

For discussion on
8 July 2013

LC Paper No. CB(2)1483/12-13(04)

Legislative Council Panel on Welfare Services Development of Review of Disability Allowance

Purpose

This paper reports the development on the review of the Disability Allowance (DA).

Inter-departmental Working Group on Review of the Disability Allowance

2. At the meeting of this Panel on 25 February 2013, Members were informed that the Labour and Welfare Bureau (LWB) had set up an inter-departmental working group (the Working Group) to follow up the issue of “allowing people with loss of one limb to apply for DA” as stated by the Chief Executive in his Manifesto and Policy Address. Details are in LC Paper No. CB(2)665/12-13(01). The latest position of the review is set out in the ensuing paragraphs.

Present Position of DA

3. DA, currently under the Social Security Allowance (SSA) Scheme, is a non-contributory and non-means-tested cash allowance introduced in 1973. The objective is to help people with severe disability to meet their special needs arising from such disabling condition. At present, an applicant for DA must be severely disabled and as a result needs substantial help from others to cope with daily life. The injuries which result in 100% loss of earning capacity as listed under Schedule 1 to the Employees' Compensation Ordinance (Cap. 282) have been adopted as the standard. Examples include loss of two limbs, loss of both hands or of all fingers and both thumbs, loss of both feet, total loss of sight, total paralysis, injuries resulting in being permanently bedridden, etc. (see **Annex 1** for details). An applicant for DA has to be assessed by a doctor of the Department of Health (DH) or the Hospital Authority (HA) (or, under very exceptional circumstances, a registered doctor of a private hospital) as severely disabled as defined under DA, and that such condition will persist for at least six months. However, the above professional medical assessment would not take into account

whether the applicant is employed or not. To be eligible for DA, applicants have to satisfy other eligibility criteria¹ as well.

4. As to disabilities not clearly defined under the Employees' Compensation Ordinance, a Medical Assessment Form has been in use since 1994 for doctors to conduct professional medical assessment in determining whether an applicant is severely disabled to the extent that substantial help from others is required to cope with the following daily activities –

- (a) working in the original occupation and performing any other kind of work for which he/she is suited;
- (b) coping with self-care and personal hygiene including feeding, dressing, grooming, toileting and bathing;
- (c) maintaining one's posture and dynamic balance while standing or sitting in normal daily activities, managing indoor transfer (bed/chair, floor/chair, toilet transfer), and travelling to clinic, school and workplace; and
- (d) expressing oneself, communicating and interacting with others including speaking, writing, utilising social (community) resources, seeking help from others and participating in recreational and social activities.

An applicant is considered in a position of disability broadly equivalent to the injuries mentioned in paragraph 3 above and thus may apply for DA if his/her disabling condition is assessed by the doctors as having resulted in a lack of ability or volition to perform the above activities to the extent that substantial help from others is required. The above criteria also apply to the assessment of disabled persons with more than one disabling condition.

5. The Government introduced the Higher DA in 1988. In addition to meeting the eligibility criteria set out above, applicants for Higher DA must be assessed by doctors of DH or HA as in need of

¹ For example, the pre-application residence requirements, and whether the applicant is not receiving other allowance under the SSA Scheme or assistance under the Comprehensive Social Security Assistance Scheme.

constant care of others in their daily life, and they are not receiving care in residential institutions subsidised by the Government (including subsidised places in subvented/contract homes and residential care homes under various bought place schemes) or public hospitals and institutions under HA, or boarding in special schools under the Education Bureau. The subsidy of Higher DA is twice the amount of Normal DA.

6. The current monthly rates are set at \$1,450 for Normal DA and \$2,900 for Higher DA. As at end-March 2013, there were a total of about 147 000 DA cases. The expenditure on DA was about \$3 billion in 2012-13.

