

立法會
Legislative Council

LC Paper No. CB(2)1518/14-15
(These minutes have been
seen by the Administration)

Ref : CB2/PL/WS

Panel on Welfare Services

Minutes of meeting
held on Monday, 9 February 2015, at 10:45 am
in Conference Room 3 of the Legislative Council Complex

Members present : Hon CHEUNG Kwok-che (Chairman)
Hon CHAN Yuen-han, SBS, JP (Deputy Chairman)
Hon LEUNG Yiu-chung
Hon TAM Yiu-chung, GBS, JP
Dr Hon LEUNG Ka-lau
Hon Alan LEONG Kah-kit, SC
Hon LEUNG Kwok-hung
Hon CHAN Chi-chuen
Hon CHAN Han-pan, JP
Hon LEUNG Che-cheung, BBS, MH, JP
Dr Hon KWOK Ka-ki
Dr Hon Fernando CHEUNG Chiu-hung
Hon POON Siu-ping, BBS, MH
Hon TANG Ka-piu, JP

Members absent : Hon Albert HO Chun-yan
Hon Frederick FUNG Kin-kee, SBS, JP
Hon Ronny TONG Ka-wah, SC
Hon Frankie YICK Chi-ming
Dr Hon Helena WONG Pik-wan

**Public Officers : Item III
attending**

Mrs Elina CHAN
Principal Assistant Secretary for Labour and Welfare
(Welfare) 3
Labour and Welfare Bureau

Miss Cecilla LI
Assistant Director of Social Welfare (Elderly)
Social Welfare Department

Mr Kenneth WOO
Chief Executive Officer (Subventions/Planning)
Social Welfare Department

Item IV

Miss SHEA Wing-man
Principal Assistant Secretary for Labour and Welfare
(Welfare) 1
Labour and Welfare Bureau

Mr FUNG Man-chung
Assistant Director of Social Welfare (Family & Child
Welfare)
Social Welfare Department

Item V

Miss Annie TAM, JP
Permanent Secretary for Labour and Welfare
Labour and Welfare Bureau

Mr Donald CHEN, JP
Deputy Secretary for Labour and Welfare (Welfare) 2
Labour and Welfare Bureau

Miss Cecilla LI
Assistant Director of Social Welfare (Elderly)
Social Welfare Department

Mr NG Wai-kuen
Assistant Director of Social Welfare (Social Security)
(Acting)
Social Welfare Department

Dr Ernest CHUI
Principal Investigator
Consultant Team

Dr CK LAW
Principal Investigator
Consultant Team

Clerk in attendance : Mr Colin CHUI
Chief Council Secretary (2) 4

Staff in attendance : Ms Catherina YU
Senior Council Secretary (2) 4

Miss Maggie CHIU
Legislative Assistant (2) 4

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I. Information paper(s) issued since the last meeting

Members noted that no paper had been issued since the last meeting.

II. Items for discussion at the next meeting
[LC Paper Nos. CB(2)770/14-15(01) to (02)]

2. Members noted that the Administration had proposed to discuss at the next meeting scheduled for 9 March 2015 the following items –

- (a) Promoting active ageing; and
- (b) Review of Disability Allowance ("DA").

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3. The Deputy Chairman said that as deputations had not been invited to give views on the Pilot Scheme on Residential Care Service Voucher for the Elderly ("RCS Voucher Scheme"), the Hong Kong Council of Social Service ("HKCSS") hoped that deputations would have a chance to express views on the RCS Voucher Scheme. She suggested that a meeting should be arranged to receive deputations' views in this regard. Supporting the suggestion, the Chairman and Dr Fernando CHEUNG proposed that a special meeting should be held for the purpose. Members agreed.

(Post-meeting note: A special meeting had been scheduled for 23 March 2015 to receive deputations' views on the RCS Voucher Scheme.)

4. Mr LEUNG Yiu-chung suggested that deputations should be invited to give views on DA at the next regular meeting. Considering that the discussion on DA would be lengthy, the Chairman said that the Panel should consider receiving deputations' views on DA later.

