

For information
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**Legislative Council Panel on Education
Subcommittee on Integrated Education**

Support Services for Students with Mental Derangement

Purpose

This paper briefs Members on the support services provided by the Government for students with mental derangement (MD).

Background

2. MD covers a range of conditions (such as depression, anxiety and psychosis), each with different symptoms. Its presenting problems can have different manifestations and cover various aspects such as mental state, thinking, social interaction, emotion and behaviour. Students with MD are mainly attended by psychiatrists and followed up by paramedical professionals such as clinical psychologists and medical social workers.

3. According to the records of the Hospital Authority (HA), the numbers of students with confirmed diagnosis aged 18 or below receiving psychiatric service from the HA (including those with Autism Spectrum Disorders (ASD), Attention Deficit/Hyperactivity Disorder (AD/HD) and MD) in the past three years (2010-11 to 2012-13) are as follows:

Year	Numbers of Students with Confirmed Diagnosis Receiving HA Psychiatric Service (aged 18 or below)*
2010-11	13 300
2011-12	15 200
2012-13	17 000

**Figures are rounded to the nearest ten*

Identification and Assessment Mechanism

4. The Government has been working, through various channels, for the early identification and assessment of children suspected of suffering from developmental disorders. Apart from the Developmental Surveillance Scheme implemented at the Maternal and Child Health Centres (MCHCs) of the Department of Health (DH) for children aged 0 - 5, the DH, HA, Education Bureau (EDB), Social Welfare Department (SWD) and non-governmental

organisations (NGOs) have jointly launched the Comprehensive Child Development Service (CCDS) by phases since 2005 to strengthen early identification of pre-primary children with developmental disorders. With MCHCs of the DH and other service units as its platform, the CCDS is designed to facilitate the referral of children identified with health, developmental and behavioural disorders by pre-primary institution teachers to MCHCs of their respective districts for preliminary assessment. After assessment by MCHCs, children suspected of suffering from developmental disorders will be referred to the Child Assessment Service (CAS) of DH for further actions. If necessary, the families concerned may also be referred to the Medical Social Services Units of the SWD or Integrated Family Service Centres of the SWD and subvented NGOs for follow-up. A referral and reply system has been developed and implemented in all pre-primary institutions since 2008. In addition, a Pre-primary Children Development and Behaviour Management - Teacher Resource Kit has also been developed by the DH in collaboration with the EDB and SWD to enable kindergarten teachers to have a better understanding of the CCDS operation and referral system, and increase their knowledge about common pre-school developmental problems in order to facilitate early identification and referral of children in need of assessment and treatment.

5. The CAS of DH provides comprehensive multi-disciplinary assessment and appropriate rehabilitation services for children aged below 12 suspected of having developmental problems, including emotional and behavioural problems. The multi-disciplinary assessment team comprises paediatricians, clinical psychologists, medical social workers, audiologists, speech therapists, optometrists, physiotherapists, occupational therapists, public health nurses and other auxiliary personnel. They collaborate to provide children suspected of having the above difficulties with necessary assessment and professional diagnosis, and formulate rehabilitation programmes for these children.

6. Beyond that, the Student Health Service of DH provides primary one to secondary six students who have enrolled in its programme with a series of health services during their annual appointments, including physical examination and individual health counselling. Paramedical professionals will also screen the conditions and needs of the students through interviews with them and their parents and by means of mental health and behaviour surveys. Students with suspected mental health, social, emotional or behavioural problems will be referred to the relevant HA specialist departments, specialists of their schools or social welfare institutions where appropriate for follow up actions.

7. Comprising child psychiatrists, paediatricians, clinical psychologists, nurses, speech therapists and occupational therapists, the HA's multi-disciplinary team of paramedical professionals provides early identification and assessment for children with MD, as well as treatment for children confirmed with MD.

Support Services

Medical Services

8. The CAS of DH provides interim support services for parents, such as talks, workshops and training courses, to help them understand their children so that they can give their children better care and provide early intervention. For diagnosed cases, doctors will refer children concerned to relevant specialist outpatient clinics of HA for further assessment and treatment as necessary according to their individual needs and family circumstances. For pre-school children, subject to the consent of their parents, they will be referred by the CAS to SWD-subsented pre-school rehabilitation services. For school-aged children, the CAS will send their assessment reports to the EDB to inform the Bureau of the assessment findings and the children's needs for arrangement of appropriate learning support. The CAS will also provide an assessment summary to parents and schools to draw their attention to the children's educational needs so that timely support can be provided to them.

9. Medical social workers have been deployed by the SWD to the CAS and psychiatric wards, clinics of HA and some Specialist Out-patient Clinics with a view to formulating rehabilitation plans for children in collaboration with the team of paramedical professionals and assisting in the provision of the above-mentioned support and services.

10. The multi-disciplinary team of the psychiatric department under HA offers students with MD a series of relevant services, including inpatient, specialist outpatient, day training and community outreaching services. The team also provides parents and carers of the students concerned with suitable support and training to raise their understanding of the symptoms and treatment needs of the students. In addition, the professional team maintains close liaison with related organisations, such as schools or early training centres providing pre-school rehabilitation services, to make referrals and provide support as appropriate according to the developmental needs of the students.

