

立法會
Legislative Council

LC Paper No. CB(2)381/14-15(06)

Ref : CB2/PL/WS

Panel on Welfare Services

**Updated background brief prepared by the Legislative Council Secretariat
for the meeting on 8 December 2014**

**Vocational rehabilitation services and residential care services
for persons with disabilities**

Purpose

This paper provides a brief account of the discussions of the Panel on Welfare Services and the former Joint Subcommittee on Long-term Care Policy regarding the provision of vocational rehabilitation services and residential care services ("RCS") for persons with disabilities.

Background

2. To identify persons with disabilities with genuine need for residential services and to match them with appropriate types of services, a Standardized Assessment Tool for Residential Services for People with Disabilities was implemented with effect from 1 January 2005. All applicants for subvented residential services for persons with disabilities must be assessed by the Tool to ascertain their residential services needs before they are put on the Central Waiting List or admitted to their required service units.

3. According to the Administration, various kinds of subsidized RCS¹ are provided to those who cannot live independently or cannot be adequately cared for by their families. In line with the strategic directions enshrined in the Hong Kong Rehabilitation Programme Plan, the Government has introduced a statutory licensing scheme for residential care homes for persons with

¹ RCS for persons with disabilities include Hostel for Severely Mentally Handicapped Persons ("HSMH"), Hostel for Moderately Mentally Handicapped Persons ("HMMH"), Supported Hostel ("SH"), Care and Attention Home for Severely Disabled Persons, Hostel for Severely Physically Handicapped Persons ("HSPH"), Integrated Vocational Training Centre (Residential Service), Small Group Home for Mildly Mentally Handicapped Children/Integrated Small Group Home and Residential Special Child Care Centre, etc.

disabilities ("RCHDs") to regulate their standards and operation since November 2011. As a complementary measure, the Government has also launched a pilot Bought Place Scheme ("BPS") for private RCHDs since October 2011 with a view to encouraging private operators of RCHDs to upgrade the service standard, shortening the waiting time for services by increasing the overall supply of subsidized residential care places, and helping the market develop more service options.

4. In addition to RCS, the Administration provides a wide range of employment and vocational rehabilitation services for persons with disabilities so as to equip them with job skills that meet market requirements and assist them in securing suitable employment commensurate with their abilities. These services and measures include sheltered workshops ("SWs"), supported employment, integrated vocational rehabilitation services centres ("IVRSCs"), integrated vocational training centres (day service), on the job training programme for people with disabilities and Sunny Way – on the job training programme for young people with disabilities, etc. Furthermore, for persons with severe intellectual disabilities who are unable to benefit from vocational rehabilitation training, day activity centers ("DACs") provide them with day care and training in daily living skills and simple work skills.

Members' deliberations

Measures to increase the provision of residential care places for persons with disabilities

5. Noting with grave concern about the long waiting time for hostels for mentally handicapped persons, some Members held a strong view that the provision of subvented RCS for persons with disabilities should be expedited to shorten the average waiting time to a reasonable timeframe. To alleviate the shortfall of RCS, the Administration should consider allocating a certain percentage of the total floor area of new public rental housing ("PRH") projects to RCHDs and providing residential care places for persons with disabilities ("RCD places") in Home Ownership Scheme flats. The provision of RCHDs should be included as a condition in the sale of land. To increase the supply of HSMH places, the Administration should consider introducing BPS for private HSMHs. They also called on the Administration to seriously consider providing residential care homes and hostels for mentally handicapped persons in Government premises such as public housing blocks or Government Office Buildings.

6. The Administration advised that in the coming five years, an additional 1 036 DAC places and 896 HSMH cum DAC places would be provided.

Apart from the additional 896 HSMH places which would be provided by 2017-2018, another 607 additional HSMH places would be provided through redevelopment or expansion on the sites owned by non-governmental organizations, particularly those under the Special Scheme on Privately Owned Sites for Welfare Uses ("the Special Scheme"). From 2013-2014 to 2017-2018, the Social Welfare Department ("SWD") had earmarked sites in 14 development projects for the construction of new subsidized RCHDs. The Administration anticipated that about 2 140 additional residential care places and about 1 590 additional day training places would be provided for persons with disabilities between 2014-2015 and 2017-2018.

7. Noting with concern that some private RCHDs did not meet the requirements under BPS, some Members considered that the Administration should assist these private RCHDs to meet the required standards, thereby increasing the supply of subsidized RCD places.

8. According to the Administration, as at end-March 2014, SWD had purchased a total of 302 places from six private RCHDs. The pilot BPS would be regularized in 2014-2015, with the cap of subsidized places in each home to be raised from 55% to 70% and the target number of places increased from 300 to 450. It was reviewing the operation of BPS and the subvention level for bought places having regard to the market situation. The Administration would continue to subsidize private RCHDs under the Financial Assistance Scheme to undertake improvement works so as to meet the licensing requirements and standards.

Setting target waiting time for RCHDs

9. Some Members reiterated the need for the Administration to formulate long-term plan and set targets for the provision of RCHDs. They took the view that the Administration should make a pledge for reducing the waiting time for RCD places. According to the Administration, it would be difficult to set such a target as the waiting time would be affected by various factors, such as the location preference of individual waitlistees, the slow turnover of RCD places due to ageing of persons with disabilities, particularly the ageing of persons with intellectual disabilities. The Administration considered it necessary to review the mode of services having regard to the ageing of persons with disabilities. To this end, the Rehabilitation Advisory Committee had set up a Working Group on Ageing of Persons with Intellectual Disabilities to examine in detail the service needs having regard to the ageing of persons with intellectual disabilities as well as the provision and the mode of the related services. A survey on the service users' profiles was being conducted to collect data for studying the supply of and demand for the services. The Administration would continue to bid for vacant premises in government

buildings and vacant school premises and actively identify vacant PRH units for the provision of rehabilitation services. The Administration would also enhance community care services, which would help alleviate the demand for RCS.