5. The Deputy Chairman said that the practice to require individuals/deputations to make oral representation within three minutes at Panel meetings should be reviewed and more time should be provided for individuals/deputations to present their views. Sharing a similar view, Mr LEUNG Yiu-chung said that, depending on topics to be discussed, the Panel could consider arranging only one agenda item at a meeting to allow sufficient time for discussion. While agreeing that meetings dedicated to discussing only one item might be necessary in some cases, the Chairman said that having regard to the long list of outstanding items for discussion by the Panel, two discussion items should be scheduled at a meeting as far as possible.

III. Setting up a new contract residential care home for the elderly in the public rental housing development at Fo Tan, Shatin Areas 16 & 58D

[LC Paper Nos. CB(2)770/14-15(03) to (04)]

6. The Chairman drew members' attention to Rule 83A of the Rules of Procedures regarding personal pecuniary interest to be disclosed. He reminded members to declare interests in the matter under discussion, if any.

7. At the invitation of the Chairman, Assistant Director of Social

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Welfare (Elderly) ("ADSW(Elderly)") briefed members on the Government's proposal to construct a 100-place contract residential care home for the elderly ("Contract RCHE") in the public rental housing ("PRH") development of the Housing Authority at the site of Fo Tan, Shatin Areas 16 & 58D ("the subject PRH development"), with the financial provision to be met from the Lotteries Fund.

Optimal use of the subject PRH development site

8. Given that there would be about 4 850 domestic flats under the subject PRH development and Shatin was facing an ageing population, the Deputy Chairman expressed grave concern that the provision of a 100-place Contract RCHE might not be sufficient to meet the demand. She said that in planning for the provision of residential care places, the Administration should take into account the elderly population in the district concerned. The sites should be optimized to provide as many residential care places as possible.

9. Mr LEUNG Che-cheung said that in the light of the ageing population and great demand for RCHEs, the Administration should provide more residential care places in future projects. The Chairman opined that more places could have been provided in the Contract RCHE if the Administration had planned for it at the early planning stage. Noting that most of the new RCHEs/RCHEs with Day Care Units for the Elderly ("DCUs") and Day Care Centres for the Elderly ("DEs") at the 12 sites earmarked for the constructions of these facilities (Annex 3 to the Administration's paper (LC Paper No. CB(2)770/14-15(03)) referred (hereinafter referred to as "Annex 3")) would only provide 100 places each, he enquired about the basis of determining the scale.

10. Principal Assistant Secretary for Labour and Welfare (Welfare)3 ("PAS(LW)(Welfare)3") responded that the total floor area that could be allocated for housing welfare facilities varied among different PRH developments. In considering the size of new RCHEs in PRH developments, the Administration would need to strike a balance between meeting the housing needs and the needs for residential care services ("RCS") for the elderly. The planned provision for the Contract RCHE was 100 places, and subject to the fitting-out works of the RCHE concerned, there might be slight room for additional places upon its completion.

11. PAS(LW)(Welfare)3 further said that the number of sites earmarked for the construction of new RCHEs, RCHEs with DCUs and

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DEs had been increased from 11 to 12 and some of them were PRH development sites. The Administration would continue its efforts to secure more sites for the construction of RCHEs. ADSW(Elderly) added that a new Contract RCHE in Tai Wai had commenced operation in November 2014 and three of the aforesaid 12 sites were located in Shatin.

12. The Deputy Chairman reiterated that the Administration should take into account the residential care needs of the elderly persons in Shatin and optimize the subject site. She took the view that the Administration should consider providing the Contract RCHE on one or two more storeys and there should also be a garden near the Contract RCHE so that the residents could enjoy a pleasant environment. Noting that there was no provision for day care places in some of the RCHEs mentioned in Annex 3, she considered that the prevailing policy failed to address different care needs of elderly persons.

13. PAS(LW)(Welfare)3 responded that the Contract RCHE would be located in a PRH development, and greened areas would be available. Also, when identifying suitable sites for RCHEs under PRH developments, the Administration would take into account the environmental impacts and would situate the proposed RCHEs away from noise sources as far as practicable or implement suitable noise mitigation measures to alleviate negative impacts.

14. The Deputy Chairman took the view that respite places should be a standard provision of RCHEs and enquired about whether such places would be provided in the Contract RCHE. ADSW(Elderly) responded that designated respite care places would be included in all new Contract RCHEs.