Progress of the Working Group

7. As mentioned in paragraph 2 above, we reported to the Panel on the terms of reference and major work directions of the Working Group in February 2013. In view of the fact that the Chief Executive stated in his Manifesto and Policy Address the issue of “allowing people with loss of one limb to apply for DA”, the Working Group mainly focuses on the review of the eligibility criteria for DA, assessment of the implications of various options on policy, implementation, finance and other related areas, and make recommendations.

8. The Working Group reported to the Commission on Poverty (CoP)’s Social Security and Retirement Protection Task Force on the latest progress of the review in January and June this year. We have also consulted the Rehabilitation Advisory Committee during the process. In addition, we met with the stakeholders (including the Hong Kong Council of Social Service, the Hong Kong Society for Rehabilitation, academics, etc.) at the early stage of the review to understand their concerns. The major views include –

- (a) most indicated that the Government should not simply address the issue of “loss of one limb”, but should also consider how to define and address disability levels comparable with and more severe than “loss of one limb” (but not yet severely disabled). Nonetheless, there were also views that when conducting the review, the Government should address the relatively straightforward issues before tackling the more difficult ones. Those “visible” disabilities (such as “loss of one limb”) should be handled first, while the more complicated “invisible”

disabilities (such as “visceral disability”) can be dealt with separately;

- (b) there were also views that since DA is a non-means-tested cash allowance and the level of disability for “loss of one limb” is lower than the existing eligibility criteria for Normal DA, it may be acceptable if the amount of allowance reflects the corresponding degree of disability upon the relaxation of DA’s eligibility criteria;
- (c) there were also views that consideration should be given to relaxing the eligibility criteria for the Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities (the Concession Scheme) to cover people with loss of one limb or people with similar or more severe level of disability (but not yet severely disabled); and
- (d) another major issue of concern is the implications of relaxing the eligibility criteria for DA and the Concession Scheme² on government policies, public finance and the healthcare system.

9. Having considered the above, the discussion of the Working Group in its past meetings mainly focused on the eligibility criteria for DA, impact assessment and experience related to allowances for disabled persons in other places, etc. The initial observations are set out in the paragraphs 10 to 14 below.

10. According to the current eligibility criteria for DA, those people with “loss of one limb” only are not eligible for DA. However, people with “loss of one limb” are eligible for DA if they are assessed by doctors as severely disabled due to individual conditions and/or other physical conditions (e.g. disabling conditions beyond “loss of one limb”)

² In 2012-13 and 2013-14, the actual and estimated expenditure on reimbursement to various public transport operators for the fare revenue forgone owing to the implementation of the Concession Scheme are \$226 million and \$597 million respectively. As the mobility of people with loss of one limb and people with comparable levels of disability is higher than that of the existing beneficiaries of the Concession Scheme, relaxing the eligibility criteria for the Scheme will see an increase in the number of recipients. We estimate that the expenditure will increase substantially.

according to the criteria mentioned in paragraph 4 above, and may apply for DA. As at the end of May this year, about 260 persons with loss of one limb or function of one limb were receiving DA owing to the aforesaid reasons. Hence, currently some people with “loss of one limb” are receiving DA under the existing mechanism.

11. There are ten categories of disability listed in the Hong Kong Rehabilitation Programme Plan released in 2007, namely (i) Attention Deficit/Hyperactivity Disorder (AD/HD); (ii) autism; (iii) hearing impairment; (iv) intellectual disability; (v) mental illness; (vi) physical disability; (vii) Specific Learning Difficulties (SpLD); (viii) speech impairment; (ix) visceral disability; and (x) visual impairment. “Loss of one limb” is a type of physical disability, which is only one of the above ten categories. Further, there are different degrees of “loss of one limb”, according to, for example, the position of the loss of limb. We also need to consider the situation of people with loss of function of one limb but have not undergone amputation.

12. The Working Group notices that there are views that when addressing the issue of “loss of one limb”, we should also consider how to address disability levels comparable with or more severe than “loss of one limb” (but not yet severely disabled). Although there are also views that we should first/only handle “loss of one limb”, having considered the views set out in paragraph 8 above and given the far-reaching and sustained impact of DA eligibility criteria adjustment on public finances and the healthcare system, the Working Group considers that it may not be appropriate to only include “loss of one limb” at this stage before all ramifications are thought through.

