

立法會
Legislative Council

LC Paper No. CB(2)711/15-16

(These minutes have been
seen by the Administration)

Ref : CB2/PL/WS

Panel on Welfare Services

**Minutes of meeting
held on Monday, 9 November 2015, at 10:30 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 Albert HO Chun-yan
Hon LEUNG Yiu-chung
Hon Alan LEONG Kah-kit, SC
Hon LEUNG Kwok-hung
Hon Frankie YICK Chi-ming, JP
Hon CHAN Chi-chuen
Hon LEUNG Che-cheung, BBS, MH, JP
Dr Hon Fernando CHEUNG Chiu-hung
Dr Hon Helena WONG Pik-wan
Hon Martin LIAO Cheung-kong, SBS, JP
Hon POON Siu-ping, BBS, MH
Hon TANG Ka-piu, JP

Members absent : Hon Frederick FUNG Kin-kee, SBS, JP
Dr Hon LEUNG Ka-lau
Hon CHUNG Kwok-pan

Public Officers attending : Item IV

Mr Matthew CHEUNG, GBS, JP
Secretary for Labour and Welfare
Labour and Welfare Bureau

Miss Maria LAU
Acting Deputy Director of Social Welfare
(Administration)
Social Welfare Department

Miss Rita LAU Choi-ha
Chief Social Security Officer
(Social Security) 1
Social Welfare Department

Ms Cecilia CHAN Mei-ping
Senior Statistician (Social Welfare)
Social Welfare Department

Item V

Ms Carol YIP, JP
Director of Social Welfare
Social Welfare Department

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

Miss TAM Pui-shan
Acting Chief Social Work Officer (Family and Child
Welfare) 2
Social Welfare Department

Item VI

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

Mr David LEUNG, JP
Commissioner for Rehabilitation
Labour and Welfare Bureau

Mr LAM Ka-tai, JP
Deputy Director (Services)
Social Welfare Department

Clerk in attendance : Ms Catherina YU
Chief Council Secretary (2) 4 (Acting)

Staff in attendance : Miss Kay CHU
Council Secretary (2) 4

Miss Maggie CHIU
Legislative Assistant (2) 4

Action

I. Confirmation of minutes

[LC Paper No. CB(2)179/15-16]

The minutes of the meeting held on 15 October 2015 were confirmed.

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

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

III. Items for discussion at the next meeting

[LC Paper Nos. CB(2)181/15-16(01) to (02)]

3. Members noted that the Administration had proposed to discuss at the next meeting scheduled for 14 December 2015 the following items –

- (a) The proposed legislation to implement the Law Reform Commission Report on Child Custody and Access;
- (b) Child Fatality Review Report; and
- (c) The Pilot Scheme on On-site Pre-school Rehabilitation Services.

(The Deputy Chairman took the chair at this juncture in the absence of the Chairman.)

Action

IV. Annual adjustment of social security payment rates under the Comprehensive Social Security Assistance ("CSSA") Scheme and the Social Security Allowance ("SSA") Scheme, and issues relating to rent allowance under the CSSA Scheme

[LC Paper Nos. CB(2)181/15-16(03) to (04)]

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

5. At the invitation of the Deputy Chairman, Secretary for Labour and Welfare ("SLW") briefed members on the Administration's proposal to seek the approval of the Finance Committee ("FC") to adjust the standard payment rates under the CSSA Scheme and rates of allowances under the SSA Scheme ("social security payment rates") with effect from 1 February 2016, according to the established mechanism based on the movement of the Social Security Assistance Index of Prices ("SSAIP").

Level of CSSA payments

6. Noting from Annex 1 to the Administration's paper (LC Paper No. CB(2)181/15-16(03)) that the average monthly CSSA payment for one-person CSSA households was \$5,399, Mr TANG Ka-piu wondered whether such a level of payment would be sufficient to cover the fees for private residential care homes for the elderly ("RCHEs"). He expressed concern about the assistance provided for elderly persons on CSSA who could not afford the fees of private RCHEs.

