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Panel on Welfare Services

**Updated background brief prepared by the Legislative Council
Secretariat for the meeting on 25 July 2014**

**Home and community care services for the elderly and
persons with disabilities**

Purpose

This paper summarizes Members' past discussions relating to home and community care services for the elderly and persons with disabilities.

Background

Home and community care services for the elderly

2. According to the Administration, "ageing in the community" is an underlying principle of the Government's elderly policy. This is in line with the wish of most elderly persons as they cherish the support from their families and the sense of belonging that a familiar community offers. To this end, the Government provides a range of subsidized supporting services, including centre-based day care services and home-based services. These services cover personal care, nursing care, rehabilitation exercises, meal delivery, escort services, etc. Service users include the elderly persons who wish to stay in the community and those who are on the waiting list for subsidized residential care places.

3. Introduced in April 2001, enhanced home and community care services ("EHCCS") provides integrated services to enable frail elderly persons to receive nursing and care services in their familiar home and community environment and to maintain their maximum level of functioning. EHCCS also provides support for carers to strengthen family cohesion. Starting from April 2001, the Social Welfare Department

("SWD") has been granting subsidy to non-governmental organizations to provide EHCCS in the 18 District Council districts to enable frail elderly persons to continue living in the community. As at June 2014, about 5 600 elderly persons were receiving EHCCS.

Home and community care services for persons with disabilities

4. To support full integration of persons with disabilities into the community, the Administration provides a series of rehabilitation services, community support and training to facilitate persons with disabilities to live independently, and/or to live with their families and friends in the community. For those who cannot live on their own and cannot be adequately cared for by their families, the Administration has taken measures to meet their residential care needs, to improve their quality of life and to help them develop independent living skills.

Members' deliberations

Provision of community care services for the elderly

5. While supporting the Government's elderly care policy of ageing in place, members of the Panel on Welfare Services ("the Panel") and the Joint Subcommittee on Long-term Care Policy ("the Joint Subcommittee") expressed concern about the inadequate provision of both residential care services ("RCS") for the elderly and CCS to meet the increasing demand arising from the ageing population. Members considered it necessary for the Administration to step up its efforts in enhancing the services and improving the waitlisting situation. The Administration should also formulate a long-term strategy for the provision of CCS according to the users' needs and ensure that CCS would be allocated to those who were most in need of the services.

6. At the Council meeting of 8 June 2011, Members passed a motion on "Setting out a five-year plan for elderly services" urging the Government to, among others, establish a five-year plan and service pledges in respect of both RCS and CCS, and strive to increase the respective number of places for these services.

7. In the view of the Administration, elderly persons with long-term care needs did not necessarily age in residential care homes. Further development of CCS would encourage elderly persons to age in place and thus avoid premature and unnecessary institutionalization. To help elderly

persons who had long-term care needs age in place, the Administration had set up service centres/units in the community to provide elderly persons with day care services; and also commissioned service teams to provide them with home care services. An additional 185 day care service places for elderly persons would be provided in the three years starting from 2012-2013.

8. Some Members held the view that the Administration should review and reintegrate CCS and RCS in terms of service mode and volume to address the genuine needs of elderly persons. The Administration should also set benchmark indicators for various kinds of CCS. According to the Administration, the waiting time for subsidized CCS had been shortened. The average waiting time for home-based CCS places and day care places was some two months and nine months respectively. The Administration would continue to increase the provision of CCS places.

Provision of EHCCS

9. At the special meetings of the Finance Committee in April 2013 to examine the Estimates of Expenditure 2013-2014, some Members expressed concern that the geographical distribution and the number of EHCCS district teams did not seem to be proportionate with the demand for the services in individual districts. They suggested that more teams should be provided for districts such as Kwun Tong and Sha Tin to cater for the huge service demand there.

10. The Administration explained that from 2009-2010 to 2012-2013, the geographical distribution of the 24 EHCCS district teams remained unchanged under the principle of one team serving one district. The number of service quotas and manpower provision for each individual district team were allotted according to the service demand in the district concerned.

11. Members were concerned about the waiting time for EHCCS. Noting the Administration's additional provision of 300 EHCCS places in 2012-2013, they enquired about the reduction in waiting time with the additional provision. The Administration advised that, as at the end of January 2013, there were 524 elderly persons waiting for EHCCS and/or integrated home care services for frail cases and the average waiting time was about two months. According to the Administration, the waiting time for EHCCS was affected by a number of factors such as the applicants' preference on service providers, change in service demand and different turnover rates in various districts. It was therefore difficult to estimate the

waiting time to be shortened with the increased provision. The Administration would continue to keep in view the demand for EHCCS and increase the provision to meet the service need of the elderly as appropriate.