13. The Working Group also understands that the doctors of DH and HA would face immense difficulties in determining the disability levels comparable with or more severe than “loss of one limb” (but not yet severely disabled) in the event of relaxing the eligibility criteria to such levels. The Working Group has also initially explored the possibility of setting the new criteria in a broad sense, e.g. allowing people with moderate level of disability to apply for DA. However, there would also be considerable difficulties in conducting the relevant professional medical assessment.

14. In addition, the Working Group does not have sufficient statistical data to assess the number of beneficiaries and relevant financial implication of relaxing the eligibility criteria for DA to disability levels comparable with or more severe than “loss of one limb” (but not yet

severely disabled). At present, the HA does not compile statistical data on the number of people with specific levels of disability. Although the Census and Statistics Department (C&SD) conducted a round of survey of people with disabilities in 2006/07, the relevant data may not be able to reflect the latest situation. Further, as some categories and levels of disability will inevitably be classified based on the respondents' subjective answers, the findings may not accurately reflect the number of people with specific levels of disability. Similarly, we do not have sufficient statistical data to assess the implication of the relaxation of eligibility criteria on other measures (e.g. the Concession Scheme, the Comprehensive Social Security Assistance (CSSA) Scheme and other allowances under the SSA Scheme).

The Next Step

15. In exploring whether to relax the eligibility criteria for DA to disability levels comparable with or more severe than "loss of one limb" (but not yet severely disabled), we need to carefully consider how to facilitate doctors to conduct professional medical assessment. The Working Group has obtained preliminary information on the disability allowance schemes in other places.

16. According to our initial observation, assessment criteria for disability allowances in places outside Hong Kong mainly fall into two categories. For the first category, assessment is made on the disability itself, while for the second category, assessment is made by a professional team, focusing on the restrictions on a person's daily activities caused by his/her disability. A small number of places make the assessment on the basis of the International Classification of Functioning, Disability and Health (ICF) established by the World Health Organisation. In essence, the ICF focuses more on the impact of the disability on the activities and social life of the people with disabilities, rather than on the disability itself. The set of assessment criteria currently adopted in Hong Kong is more akin to the first category, which has the advantage of allowing efficient and fast assessment so that some 2 000 cases of new application and re-application for DA can be handled each month.

17. In order to give a more thorough consideration to the experience of places outside Hong Kong, the Working Group has invited the Central Policy Unit (CPU) to commission a consultancy to study practices of other places in respect of disability allowances. It is expected that the study will commence in July 2013 and be completed around the end of this year to early next year.

18. At the same time, the Working Group will continue to carefully examine the relevant statistical data, including the survey of people with disabilities mentioned in paragraph 14 above. The Working Group also acknowledges that a new round of survey of people with disabilities by C&SD has commenced in March 2013 (the findings are expected to be released in late 2014). Although the restrictions mentioned in paragraph 14 above are also applicable to this survey, the additional information on the respondents' severity of disability obtained in this survey would facilitate us in conducting a more effective assessment. During the survey period, the Working Group will keep close liaison with C&SD with a view to obtaining the relevant statistical data as soon as practicable.

19 Given that the Working Group has to conduct careful and in-depth examination of the above issues, and to take account of the new round of survey on people with disabilities by C&SD and CPU's consultancy study, the review is expected to be completed before the end of 2014.

20. The Working Group understands that the community generally wishes to have the review completed as soon as practicable. The Working Group will continue to press ahead with the review at full steam, make timely report to CoP's Social Security and Retirement Protection Task Force and seek guidance from the Task Force when necessary. If there are any interim findings or initial options, we will suitably consult stakeholders (including Rehabilitation Advisory Committee). We will also report to the Panel on the latest developments in due course.