7. SLW responded that CSSA recipients who were residing in private RCHEs would also benefit from the new rates. The CSSA monthly payments contained in Annex 1 of the Administration's paper were average payments only. Moreover, special grants would be provided for elderly CSSA recipients to meet their special needs. Acting Deputy Director of Social Welfare (Administration) ("Acting DDSW(Administration)") supplemented that the average monthly CSSA payment for elderly persons who were residing in private RCHEs was around \$7,600. Other grants would be provided for CSSA elderly recipients, if necessary, according to individual circumstances and health conditions.

8. Mr TANG Ka-piu said that according to a recent media report, some private RCHEs had overstated the accountable expenses incurred by residents. He was concerned that the mechanism under which private

Action

RCHEs could reimburse expenses on an accountable basis would be abused. Acting DDSW(Administration) responded that the Administration would neither allow nor condone abuse of CSSA. The Administration would carefully assess the expenses of CSSA recipients and remind CSSA recipients to make true declarations of their income and expenses.

9. Mr LEUNG Che-cheung said that given that the base of social security payment rates was low, the proposed adjustment would only bring about a small increment. The overall living standards of CSSA households had deteriorated and it was difficult for their young generation to move upward. The Administration should consider reviewing welfare policies, adjusting social security payment rates and providing more types of financial assistance to the needy.

10. Mr LEUNG Kwok-hung said that the Administration was unwilling to implement universal retirement protection although it had the financial capability to do so. In his view, the current financial assistance provided for elderly persons was inadequate. The Administration should increase profits tax by introducing a progressive profits tax regime.

11. Dr Fernando CHEUNG opined the existing level of CSSA payments was inadequate to meet the basic needs. Since the last study on basic needs which was conducted in 1996, the Administration had not conducted any similar study. The adjustment mechanism for the maximum rates of rent allowance ("MRA") under the CSSA Scheme and the requirement for "bad son statement" (i.e. declaration on the financial condition of elderly persons applying for CSSA) under the CSSA Scheme should be reviewed. Although he had raised those concerns many times before, the Administration had not taken any actions to improve the situation.

Annual adjustment mechanism

12. Mr POON Siu-ping was of the view that the annual adjustment mechanism should be reviewed to take into account different needs of CSSA households. He enquired about the measures the Administration would adopt to assist those CSSA households with financial needs if the funding proposal on annual adjustment of social security payment rates could not be approved by FC in December 2015.

13. SLW responded that the Administration had adopted the current annual adjustment mechanism for years and the mechanism had been working effectively. The mechanism which had taken into account the expenditure patterns of CSSA households was objective and scientific.

Action

While the Administration wished that the new rates could take effect from 1 February 2016, the delay in obtaining FC's approval (e.g. because of filibustering by some members) was beyond the Administration's control. He hoped that members would co-operate so that CSSA households could receive the new rates starting from February 2016 as scheduled. CSSA recipients who had imminent financial needs might contact the Social Welfare Department ("SWD"). SWD would consider providing them with financial assistance on a case-by-case basis.

Alleviation of rental burden of CSSA households

14. Mr TANG Ka-piu sought information on the Director of Social Welfare ("DSW")'s discretion of granting a rent allowance higher than MRA. Acting DDSW(Administration) said that DSW might exercise discretion to grant a rent allowance of not more than two times of MRA to CSSA households living in rented private housing and awaiting compassionate rehousing or elderly recipients waitlisted for subsidized RCHes to cover the actual rent they were paying.

15. Mr LEUNG Yiu-chung said that some CSSA households had to use part of their CSSA payments to make up for the differences between the actual rent and the rent allowance. That in turn affected their livelihood. Noting that MRA could cover the actual rent paid by 97.7% of CSSA households living in public rental housing ("PRH"), he called on the Administration to increase MRA to cover the actual rent paid by all CSSA households living in PRH.