15. Dr Fernando CHEUNG said that the provision of day care services ("DCS") in the Contract RCHE would facilitate coherence of care services for the elderly persons. It would be ideal for the Contract RCHE to also provide relevant services as well as home care services ("HCS"). PAS(LW)(Welfare)3 responded that various types of welfare facilities including a 60-place DE would be provided in the subject PRH development to meet the needs of the community.

16. Referring to the projects under the 12 sites mentioned in Annex 3, Mr POON Siu-ping enquired about their development progress, particularly the RCHE in Anderson Road, Kwun Tong, and whether adjustments could still be made to the number of residential care places under these projects. Chief Executive Officer (Subventions/Planning)

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responded that the construction works of the projects which had obtained the necessary funding had commenced as scheduled. As regards the RCHE in Anderson Road, Kwun Tong, he said that the construction works would commence in early 2015 and the RCHE was expected to commence operation in 2018-2019.

17. The Deputy Chairman said that the Government was considering a pilot scheme under which some flats of the PRH developments under construction would be sold to Green Form applicants, with prices set at a level lower than those of Home Ownership Scheme flats. She took the view that if the subject PRH development was included in this pilot scheme, the Administration should make known to the prospective buyers about the Contract RCHE by specifying it in the land lease.

Manpower supply for the care sector

18. In view of the increasing supply of residential care places and hence a greater demand for care workers, Mr LEUNG Che-cheung expressed concern about the manpower supply for the care sector. PAS(LW)(Welfare)3 responded that manpower supply for the care sector had always been a concern of the Administration. In addition to organizing conventional training programmes for care workers and nurses, the Administration had explored innovative ways to attract new blood to join the elderly service sector. For instance, the "first-hire-then-train" pilot project was launched to encourage young people to provide care services in RCHEs. Under the pilot project, young people would work in RCHEs to acquire the skills and gain working experience while at the same time receive structured training in elderly care services. This would be beneficial to their career development. That aside, while the scope of the Elderly Services Programme Plan ("the Programme Plan") being prepared by the Elderly Commission ("EC") was still being finalized, it was expected that the Programme Plan would also study the long-term manpower planning for the care sector.

19. Mr POON Siu-ping said that, to his knowledge, some service providers had requested to import labour for elderly care services. In his view, importation of care workers would affect the training for local care workers and the development of the care sector. The Administration should be mindful of the impact of importation of labour on the care sector. Sharing a similar view, Mr LEUNG Kwok-hung said that importation of labour would impede the wage growth of local care workers, thereby discouraging new entrants.

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Planning for elderly care services

20. Dr Fernando CHEUNG said that the Administration was currently adopting a piecemeal approach in planning for elderly care services. At present, elderly care services were provided in a fragmented and disconnected manner. If "ageing in place" was the Government's policy, HCS and DCS should be strengthened. He opined that there should be a continuum of care services for the elderly and urged the Administration to review its approach to elderly services planning. Noting that the planned population in the subject PRH development was 13 000, he took the view that RCS should only be part of the service continuum. The Administration should assess the demand for community care services ("CCS") under the subject PRH development.

21. PAS(LW)(Welfare)3 responded that elderly persons might require support from family members or CCS (i.e., HCS or DCS) before they were institutionalized due to deteriorating health conditions. Each elderly person on the Central Waiting List for subsidized long-term care services ("CWL") was being taken care of by a Responsible Worker ("RW") regarding his or her application for long term care services. Service providers of long-term care services would also keep in view the conditions of the elderly persons and refer them to services that best suited their needs, if necessary. The hardware (i.e. RCHEs) and the software for provision of various types of care services for the elderly (i.e. manpower resources) should complement each other. The Administration would make its best efforts to enhance the provision of elderly services.

22. Mr LEUNG Kwok-hung said that, given the inadequate supply of RCHEs, elderly persons who were assessed to be eligible for RCS were only provided with DCS or HCS under the existing policy. In his view, if an elderly person was assessed by an RW to be eligible for institutional care services, he or she should be provided with a residential care place. He enquired about the mechanism for drawing up care plans for elderly persons by RWs. He said that the Administration had neglected the professional assessments of the care needs of the elderly persons.