Support for People with Disabilities

21. The objective of DA is to help Hong Kong residents who have severe disability meet their special needs arising from such disabling condition rather than solve their financial difficulties. At present, in determining an applicant's eligibility for DA, we do not consider his/her social background, family, employment and financial status, etc. People with disabilities who are unable to cope with their basic needs because of long-term financial difficulties can apply for CSSA. The CSSA Scheme provides higher standard rates for people in ill-health/with disabilities. In addition, eligible persons can also apply for the Old Age Allowance and Old Age Living Allowance under the SSA Scheme. Under the "no double subsidy" principle, applicants can make their own decision as to which of the above-mentioned schemes and allowances they should apply according to their individual circumstances.

22. Apart from DA, there are currently various subsidy schemes to cater for the transportation, medical and employment needs of people with disabilities (including disabled persons who are not considered severely disabled). For details, please refer to **Annex 2**. The support already provided for people with disabilities through the existing social services should be taken into account when considering the relaxation of the eligibility criteria for DA in future.

23. The community generally considers that the Government should facilitate disabled persons with working capacity to get employed. This best suits the needs of these persons and the community, and is also widely accepted by people with disabilities. In fact, the Government has all along been helping people with disabilities to get employed through a variety of measures. The most recent measures include –

- (a) an additional annual provision of \$4.8 million has been allocated to increase the job attachment allowance and wage subsidy for job trial under the On the Job Training Programme for People with Disabilities and the Sunnyway – On the Job Training Programme for Young People with Disabilities under the Social Welfare Department in a bid to enhance vocational rehabilitation services and employment support; and
- (b) to encourage employers to offer people with disabilities more job opportunities, the Labour Department introduced a two-month work adaptation period under the Work Orientation and Placement Scheme³. An additional allowance up to a ceiling of \$5,500 per month for two months will be paid to an employer who employs a person with disabilities with employment difficulties and provides him/her with training or support during the work adaptation period. The mentor will also receive additional incentive pay of \$500. The additional annual expenditure is estimated to be \$7.1 million.

³ Under the Work Orientation and Placement Scheme, an employer is granted an allowance for employing a job seeker with disabilities. The amount of the allowance is equivalent to two-thirds of the monthly salary of the employee with disabilities (subject to a ceiling of \$4,000 per month). The payment period of the allowance is up to six months. Further, a mentor arranged by the employer for the employee with disabilities will receive incentive pay of \$500.

Moreover, the Special Needs Groups Task Force of CoP is considering other feasible and effective measures to encourage the Government, public and subvented bodies as well as private companies to employ people with disabilities, procure services and products offered by them, provide them with internship, and establish integrated workplace so as to provide more employment opportunities for people with disabilities.

Advice Sought

24. Members are invited to note the content of this paper and offer views.

Labour and Welfare Bureau
July 2013

Annex 1

Schedule 1 to the Employees' Compensation Ordinance Percentage of Loss of Earning Capacity

- Under Schedule 1, injuries causing 100% loss of earning capacity include –

Item	Percentage of loss of earning capacity	Note
Loss of 2 limbs	100	Eligible for existing Disability Allowance
Loss of both hands or of all fingers and both thumbs		
Loss of both feet		
Total loss of sight		
Total paralysis		
Injuries resulting in being permanently bedridden		
Paraplegia		
Any other injury causing permanent total disablement		
Total loss of hearing, both ears		

- Under Schedule 1, “loss of leg below knee” represents 65% loss of earning capacity. Items of injury with equivalent or higher percentage of loss of earning capacity include –

Item	Percentage of loss of earning capacity
Loss of leg below knee	65
Loss of 4 fingers of one hand	65(preferred hand)
Loss of one kidney (if the other kidney is abnormal)	65 - 90
Loss of arm between wrist and elbow	70 75(preferred hand)
Loss of hand at wrist	70 75(preferred hand)
Loss of 4 fingers and thumb of one hand	70 75(preferred hand)
Loss of leg at or above knee	75
Loss of arm at shoulder	75 80(preferred hand)
Loss of arm between elbow and shoulder	75 80(preferred hand)
Loss of arm at elbow	75 80(preferred hand)
Loss of leg at hip	80