Rehabilitation Services

11. The SWD provides children with disabilities from birth to six years old, including those who suffer from ASD, AD/HD with early intervention through pre-school rehabilitation services, with an aim to enhance their physical, psychological and social developments, thus improving their opportunities for enrolling in ordinary schools and participating in daily life activities, and helping their families meet their special needs. Please refer to SWD Homepage for details:

http://www.swd.gov.hk/en/index/site_pubsvc/page_rehab/sub_listofserv/id_serpresch/

12. The Government has been steadily increasing the provision of pre-school rehabilitation places. There are currently a total of 6 245 places. We anticipate that 1 471 additional places will come on stream during the current-term Government, including 832 additional places in 2014-15. Furthermore, the Government has implemented the Special Scheme on Privately Owned Sites for Welfare Uses. It is tentatively anticipated that additional 3 800 places of pre-school rehabilitation services will be provided.

13. On the other hand, the Community Care Fund launched the assistance programme on “Training Subsidy for Children who are on the Waiting List of Subvented Pre-school Rehabilitation Services” in December 2011, to provide children from low income families in need of pre-school rehabilitation services with a maximum monthly training subsidy of \$2,615¹ to receive self-financed services from NGOs, with an aim to facilitate their learning and development. The Government will regularise this programme in 2014-15, with a view to enabling pre-school children with special needs to receive necessary services as soon as possible so as to facilitate their learning and development while waiting for subvented services. Furthermore, the SWD, through District Social Centre for Persons With Disabilities, provides one-stop community support services for persons with disabilities (including children with disabilities) to facilitate their integration into the community and provide training activities/educational programmes/talks/workshops to the carers of persons with disabilities so as to strengthen their caring capacity. Furthermore, Parents/Relatives Resource Centre for Disabled Persons organises groups/social and recreational activities to serve parents and carers of persons with disabilities with similar problems to enable them to share experience and seek mutual support. The Centre also enhances the knowledge and acceptance of parents/carers of children with disabilities and empowers the entire family functioning in coping with their emotional stresses and difficulties in raising their children with disabilities.

Education Services

Professional Support

14. For students with significant adjustment difficulties, including those with severe emotional and behavioural problems induced by their MD, the EDB will consider providing their schools with a time-limited grant where appropriate for employing teaching assistants to help the students concerned follow classroom routines and learn effectively. Simultaneously,

¹ Starting from 1 May 2013, the maximum monthly subsidy was increased from \$2,500 to \$2,615.

the EDB encourages schools to adopt the 3-Tier Intervention Model², and provide additional support for the students based on their individual needs to enhance their learning. The level of support for different students will be adjusted according to the progress and needs as shown by the results of their formative and summative assessments. The school will invite parents and professionals to work out for students with special needs Individual Education Plans (IEP), including appropriate learning targets (e.g. in respect of academic studies, classroom behaviour, social communication, behaviour and emotion management, and self-esteem), tailor-made teaching strategies and support measures, as well as success criteria. Students' progress and the effectiveness of these Plans will be reviewed regularly. Moreover, schools may pool and flexibly deploy such resources to employ additional teaching staff or assistants and procure professional services to improve the learning effectiveness of students with SEN.

15. To help schools support students with MD, the EDB has laid down in its School Administration Guide a guideline entitled "How Schools can Help Students with Mental Health Problems" for schools' reference. Specifically, as stated in the guideline, if teachers suspect that any of their students may have MD and are in need of professional assessment or consultation services, they may approach professionals in their schools, such as school social workers, who will communicate with the students and their parents, and if necessary, refer the students to psychiatrists for diagnosis or medication. Schools should play a role by helping these students re-enter school and adapt to school life after treatment, in tandem with the medical treatment and rehabilitation requirements. In addition, schools will arrange multi-disciplinary case conferences when necessary for psychiatrists, medical social workers, educational psychologists (EP) and school personnel (including school social workers and guidance personnel) to identify appropriate support measures for the students. These include creating a caring learning environment, making accommodations on teaching and learning, adjusting class arrangements, and providing emotional counselling and peer support, etc. We also encourage parents to discuss the particular needs of their children with school so that appropriate support will be offered in accordance with the student's conditions and needs.