23. The Chairman said that among the five new RCHEs/RCHEs with DCUs mentioned in Annex 2 of the Administration's paper, only the RCHEs in Pratas Street, Sham Shui Po and Tsuen Wan would have a ratio of subsidized to non-subsidized places ("the ratio") at 8:2. He asked the reasons for not increasing the ratio to 8:2 for the remaining three RCHEs.

24. ADSW(Elderly) responded that the ratio for new RCHEs would

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generally be set at 6:4 for planning purposes. Factors such as the economic situation of the district concerned and the number of non-subsidized RCS places in the vicinity would be considered in deciding the numbers of subsidized and non-subsidized places in an RCHE. She said that a new provision allowing the Administration to reserve the right to adjust the ratio of subsidized and non-subsidized places during the contract period in all new service contracts would be added. This would give the Administration the flexibility to make necessary adjustment to the ratio having regard to various factors including the occupancy of non-subsidized places.

25. The Chairman said that as the demand for non-subsidized residential care places was also great, all such places in RCHEs would soon be taken up. As such, there would be no room for the Administration to adjust the ratio. Given that many elderly persons who were on CWL were from grass-root families and thus could not afford non-subsidized places in RCHEs, the Administration should increase the proportion of subsidized places in RCHEs so that more of these elderly persons could be admitted to RCHEs.

26. Mr LEUNG Kwok-hung said that by increasing the supply of subsidized places in RCHEs, the Administration would have to shoulder greater operating expenditure. He took the view that the Administration had ignored members' repeated requests for increasing the ratio because it wanted to avoid heavier financial commitment. Unless the Financial Secretary proposed to provide more funding for RCS in the Budget, the problem of inadequate provision of subsidized RCS would not be resolved.

27. PAS(LW)(Welfare)3 responded that the Government had increased the resources allocated to RCS and CCS every year in the past. In addition, support was also provided for carers of elderly persons. The Administration would continue its efforts in meeting the care needs of elderly persons.

28. Commending the incorporation of the Contract RCHE into the subject PRH development, Dr Fernando CHEUNG said that the Administration should adopt the same approach for the provision of welfare facilities in all PRH developments. Noting that the Contract RCHE was scheduled for completion in around 2019 but the award of contract for its operation would only take place in 2020, he urged the Administration to start the selection of suitable operator for the Contract RCHE earlier. This would enable the Contract RCHE to commence

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operation earlier and the selected operator could also provide input to the design of the Contract RCHE.

29. PAS(LW)(Welfare)3 responded that the Administration had compressed the necessary process. Rectification of defects of and selection of suitable operator for the Contract RCHE would be carried out in parallel so that the Contract RCHE could commence operation earlier.

30. In response to the Chairman's invitation of views, members present supported in principle the submission of the relevant funding proposal to the Finance Committee ("FC") for consideration. The Deputy Chairman said that given the size of the 12 sites earmarked for the construction of new RCHEs, RCHEs with DCUs and DEs, more places should be provided in the RCHEs concerned. She urged the Administration to review the number of places to be provided in these RCHEs. The Chairman and the Deputy Chairman requested the Administration to provide information on stand-alone RCHEs and the RCHEs located in PRH developments under the 12 sites mentioned in Annex 3 before submitting the relevant funding proposal to FC.

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(Post-meeting note: The Administration's response was issued to members vide LC Paper No. CB(2)1266/14-15(01) on 16 April 2015.)

IV. Revision of fees under the Adoption Ordinance (Cap. 290)
[LC Paper No. CB(2)770/14-15(05)]

31. At the invitation of the Chairman, Principal Assistant Secretary for Labour and Welfare (Welfare)1 ("PAS(LW)(Welfare)1") briefed members on the proposed revisions to two guardian ad litem ("GAL") fee items related to the adoption service specified in the Adoption Rules (Cap. 290A) and the Convention Adoption Rules (Cap. 290D) made pursuant to the Adoption Ordinance (Cap. 290).

32. Mr CHAN Chi-chuen and Dr Fernando CHEUNG were of the view that recovering the cost for GAL fees should not be the Administration's major consideration as adoption was for the good of the children concerned and would help solve social problems. Mr CHAN opined that a person who wished to adopt a child would unlikely change his or her mind because of a moderate increase in GAL fees. Of the two options proposed by the Administration (i.e. increasing the two GAL fee items in one-go under option (a), and a gradual incremental approach under option

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(b)), he considered that Option (b) was better.