Day training and vocational rehabilitation services

10. Some Members expressed concern about an increase of 30% to 40% in the number of persons with disabilities waiting for long stay care home and the waiting time for DACs and SWs (the average waiting time for DACs and SWs were 57.6 months (1 293 persons on the waiting list as at the end of March 2014) and 12.6 months (2 515 persons) respectively). The Administration explained that, in recent years, additional places were mostly provided for hostels for severely and moderately mentally handicapped persons, and comparatively the waiting time for places in long stay care homes was longer. As at July 2013, a total of 9 300 SW and IVRSC places were offered, 80% of which were places not attached to residential service. An IVRSC providing 160 additional places would be set up in Yuen Long in the 2015-2016 financial year, 80% of which would be for SWs. As at end-March 2014, a total of 4 801 subsidized places were provided in DACs in the territory for persons with disabilities in need. The Administration would keep in view the demand for vocational rehabilitation services and increase the service quotas of DACs and SWs accordingly.

11. Some Members suggested that the Administration should consider delinking DACs from HSMHs. The Administration explained that among the applicants waiting for DAC service, only 408 indicated that they would accept places in standalone DAC, whereas 805 would only accept HSMH cum DAC places. Therefore, there was a need to continue to provide DAC cum Hostel together with standalone places to meet the service demand.

Manpower planning for RCHDs

12. Some Members considered it necessary for the Administration to formulate plans to address the manpower shortage problem of RCHDs. The Administration advised that, to ascertain the manpower demand in the welfare sector, SWD conducted regular projections on the manpower demand for various types of paramedical and care staff in the welfare sector (particularly the manpower demand in elderly care and rehabilitation services). The projections took into account relevant factors such as the existing situation of supply and demand, additional manpower demand arising from new initiatives/projects planned for implementation in future and the ageing population etc., with due reference to other related surveys and views of the welfare sector.

13. According to the Administration, to alleviate the manpower supply problem, training had been strengthened for various ranks of staff servicing RCHDs. Approved health worker training courses were offered in 16 training institutes, providing a total of 56 training courses applicable to RCHDs. The Employees Retraining Board provided training places to upgrade the health care skills of existing staff of RCHDs and health workers who were interested to work in RCHDs. Participants who had successfully completed the training course might apply for registration as health workers according to the Residential Care Homes (Persons with Disabilities) Regulation. In addition, SWD had collaborated with the Hospital Authority in offering the enrolled nurse training programme since 2006. SWD was fully subsidizing the tuition fees for the whole course, provided that trainees of the enrolled nurse training programme met the requirement of working in the welfare sector for a continuous period of no less than two years after satisfactory completion of the training. Through the support of the University Grants Committee, the student intakes of Bachelor of Science (Hons) Occupational Therapy and Bachelor of Science (Hons) Physiotherapy programmes had been increased by 44 places (i.e. from 46 to 90 places) and 40 places (i.e. from 70 to 110 places) respectively per cohort in the 2012-2015 triennium. The two-year Master programmes in Occupational Therapy and Physiotherapy offered by The Hong Kong Polytechnic University in January 2012 had provided a total of about 60 training places (about 30 for each programme). The programmes would continue in 2014. The Administration would expand the "first-hire-then-train" pilot scheme² to cover rehabilitation services and provide an additional 1 000 training places in the coming few years.

Service quality of RCHDs

14. Noting that the staff to resident ratio in RCHDs which had participated in the Pilot BPS was 1:8, some Members expressed grave concern about the standard and service quality of RCHDs. According to the Administration, it had solicited views from different stakeholders in drawing up the BPS scheme, with a view to encouraging private RCHDs to upgrade their service standards, increasing the supply of subsidized residential care places and helping the market develop more service options. The service standard set for RCHDs participating in BPS had exceeded the licensing requirements and these RCHDs were required to provide residents occupying non-BPS places with the same level of service as BPS residents so as to benefit more persons with disabilities. To monitor RCHDs, a Service Quality Group was set up comprising community members and residents' parents who would conduct unannounced visits to RCHDs and offer feedback on the service.

² The "first-hire-then-train" pilot scheme was introduced through the Lotteries Fund in 2013. Under the pilot scheme, young people are recruited to provide care services at residential care homes for the elderly and are provided with subsidies to pursue a two-year part-time programme offered by the Open University.

Relevant papers

15. A list of relevant papers on the Legislative Council website is in the **Appendix**.

Council Business Division 2
Legislative Council Secretariat
2 December 2014

Appendix

Relevant papers on vocational rehabilitation services and residential care services for persons with disabilities

Committee	Date of meeting	Papers
Panel on Welfare Services	11 May 2009 (Item V)	Agenda Minutes
	14 March 2011 (Item V)	Agenda Minutes
	10 December 2012 (Item IV)	Agenda Minutes
	14 January 2013 (Item IV)	Agenda Minutes
Joint Subcommittee on Long-term Care Policy	29 January 2013 (Item I)	Agenda Minutes
	26 February 2013 (Item I)	Agenda Minutes
	2 July 2013 (Item I)	Agenda Minutes
Panel on Welfare Services	12 May 2014 (Item V)	Agenda Minutes