16. Furthermore, the EDB provides schools with School-based Educational Psychology Service to support students with SEN at three different levels, namely student, teacher and school system levels. At the student level, if teachers suspect that any of their students may have mental, social, emotional or behavioural difficulties, schools may approach EPs direct for arrangement of professional assessment. Upon completion of assessment, EPs will

² Tier-1 support – quality teaching in the regular classroom to help students with mild or transient learning/behavioural adjustment difficulties;
Tier-2 support – "add-on" intervention for students with persistent learning/behavioural adjustment difficulties; and
Tier-3 support – intensive individualised support, e.g. IEPs, for students with severe learning/behavioural adjustment difficulties.

explain to teachers and parents the students' difficulties and needs at case conferences and discuss with them the follow-up actions. Having regard to the needs of individual students, EPs will attend meetings of student support teams and IEP Committee to work out teaching strategies and support measures in the light of the students' needs. At the teacher level, EPs help enhance teachers' awareness for better identification of students with MD and their abilities to employ various support strategies through school-based or district-based teacher training. At the school system level, EPs give professional advice on school policies, measures, teaching strategies, resource deployment as well as home-school co-operation, etc. to facilitate early identification and intervention of students with SEN and MD. The EDB is taking steps to extend the School-based Educational Psychology Service progressively to cover all public sector primary and secondary schools by the 2016/17 school year.

Teacher Training

17. Enhancing the professional capacity of teachers in catering for students with SEN is pivotal to the successful implementation of IE. From the 2007/08 school year onwards, the EDB has been providing serving teachers with structured training courses on supporting students with SEN pitched at Basic, Advanced and Thematic levels (BAT Courses). Starting from the 2012/13 school year, we have offered a new round of professional development courses for teachers, and the elective modules of the Advanced Course and the Thematic Courses have been re-grouped into three categories, namely: (1) cognition and learning needs; (2) behavioural, emotional and social development needs; and (3) sensory, communication and physical needs. Thematic courses on behavioural, emotional and social development needs cover the knowledge and skills necessary for taking care of students with emotional and behavioural difficulties. As required by the EDB, each public sector ordinary school should have at least one teacher who has completed the thematic course(s) under each category.

18. To support students with MD, the EDB has commissioned annually a tertiary institution to run a 120-hour thematic course on Effective Strategies for Managing Students' Challenging Behaviour : A Psychological Approach. The main objective and contents of the course are to enhance teachers' understanding of students' developmental needs, including students' deviant and unruly behaviour, low self-esteem and some common emotional and psychiatric problems. Through theoretical discussions and case analysis, the course helps teachers develop positive attitudes and effective strategies for supporting students in handling potential crises in different stages of development.

Special Examination Arrangements

19. On top of daily learning support, appropriate special examination arrangements (examination accommodation) for students with SEN are required to ensure that they can enjoy equal opportunities in assessments to show the subject knowledge they have acquired and skills commanded. To that end, the EDB officers organise talks/workshops for schools on a regular basis to assist schools in further fine-tuning their school-based policy and measures on special examination arrangements. The EDB also published and uploaded onto its website the information leaflet on Whole School Approach – Principles and Strategies for Assessment in 2004 and the Guidelines on Special Arrangements for Internal Examinations for Students with SEN in 2009, which set out the general principles and strategies on special internal assessment arrangements.

20. As regards public examinations, schools may apply to the Hong Kong Examinations and Assessment Authority for special examination arrangements for their students (usually when they are at secondary five) before they sit the Hong Kong Diploma of Secondary Education Examination. All applications are vetted by the Committee on Special Needs Candidates, which comprises representatives from the EDB, special schools, secondary schools, tertiary institutions, Committee on Home-School Co-operation and professional sectors. In general, special examination arrangements for students with MD take the form of special examination centres, extra time allowance (normally no more than 25% extra examination time) and supervised breaks, etc.

Cross-sectoral Collaboration

21. To enhance the effectiveness of the support for students with SEN, the EDB has been working with different sectors to promote professional exchanges for synergy-building. On supporting students with MD, the EDB has been working closely with the HA to review and discuss ways to strengthen the existing notification, referral and support mechanism to ensure effective cross-disciplinary collaboration.

22. We have already reached a consensus with the seven district centres of the Early Assessment Service for Young People (E.A.S.Y.) under HA, in which schools may call the respective district service centres direct for expert advice and support, including assessment, thematic seminars/workshops and ongoing treatment services. In parallel, we have been discussing with the HA on ways to enhance the procedures for schools and EPs to refer students to the Child and Adolescent Psychiatric Services of the HA, and to facilitate communication among parents, schools and paramedical professionals. For diagnosed cases, subject to parental consent, psychiatrists will inform schools promptly so that their student support teams can take appropriate follow-up actions and make necessary arrangements.

23. To enhance teachers' knowledge and skills to cater for students with MD, the EDB has been organising teacher training programmes in collaboration with various institutions. From the 2011/12 to 2013/14 school years, the EDB and HA jointly organised a number of district-based thematic seminars on psychosis for student guidance teachers/personnel of primary, secondary and special schools. Psychiatrists, EPs and social workers were invited to the seminars to share their views on supporting students with MD. In June 2014, the EDB and HA jointly held a talk on Supporting Students with Depression in Secondary Schools for student guidance teachers/personnel and professionals in secondary schools.

24. To support students with depressive mood and promote mental wellness among students, we worked with the Hong Kong Jockey Club Centre for Suicide Research and Prevention of the University of Hong Kong to implement a cognitive behavioural therapeutic support programme in over 20 secondary schools in the 2012/13 school year.

Views Sought

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

Education Bureau
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