- Under Schedule 1, items of injuries representing 50% to 64% loss of earning capacity include –

Item	Percentage of loss of earning capacity
Loss of sight of one eye	50
Ankylosis of the elbow joint (in worst position)	50
Ankylosis of hip joint (in worst position)	50
Loss of foot*	55
Ankylosis of shoulder joint (in worst position)	55
Loss of 4 fingers of one hand (not preferred hand)	60
Impairment of urinary bladder function (no reflex and no voluntary control)	38-60

*Note: sole

**Assistance Schemes/Funds/Support for Persons with Disabilities
(except the social security system under the Social Welfare Department)**

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
Medical/care					
1	Samaritan Fund	To provide financial assistance to patients of the Hospital Authority (HA) who meet the specified clinical criteria and passed the means test to meet expenses for designated Privately Purchased Medical Items or new technologies required in the course of medical treatment which are not covered by the standard fees and charges in public hospitals and clinics.	<u>(a) Application for non-drug items</u> <ul style="list-style-type: none"> Monthly household income of the patient is below the Median Monthly Domestic Household Income (MMDHI) released by the Census and Statistics Department(C&SD); and Liquidable household assets of the patient do not exceed three times of the item cost. <u>(b) Application for drug items</u> The financial assessment includes assessment on the income, expenditures and capital assets of the patient and family members living with him/her. Patient's contribution is determined by his/her household disposable financial resources and the estimated drug cost that is required to pay.	<u>(a) Non-drug items</u> The patient's need for the item must be supported by a medical doctor or an eligible allied health professional in accordance with HA's prevailing clinical guidelines. <u>(b) Drug items</u> Indication and commencement of treatment must be supported by a designated doctor as stipulated under the HA's prevailing clinical guidelines.	HA
2	Waiving Mechanism of Public Hospitals and Clinics	To waive the payment of public health care expenses. (Both financial and non-financial factors will be considered)	<ul style="list-style-type: none"> The patient's monthly household income does not exceed 75% of the MMDHI applicable to the patient's household size; and The value of the patient's household asset is within a certain limit applicable to their household size. For patients whose monthly household income does not exceed 50% of the MMDHI applicable to their household size; and pass the 	<u>Non-financial consideration</u> (a) The patients clinical condition (as defined by the patient's frequency of use of the different public medical services, and severity of the illness); (b) Whether the patient is a disabled person, single parent with dependent children, or from other	Medical Social Workers (MSWs)/ Social Workers (SWs) of the Integrated Family Services Centres & the Family and Child Protective Services Units (IFSCs/FCPSUs) of the Social Welfare

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
			asset limit test, they will be considered for full waiving of their medical fees at public clinics/hospitals.	vulnerable groups; (c) Whether a medical fee waiver could provide incentive and support to solve the patient's family problems; (d) Whether a patient has any special expenses that make it difficult to pay for his/her medical fees at public clinics/hospitals; or (e) Other justifiable social factors.	Department (SWD)
3	Rehabilitation services provided by the SWD	Provision of various types of services to help persons with disabilities to develop their physical, mental and social capabilities to the fullest possible extent. The types of services include pre-school rehabilitation services, employment and vocational rehabilitation services, residential services, day care and community support services, etc.	No family income and asset limits	Depend on individual services.	SWD
4	Yan Chai Tetraplegic Fund	Scope of assistance includes: <ul style="list-style-type: none"> • Medical/rehabilitation appliances: Allowances for purchase of equipment or repair service for medical/rehabilitation appliances; • Allowance for personal helpers: Allowance for 	Medical/rehabilitation appliances: No family income and asset limits. Allowance for personal helpers and Allowance for medical consumables: <ul style="list-style-type: none"> • Household income does not exceed the MMDHI; and • Asset test does not exceed the asset limit for Comprehensive Social Security Assistance (CSSA). 	Applicants must be tetraplegic patients with spinal injury at or above level 5 of cervical spine or equivalent disability; have financial difficulties; not be in a long-term stay in hospital, residential home or boarding school. However, tetraplegic patients who have concrete	Administered by the Yan Chai Tetraplegic Fund Committee, which comprises Members of the Yan Chai Hospital Board, doctors of Yan Chai Hospital, representatives from