33. Mr POON Siu-ping said that the Administration should take steps to encourage child adoption. Noting that the Administration aimed to recover 20% of the full cost incurred in the execution of statutory duties under Cap. 290A and Cap. 290D, he asked whether there was room for adjusting the percentage. Assistant Director of Social Welfare (Family & Child Welfare) ("ADSW(Family & Child Welfare)") responded that in setting the percentage, the Administration had struck a balance between recovering the cost and avoiding deterring applicants from adopting children. The cost recovery target had been set at 20% of the full cost for many years.

34. In response to Mr POON Siu-ping's enquiry about the Administration's preference for the options, PAS(LW)(Welfare)1 responded that the Administration considered both options acceptable and hoped to seek members' views on its proposals.

35. Mr CHAN Chi-chuen said that the Administration should review policies relating to child adoption and relax the adoption criteria, e.g. allowing persons who had been married for less than three years to apply for adoption of children. He asked whether the Administration had any plan to conduct a review.

36. ADSW(Family & Child Welfare) responded that it was necessary to have stringent adoption criteria to ensure the best interests of the children concerned. An applicant should be mature enough to understand that adopting a child was a lifetime commitment and would be capable of fulfilling this commitment. While children aged above three and children with complicated family background or health problems might need to wait for a longer time before being adopted, the average lead time for a child to be placed with an adoptive family was about three months. The Administration considered that the prevailing adoption criteria were appropriate under the existing circumstances. That said, the Administration would keep in view the development in the society and consider conducting a review of the relevant policies if necessary.

37. In response to Mr CHAN Chi-chuen's enquiry about the number of children being adopted and that of adoption applicants, ADSW(Family & Child Welfare) responded that in the past three years, the average number of children being adopted involving payment of GAL fees and that of adoption applicants was 119 and 200 odd per annum respectively.

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38. Mr CHAN Chi-chuen enquired about whether the criteria for adoption were legal requirements or policy guidelines. ADSW(Family & Child Welfare) responded that adoption criteria were set out in Cap. 290 and the Social Welfare Department ("SWD") acted according to both the law and the relevant practice guidelines. At the request of Mr CHAN, ADSW (Family & Child Welfare) undertook to provide information on policy guidelines and legislative provisions in relation to the criteria and requirements for adoption.

39. Dr Fernando CHEUNG said that the best adoption period for a child would be at the age below six. Statistics had shown that more than half of the children who were eligible for adoption were not adopted. He said that SWD and accredited bodies for provision of adoption service had been very prudent in dealing with cases under which parents did not express their willingness to relinquish their children. Adoption for these children would normally not be arranged although in some cases, the parents had not visited their children for, say, one year. These children, if not being adopted, would end up at children's homes or foster homes until they were 18 years old. Under the existing arrangements, a foster parent could not adopt a foster child even if the former so wished. As such, the foster child might need to move into another foster family which was extremely undesirable and could be detrimental to the child. He called on the Administration to conduct a comprehensive review on the spectrum of services in relation to adoption, foster care and children's homes.

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40. ADSW(Family & Child Welfare) responded that SWD's social workers would draw up long-term welfare plans for the children concerned and strive to assist the children who were suitable for adoption. In the event that the parent's consent could not be obtained, SWD might consider applying to the court for an order to dispense with the parental consent in the adoption arrangement if it was in the best interests of the child concerned. Application for this order would only be made after careful consideration as it might involve a deprivation of a parent's rights. Adoption orders were successfully obtained in the past for some cases under which the parents had not visited their children for a long time. The Administration would carefully consider members' suggestion of conducting a review on adoption services and care services. At the request of Dr Fernando CHEUNG, ADSW (Family & Child Welfare) undertook to provide the number of cases under which adoption could not be arranged for children who had not been visited by their parents for one or two years, and the number of cases under which a court order was obtained for adoption of a child without the consent of his or her parents.

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41. In summing up the discussion, the Chairman said that two members had indicated support for option (b) and no member had indicated support for option (a).

(Post-meeting note: The Administration provided the required information mentioned in paragraphs 38 and 40 above vide LC Paper No. CB(2)1082/14-15(01) on 18 March 2015.)