12. As regards additional provision of EHCCS places in the 2014-2015 Budget, the Panel was advised, at its meeting on 10 March 2014, that some \$172 million was proposed for providing 1 500 additional EHCCS places from March 2015 onwards. The Administration would integrate the major service content of the Pilot Scheme on Home Care Services for Frail Elders into EHCCS and implement strengthened integrated home-based care services, so as to further enhance the support and care for frail elderly persons living at home.

Funding mode for EHCCS

13. Concern was raised that the Administration might continue to adopt the competitive bidding approach in selecting suitable service providers for EHCCS upon the expiry of the existing contracts in February 2015 as well as for the additional 1 500 EHCCS places. There was also concern about the impact on the service users, the serving operators and their staff if the serving operators were unsuccessful in bidding the contracts. The Panel passed a motion requesting the Administration to continue the provision of the current 5 579 EHCCS places to the existing service operators and allocate the additional 1 500 places according to the mechanism currently in place. As regards the allocation arrangement in future, the Administration was requested to change the current contract bidding mode by incorporating the nearly 7 100 EHCCS places into the Lump Sum Grant Subvention System.

Pilot Scheme on Home Care Service for Persons with Severe Disabilities

14. At the Panel meeting on 21 January 2013, the Administration advised that the services provided by the three-year Pilot Scheme on Home Care Service for Persons with Severe Disabilities ("the Pilot Scheme") would be regularized in March 2014 and extended to all the 18 districts, thereby facilitating full integration of persons with disabilities into the community. The Administration would also extend the coverage of service targets to include persons with severe disabilities who were not on the waiting lists for RCS.

15. Pointing out that the unit cost would be reduced after the Pilot Scheme had been regularized, some Members expressed concern that the

scope and the quality of home care services might be adversely affected because of a lower unit cost. The Administration advised that having capitalized on the experience of the Pilot Scheme, it had included the most needed services in the regular scheme. A simplified assessment tool would be used to facilitate a quicker assessment of the applicants' eligibility for the services.

Other initiatives

16. Members were advised that apart from the regularization of home-based care services, the Community Care Fund ("CCF") had provided special care subsidy for persons with severe disabilities from low-income families. CCF had also launched programmes to subsidize persons with severe physical disabilities for renting respiratory support medical equipment and purchasing medical consumables related to respiratory support medical equipment. These two programmes would be incorporated into the Government's regular assistance programme in 2014-2015. In addition, SWD and the Hospital Authority were studying the feasibility of introducing a case management-oriented service programme to support persons with severe physical disabilities who were in need of constant nursing care and were not receiving Comprehensive Social Security Assistance. The programme was designed to enable them to live in the community by relieving their financial burden in terms of medical equipment, consumables and care services.

Relevant papers

17. A list of the relevant papers on the Legislative Council Website is in the **Appendix**.

Appendix

Relevant papers on home and community care services for the elderly and persons with disabilities

Committee	Date of meeting	Paper
Panel on Welfare Services	8 March 2010 (Item IV)	<u>Agenda</u> <u>Minutes</u>
Subcommittee on Residential and Community Care Services for Persons with Disabilities and Elderly	31 May 2010 (Item I)	<u>Agenda</u> <u>Minutes</u>
Panel on Welfare Services	12 July 2010 (Item III)	<u>Agenda</u> <u>Minutes</u>
Subcommittee on Residential and Community Care Services for Persons with Disabilities and Elderly	13 July 2010 (Item II)	<u>Agenda</u> <u>Minutes</u>
Subcommittee on Residential and Community Care Services for Persons with Disabilities and Elderly	28 March 2011 (Item I)	<u>Agenda</u> <u>Minutes</u>
Joint Subcommittee on Long-term Care Policy	29 January 2013 (Item I)	<u>Agenda</u> <u>Minutes</u>
Joint Subcommittee on Long-term Care Policy	26 February 2013 (Item I)	<u>Agenda</u> <u>Minutes</u>
Joint Subcommittee on Long-term Care Policy	26 March 2013 (Item I)	<u>Agenda</u> <u>Minutes</u>
Finance Committee	8, 9, 10, 11 & 12 April 2013	<u>Minutes</u>

Committee	Date of meeting	Paper
	11 April 2013	<u>Administration's replies to members' written questions in examining the Estimates of Expenditure 2013-2014 (Page 561)</u>
Joint Subcommittee on Long-term Care Policy	23 April 2013 (Item I)	<u>Agenda</u> <u>Minutes</u>
Joint Subcommittee on Long-term Care Policy	2 July 2013 (Item I)	<u>Agenda</u> <u>Minutes</u>
Panel on Welfare Services	10 March 2014 (Item V)	<u>Agenda</u>
Panel on Welfare Services	9 June 2014 (Item V)	<u>Agenda</u>

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