

Support to children with special needs

(a) Current mechanism for identification and assessment of children with special needs (including the waiting time required) and the services provided by the Hospital Authority and relevant departments

1. The Family Health Service of the Department of Health (DH), through its Maternal & Child Health Centres (MCHCs), provides a comprehensive range of health promotion and disease prevention services for children from birth to five years through the implementation of an integrated child health and development programme, which consists of (1) parenting; (2) immunisation; as well as, (3) health and developmental surveillance (including universal newborn hearing screening, growth and developmental surveillance and preschool vision screening at age four).

2. Through the developmental surveillance at scheduled ages of children, health care staff in MCHCs interviews the parents and make necessary observation of the children on different developmental areas like gross and fine motor, language and communication, social behavior and play, self-care, as well as vision and hearing. Apart from the scheduled visits, parents can approach MCHCs to arrange for special appointments. If the situation warrants, MCHCs will refer the children to Child Assessment Service (CAS) of DH or specialists of the Hospital Authority (HA) for assessment and relevant services.

3. In addition, pre-primary teachers, with the consent from parents, can also refer children with suspected physical, developmental or behavioural problems to MCHCs for preliminary assessment.

4. CAS, through its 6 Child Assessment Centres, provides comprehensive multi-disciplinary assessment for children who are under twelve years of age with suspected developmental disorders, and recommends rehabilitation services for them as necessary. In the past three years, nearly all new cases were seen within three weeks. CAS has adopted a triage system for newly registered cases based on urgency of the conditions to ensure service efficiency. The actual assessment time depends on the complexity and condition of individual cases. After assessments, CAS will refer children in need to paediatrics, child psychiatry and other specialist out-patient services,

as necessary, for follow-up and treatment. CAS will also provide assessment summaries of the children to parents, and encourage them to share the information with schools and relevant parties to facilitate provision of care and support for the children.

5. While children await rehabilitation services, CAS will provide interim support to parents, including seminars, workshops and practical training etc., so as to enhance parents' understanding of their children.

6. Following preliminary assessment by the DH, children with developmental and/or mental health problems will be referred to specialist out-patient clinics (SOPC) of HA for further assessment and treatment.

7. Comprising healthcare practitioners from various disciplines, including doctors (both paediatricians and psychiatrists), clinical psychologists, nurses, speech therapists and occupational therapists, the multi-disciplinary teams of HA provide assessment and treatment services for needy children. Services provided include in-patient and specialist out-patient services, day training and community support, etc. Appropriate support and training are also available to parents and caregivers in order to enhance their understanding of the condition and treatment needs of needy children. In addition, HA's professional teams maintain close liaison with relevant organisations, such as schools and early training centres, to provide appropriate referrals and support according to the developmental needs of children concerned.

8. HA has implemented a triage system for all new SOPC referrals to ensure patients with urgent conditions or requiring early intervention are treated with high priority. Under the triage system, new patients are initially screened by a nurse and then by a specialist doctor of the relevant specialty for classification into different priorities, namely priority 1 (urgent), priority 2 (semi-urgent) and routine categories. HA aims to maintain the median waiting time for cases in priority 1 and priority 2 categories within two weeks and eight weeks respectively. Since the implementation of the triage system, HA has been able to keep the median waiting time of priority 1 and priority 2 cases within its pledge. The waiting time of cases in the routine category is generally longer due to the large number of referrals.

(b) The two initiatives to be launched by the Social Welfare Department, namely the Special Scheme on Privately Owned Sites for Welfare Uses and the pilot project to provide on-site rehabilitation services in kindergartens supported by the Lotteries Fund

Pilot Scheme on On-site Pre-school Rehabilitation Service

9. The Government has sought the necessary funding from the Lotteries Fund to implement the Pilot Scheme on On-site Pre-school Rehabilitation Services. Under the Pilot Scheme, interdisciplinary teams will be coordinated by the non-governmental organisations (NGOs) to provide on-site rehabilitation services to children with special needs who are studying in those kindergartens (KGs) or KG-cum-Child Care Centres (KG-cum-CCCs) participating in the Scheme. Professional support and assistance will also be provided for teachers/child care workers and parents of participating KGs or KG-cum-CCCs.

Special Scheme on Privately Owned Sites for Welfare Uses

10. The Special Scheme on Privately Owned Sites for Welfare Uses was launched in September 2013 to encourage NGOs to put their land to better use through in-situ expansion or redevelopment to provide more diversified services and self-financing facilities. More than 40 NGOs have submitted over 60 applications in total. If the preliminary proposals received could be implemented as proposed by the NGOs, about 17 000 new places for rehabilitation and elderly services would be provided, including about 3 800 pre-school rehabilitation service places.

(c) Initiatives implemented by the Administration on parent education, as well as the support provided for parents of children with special needs

11. It is the Government's policy objective to provide children with special needs, from birth to six years old, with early intervention to enhance their physical, psychological and social developments, thereby improving their opportunities for participating in ordinary schools and daily life activities and helping their families meet their special needs. For instance, Early Education and Training Centre under the subvention of Social Welfare Department (SWD) provides early intervention programmes for children with special needs with emphasis on the caring and training role of children's families.

12. Parents/Relatives Resource Centre (PRC) under SWD provides a focal point for family members/carers of persons with disabilities/mental illness to share experience and seek mutual support with assistance from the staff. The service also enables family members/carers to enhance their understanding and acceptance of their family members with disabilities and empower the entire family functioning in coping with their stress and difficulties in taking care of the persons with disabilities. In 2015-16, the Government has increased the social work manpower in the existing subvented PRCs so as to organise more systematic training and experience sharing activities with a view to enhancing the support for service users, including children/youth with special needs and their family members/carers.

13. To enable parents to be competent and effective in promoting and observing the development of their children, health education on child development and parenting is provided to parents through various means by the Family Health Service of DH, including distribution of printed materials, individual counseling, workshops as well as on-line information through FHS website.

14. DH has also been distributing through Education Bureau the leaflet “Understanding Your Child's Development for Parents of Preschool Children” to introduce to parents normal developmental milestones and possible warning signs at the preschool stage. If parents have any query or concern on the development of their children, they can discuss with the teachers and arrange for referral.