V. Pilot Scheme on Residential Care Service Voucher for the Elderly

[LC Paper Nos. CB(2)770/14-15(06) to (07) and CB(2)820/14-15(01)]

42. At the invitation of the Chairman, Permanent Secretary for Labour and Welfare ("PS(LW)") briefed members on the progress of EC's study on the feasibility ("Feasibility Study") of introducing an RCS Voucher Scheme. With the aid of a powerpoint presentation, Dr Ernest CHUI, Principal Investigator of the Consultant Team, took members through the Consultant Team's preliminary findings and recommendations.

(In the absence of the Chairman, the Deputy Chairman took the chair. At 12:15 pm, the Deputy Chairman extended the meeting for 10 minutes beyond the appointed ending time to allow sufficient time for discussion.)

Quality of service providers participating in the RCS Voucher Scheme

43. Dr Fernando CHEUNG said that the service quality of private RCHEs participating in the Enhanced Bought Place Scheme ("EBPS") was not on par with that of subvented/contract RCHEs. According to the Director of Audit's Report No. 63 ("Report No. 63"), the level of service in terms of space and staffing standards of such RCHEs was considerably lower than that of subvented/contract RCHEs. It was also stated in Report No. 63 that, as at end-March 2014, only some 5% of the elderly persons on CWL were willing to take up EBPS places. Given that the unit cost provided for RCHEs participating in EBPS ("RCHEs in EBPS") was lower than that for subvented/contract RCHEs; and that the proposed voucher value would make reference to the unit cost of subsidized places in RCHEs in EBPS, he wondered whether the RCS Voucher Scheme would give enough incentive for service improvement. He also expressed concern about the participation rate and the service quality if the services under the RCS Voucher Scheme would be provided mainly by RCHEs meeting the standards of EBPS. While the RCS Voucher Scheme could

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improve the unit subsidy and occupancy rate of participating RCHEs, he took the view that it was not an effective solution to the problem of gross shortage of RCS. Noting that means tested was suggested for users on individual basis under the Scheme, he held the view that users of the RCS Voucher Scheme should not be subject to means test. He worried that the Scheme would pave the way for the introduction of means test to the existing subsidized CCS and RCS in future.

44. PS(LW) responded that the RCS Voucher Scheme aimed to enable elderly persons, particularly those who were admitted to private RCHEs and were receiving Comprehensive Social Security Assistance ("CSSA"), to receive better services. It also sought to reduce the waiting time for RCS by making use of places offered by self-financing RCHEs and private RCHEs. Since the "money-following-the-user" approach as well as the co-payment and top-up arrangements would be helpful to the sustainability of and the Administration's long-term commitment to the provision of RCS, the RCS Voucher Scheme would test the viability of this new funding mode. The RCS Voucher Scheme would also provide an input to EC in drawing up the Programme Plan. She stressed that the conduct of the Feasibility Study would not affect the Government's present commitment to providing subsidized RCS for elderly persons. The Administration would continue its efforts to secure suitable sites for the construction of RCHEs and was actively following up on the projects under the Special Scheme on Privately Owned Sites for Welfare Uses to increase the supply of subsidized RCS places.

45. Expressing concern about the quality of private RCHEs, the Deputy Chairman enquired about how the Administration would monitor the quality of private RCHEs participating in the RCS Voucher Scheme. PS(LW) responded that as recommended by the Consultant Team, a monitoring mechanism would be put in place to ensure the service quality under the RCS Voucher Scheme.

Implications of the RCS Voucher Scheme on community care services

46. Mr TANG Ka-piu said that many service providers under the Pilot Scheme on Community Care Service Voucher for the Elderly ("CCS Voucher Scheme") had reflected that the CCS voucher value was insufficient to cover their costs. As the proposed RCS voucher value might be about two times of the CCS voucher value, he worried that the attention of social workers and elderly persons might be attracted to the RCS Voucher Scheme, thereby affecting the provision of CCS. It might also trigger some participants of the CCS Voucher Scheme to switch to

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the RCS Voucher Scheme. In view of the inadequacy of resources committed to CCS and the uncertainty of service demand faced by CCS providers, there was a view that elderly persons with assessed care needs should be given service vouchers of a single value, with which they could choose to receive either CCS or RCS.