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
		<p>paying the basic wages for engaging local or foreign personal helpers (Allowance will be granted for a maximum of one year for each application);</p> <ul style="list-style-type: none"> • Allowance for medical consumables: Allowance for regular expenses on medical consumables (Allowance is capped at \$2,500 (accountable) and granted for a maximum of one year for each application); and • Applications for other grants: Consideration is given on the merits of each case. 		discharge plan to live in the community are target beneficiaries of the Fund.	the HA (doctors) and representatives from the SWD.
5	Yan Chai Caring Fund for Severely Disabled	The Fund grants temporary allowance to cater for the caring needs of persons with severe physical disabilities, e.g. engaging a carer. The monthly allowance is capped at \$4,000 for a maximum of one year.	<ul style="list-style-type: none"> • Household income does not exceed the MMDHI; and • Asset test does not exceed the asset limit for the CSSA. 	Applicants must be severely disabled persons with financial difficulties; on the waiting list for hostels for severely physically handicapped persons but presently not staying in any types of residential rehabilitation homes.	Administered by the Yan Chai Caring Fund for Severely Disabled Committee, which comprises Members of the Yan Chai Hospital Board and representatives from the SWD, etc. All applicants must be referred by social workers of the SWD or non-governmental organisations (NGOs).

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
6	Assistance Programme under the Community Care Fund (CCF): Special Subsidy to Persons with Severe Physical Disabilities for Renting Respiratory Support Medical Equipment	To provide persons with severe physical disabilities with a monthly special subsidy of \$2,000 or \$2,500 for a maximum of 12 months for renting necessary respiratory support medical equipment.	<ul style="list-style-type: none"> Household income does not exceed the applicable MMDHI. The income limit is set out with reference to 100% of the MMDHI published in the Report on General Household Survey for Second Quarter 2012 by C&SD. With reference to the methodology adopted by the Samaritan Fund, the exact level of subsidy payable to a beneficiary is based on the annual household disposable financial resources; The annual household disposable financial resources do not exceed \$180,000; and For beneficiaries with annual household disposable financial resources of \$100,000 or below, a monthly subsidy of \$2,500 will be granted. For beneficiaries with annual household disposable financial resources over \$100,000 but not exceeding \$180,000, a monthly subsidy of \$2,000 will be granted. 	<ul style="list-style-type: none"> Target beneficiaries are persons with severe disability from needy families, who are aged below 60, living in the community and receiving Higher Disability Allowance (DA) under the Social Security Allowance (SSA) Scheme; Assessed by medical doctors or allied health professionals of public hospitals/clinics in accordance with the HA's prevailing clinical guidelines that respiratory support medical equipment is necessary for his/her use; No assistance is received from the Government/Samaritan Fund/other charitable funds for the purchase of the respiratory support medical equipment within three years from the date of application; and Not receiving assistance from other charitable funds for the rent for the respiratory support medical equipment at the same time. 	Applications are assessed by the CCF Team of the SWD.

