement (DS) to subvented RCHEs, RCHEs participating in the Enhanced Bought Place Scheme (EBPS) and subsidised DEs/DCUs, and Infirmary Care Supplement (ICS) to subvented RCHEs and EBPS homes. The supplements allow them to employ professional and care staff to provide enhanced care to demented and infirm elderly. RCHEs can deploy both DS and ICS to employ care staff⁵, and DEs/DCUs can use DS to engage these staff. The total provision of ICS and DS for RCHEs, including EBPS homes, in 2012-13 is \$90 million and \$191 million respectively.

Advice Sought

15. Members are invited to note the content of this paper.

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⁴ There was no class of the course on "Certificate in Elderly Home Care Worker Training" during the said period.

⁵ Prior approval from SWD is required if an RCHE is to use DS to employ care staff.