47. The Deputy Chairman said that some members of the Panel raised no objection to the exploration of an RCS voucher scheme on the ground that the relevant feasibility study should deal with the inadequacy of RCS for elderly persons. However, the design of the RCS Voucher Scheme had not taken into account the implications of the RCS Voucher Scheme on CCS. She said that HKCSS had expressed concern that the introduction of an RCS voucher scheme would affect the popularity of the CCS Voucher Scheme.

48. PS(LW) responded that given the scopes of CCS and RCS were different, the services provided under the two voucher schemes would not overlap. The Administration was also aware that some elderly persons might choose to receive CCS while waiting for subsidized RCS, and some elderly persons were assessed by the SWD's Standardised Care Need Assessment Mechanism for Elderly Services ("SCNAMES") as eligible for both CCS and RCS. The Consultant Team had therefore been asked to consider as part of the Feasibility Study whether an RCS Voucher Scheme would affect the CCS Voucher Scheme or bring out unintended consequences such as premature institutionalization. Furthermore, the Feasibility Study also put a heavy focus on measures to assist elderly persons to make informed decisions on the type of services they would receive, such as through the provision of case management services for voucher users. On the value of the RCS voucher, PS(LW) said that the proposed RCS voucher value was not the same as that of the CCS voucher as the unit costs of RCS and CCS were different.

Objectives of the RCS Voucher Scheme

49. In response to the Chairman's enquiry about the objectives of the RCS Voucher Scheme, PS(LW) said that there were around 30 000 elderly persons waiting for subsidized RCHEs and the waiting time was around 20 to 30 months. The vacancy rate of private RCHEs was around 30% and around 70% of residents in private RCHEs were receiving CSSA. On average, these elderly persons were receiving around \$6,000 per month from CSSA to pay for the services of private RCHEs. Private RCHEs pegged their services to the amount of monthly CSSA payments received by elderly persons and there was little incentive for service

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improvement. The RCS Voucher Scheme could leverage the private sector's capacity and enable eligible elderly persons to choose the services provided by private RCHEs which might better suit their needs. The RCS Voucher Scheme might provide incentive for private RCHEs to improve service quality.

50. The Chairman took the view that while the RCS Voucher Scheme might address the co-payment problem faced by CSSA recipients, it might not be able to improve the waitlisting situation of subsidized RCHEs. He noted that elderly persons on CWL were moderately or severely impaired while elderly persons living in non-subsidized places in private RCHEs were not required to go through SCNAMES and therefore might not be frail. Furthermore, he also observed that some RCHEs in EBPS might need to further improve their services to meet the expectation of elderly persons. It was therefore necessary to make clear the objective of the RCS Voucher Scheme.

51. PS(LW) responded that elderly persons who could afford to pay more might consider topping up the difference between the voucher value and the fee charged by private RCHEs and purchase upgraded/value-added services from their chosen RCHEs which could meet the service requirements imposed by SWD under the RCS Voucher Scheme. Apart from private RCHEs, self-financing RCHEs could also participate in the RCS Voucher Scheme. The Chairman and the Deputy Chairman said that it would give rise to the problem of the better-off elderly persons competing with the grassroots in securing a place under the RCS Voucher Scheme.

52. Mr TANG Ka-piu was concerned about whether the RCS Voucher Scheme could significantly shorten the waiting time given that the average waiting time for RCHEs in EBPS was only around six to nine months. He asked whether it would be more straightforward for the Administration to consider purchasing additional EBPS places above the 50% limit for EBPS RCHEs with high service demand. He also opined that elderly persons discharged from hospitals might have a more imminent need for RCS. He suggested the Administration collect information on the service needs of this group of elderly persons and discuss with the sector before introducing the RCS Voucher Scheme.

53. Mr LEUNG Kwok-hung said that he did not support the "money-following-the-user" approach as it could not help elderly persons with limited financial means to obtain the required RCS. Instead, it would provide subsidy for those well-off elderly persons to use RCS. In

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his view, the demand for private RCS and the fee for these services would drop if subsidized RCS could meet the needs of elderly persons. The Administration should secure more land for constructing RCHEs and the poor elderly persons should be accorded priority in the provision of subsidized RCS.