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
Transport¹					
7	Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities	Beneficiaries can travel on MTR, buses and ferries any time at a concessionary fare of \$2 per trip.	Non-means-tested.	Target beneficiaries are (1) CSSA recipients aged between 12 and 64 with 100% disabilities, or recipients of Disability Allowance in the same age group, and (2) elderly people aged 65 or above.	
Employment/Education					
8	Central Fund for Personal Computers under the SWD	Assist eligible persons with disabilities in acquiring the required computer facilities for self-employment at home or receiving supported employment services at home. Usually not more than \$15,000 will be granted to each successful applicant.	Applicants must have financial difficulty in acquiring the required computer facilities.	Applicants must have difficulties in engaging in open employment, be using the services of rehabilitation service organisations or the Selective Placement Division of the Labour Department, and must have the recommendation of the aforesaid service units.	The Fund is administered by the SWD, and its applications are vetted by the Central Committee on Information Technology (IT) for Rehabilitation
9	Jockey Club IT Scheme for People with Visual Impairment	Subsidise eligible people with visual impairment to purchase the following two types of computer-aided facilities: <ul style="list-style-type: none"> • High-performance Chinese screen reader; and • Braille display of 40 cells. 	Applicants have genuine financial difficulty in acquiring the required aids.	Applicants must be persons with visual impairment who demonstrate a need for high-performance computer aids to facilitate their studies or employment, but their schools/employers do not provide such aids.	Services which comprises members from the IT, rehabilitation service and social work sectors, and representatives from the SWD.

¹ Apart from the Public Transport Fare Concession Scheme for the Elderly and Eligible Persons with Disabilities, the Government also implements the Work Incentive Transport Subsidy Scheme to relieve the burden of work-related travelling expenses on all eligible low-income earners (including low-income earners with disabilities), to encourage them to secure or stay in employment.

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
Living Supplement/Miscellaneous					
10	Brewin Trust Fund	To provide financial assistance to residents in Hong Kong for not less than one month who become widows/widowers or orphans (aged below 21) by losing their parents through death, and the workmen who, having been employed in Hong Kong, have become wholly or in part incapacitated for work by reason of age, sickness, disablement or otherwise. The Fund may grant the disbursement for the following purposes: burial expenses, medical expenses, capital for starting small business, cost of equipment or tools for improvement of living, schooling expenses, rental expenses, maintenance during a crisis, maintenance before income from employment being available, and incidental payments, such as for travelling expenses and small household articles, etc.	-	In assessing the application, the disability condition of the applicant will be considered together with other social factors and his/her financial needs.	SWD casework service units and Social Security Field Units will receive applications for the Trust Fund. Besides, the Fund also accepts applications from needy persons recommended by 23 authorised NGOs.
11	Assistance programme under CCF: Special Care Subsidy for the Severely Disabled	To provide severely disabled persons with a monthly special care subsidy of \$2,000 for not more than 12 months so as to assist them in settling nursing care expenses including nursing, rehabilitation and medical appliances.	<ul style="list-style-type: none"> The household income does not exceed the applicable MMDHI; the income limit is set out with reference to 100% of the MMDHI published in the Report on General Household Survey for Second Quarter 2012 by the C&SD. No asset test. 	Target beneficiaries are severely disabled persons from needy families who are below the age of 60, living in the community and receiving Higher DA under the SSA Scheme.	Applications are assessed by the CCF Team of the SWD.

	Schemes/ funds/support	Assistance programme	Income and asset limit	Considerations on severity of disability	Responsible assessment/ approval authorities
12	Assistance Programme under CCF: Training Subsidy for Children who are on the Waiting List of Subvented Pre-school Rehabilitation Services programme	To provide a maximum monthly training subsidy of \$2,615 to pre-school children with rehabilitation needs for receiving not less than four sessions of pre-school training and parent support services. This includes not less than three hours of individual or group training/therapy service provided by special child care workers, psychologists or occupational therapists/physiotherapists/speech therapists, and family support services provided by special child care workers, psychologists, therapists or social workers.	The monthly household income of the applicant and his/her family members living with him/her in Hong Kong does not exceed the income limit applicable to their household size. No asset limit is imposed. The income limit is set out with reference to 75% of the MMDHI published in the Report on General Household Survey for Second Quarter 2012 by the C&SD.	The applicant should be assessed by a paediatrician or psychologist so as to ascertain his/her abilities and service needs, and should be on the waiting list for subvented pre-school rehabilitation services on or before 30 November 2012.	Applications are assessed by the CCF Team of the SWD.