54. PS(LW) responded that the RCS Voucher Scheme targeted at those who were in need of RCS. The co-payment schedule was drawn up with that in mind. The proposed top-up arrangement was meant to provide an option for the better-off elderly persons to use upgraded/value-added services with extra payment. Even so, it was proposed that there would be a limit on the topping up amount. There was no question of tilting the RCS Voucher Scheme towards affluent elderly persons.

55. The Chairman asked how the RCS Voucher Scheme could improve the waitlisting situation of subsidized RCS and whether existing CSSA recipients who were not on CWL could use the RCS voucher if their family members paid for their co-payment. He also enquired about whether elderly persons who had passed the assessment under SCNAMES and had been admitted to subsidized places in RCHEs in EBPS could participate in the RCS Voucher Scheme.

56. Dr CK LAW, Principal Investigator of the Consultant Team, responded that based on a rough estimation, around 10% to 20% of the elderly persons, who were receiving CSSA, were on CWL and were residing in non-subsidized places in private RCHEs, had expressed interest in using the RCS voucher. The RCS Voucher Scheme would enable this group of elderly persons to switch to RCHEs with a better quality promptly. In addition to non-subsidized places in private RCHEs, RCS voucher users could also choose non-subsidized places in self-financing RCHEs, subvented RCHEs and contract RCHEs. The initial design of the RCS Voucher Scheme did not cover elderly persons who had passed the assessment under SCNAMES and had been admitted to subsidized places in RCHEs in EBPS. CSSA recipients who were not on CWL would not be eligible for the RCS Voucher Scheme as elderly persons with mild impairment were not provided with subsidized RCS under the existing policy. PS(LW) said that elderly persons who had passed the assessment under SCNAMES and had been admitted to subsidized places in RCHEs in EBPS were already receiving subsidized RCS in RCHEs under EBPS and it did not appear that there was a pressing need to cover them also under the RCS Voucher Scheme. She nevertheless noted that some members would wish the Administration to further consider this.

Prospective users of the RCS Voucher Scheme

57. In response to Dr Fernando CHEUNG's enquiry about the expected distribution of users on different co-payment levels, Dr CK LAW said that according to the preliminary findings of the Feasibility Study, it was expected that 70% to 80% of RCS voucher users would be level 0 users. These users of the RCS voucher would either be eligible for CSSA or were already receiving CSSA before joining the voucher scheme. In other words, the vast majority of the RCS voucher users would be elderly persons with limited financial means. For elderly persons who were well-off, Dr CK LAW said that under the preliminary recommendations, the maximum co-payment ratio would be 75% (i.e. \$8,764 if the voucher value was \$11,685). Compared to the monthly fee of around \$1,600 to \$2,000 that elderly persons had to pay for the existing forms of subsidized RCS, RCS voucher might not be the most attractive option for them. Furthermore, given that voucher users could only purchase services with a value of \$20,449 per month (top-up payments included) and that some well-off elderly persons often preferred high-end non-subsidized places with a monthly fee of \$20,000 to \$50,000, it was highly unlikely that they would choose the RCS voucher.

58. Dr Fernando CHEUNG said that as the average unit cost provided for subvented RCHEs (\$14,000 for care and attention homes and \$20,000 for nursing homes) was higher than the RCS voucher value (\$11,685), subvented RCHEs might not find the RCS Voucher Scheme attractive. He expressed grave concern that if RCS would mainly be provided by way of service voucher in future, elderly persons who wished to be admitted to subvented RCHEs would need to pay a higher fee.

59. Dr CK LAW responded that as subvented RCHEs only had a small number of vacancies, their interest in joining the RCS Voucher Scheme would be limited. Pointing out that the monthly fee of some non-subvented places in RCHEs was below \$11,000, he said that some of these RCHEs might consider participating in the RCS Voucher Scheme. He further said that under EBPS, places were purchased under EA1 and EA2 categories. The unit cost of EA1 places was higher than that of EA2 places because the service standard of the former was higher. Operators of EA2 places could join the RCS Voucher Scheme if they enhanced their service standard. It was hoped that the RCS Voucher Scheme could provide incentive for private RCHEs including those with EA2 places to upgrade their service standard.

Action

VI. Any other business

60. There being no other business, the meeting ended at 1:05 pm.

Council Business Division 2
Legislative Council Secretariat
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