16. SLW responded that among the CSSA households who were living in PRH and were paying an actual rent higher than MRA, some were elderly persons or families who did not wish to move to a smaller PRH unit although some of the family members had moved out. The Administration would consider exploring whether there was room for bringing down the number of CSSA households living in PRH who were paying an actual rent higher than MRA.

17. Mr LEUNG Yiu-chung said that given the exorbitant rental of private housing, particularly the rental of sub-divided units, the one-off subsidy provided under the "Subsidy for CSSA Recipients Living in Rented Private Housing" programme ("the Programme") of the Community Care Fund ("CCF") was of little help to CSSA households who were paying a rent higher than MRA. The Administration should consider increasing the amount of the one-off subsidy in line with inflation. He also enquired about the percentage of actual rent that the subsidy under the Programme could cover.

Action

18. SLW responded that 51.1% of CSSA households living in private housing were paying a rent higher than MRA. With the proposed increase of 5.3% for MRA and the provision of the one-off subsidy under the Programme, the number of such households would be decreased to around 35%. When the Programme was first launched, the amount of subsidy was \$1,000 for one-person households and \$2,000 for two-or-more-person households. The amount of subsidy was increased to \$2,000 for one-person households and to \$4,000 for two-or-more-person households when the Programme was re-launched. It was estimated that about 15 000 CSSA households would benefit from the Programme. The Commission on Poverty ("CoP") would review the financial assistance, including rental assistance, for the needy from time to time. The Administration would discuss with CoP the suggestion of increasing the subsidy under the Programme. That said, housing needs of individuals and families from the grassroot should ultimately be addressed through the provision of PRH.

19. Mr LEUNG Che-cheung said that the amount of MRA received by one-person households and six-person households would only be increased by \$87 and \$304 respectively if MRA was increased by 5.3% as proposed. In his view, the increase in MRA could not catch up with the rapid rise in private housing rental. The Administration should do more to help CSSA households who were living in rented private housing and were on the waiting list for PRH, such as providing them with more financial assistance through the programmes under CCF.

20. Mr LEUNG Che-cheung further said that the number of applicants for the Programme had dropped from some 20 000 persons when it was first launched in 2011 to some 15 000 persons now. He enquired about the reasons for the drop in the number of applicants. SLW responded that it was an indication that MRA could cover the actual rent paid by a larger proportion of CSSA households living in rented private housing.

Addressing the housing needs of elderly singletons living in rented private housing

21. The Deputy Chairman was of the view that the Administration should accord priority to address the housing needs of elderly singletons living in rented private housing. Noting that some of these elderly persons might not know that they could apply for PRH, she suggested that the Administration should provide them with information on PRH and assist them in applying for PRH.

Action

Admin

22. SLW responded that the Administration had attached importance to the well-being of elderly persons. Support services such as outreach services, community support services, etc. were provided for elderly persons and those services would be strengthened. At the Deputy Chairman's request, SLW undertook to provide the number of elderly singletons who were living in private housing and were on the waiting list for PRH and the measures adopted to assist those elderly singletons in applying for PRH.

(Post-meeting note: The Administration's response was issued to members vide LC Paper No. CB(2)526/15-16(01) on 28 December 2015.)

Review of the items covered by CSSA standard payment rates

23. Dr Fernando CHEUNG said that the provision of supplements to cover the expenses for spectacles and dental care for able-bodied adult CSSA recipients were excluded from the CSSA standard payment rates following the review of the CSSA Scheme in 1998. He asked the reasons for regarding those items as non-essential. He further said that meal allowance for students under the CSSA Scheme was far from adequate to cover the actual lunch expenses and should be increased.

24. SLW responded that in households of various sizes, the average monthly CSSA payments granted to CSSA recipients were all higher than the average monthly expenditure of non-CSSA households whose spending was the lowest 25% in Hong Kong. Acting DDSW(Administration) supplemented that CSSA standard payment rates were paid to able-bodied adults to meet their basic needs.

25. Dr Fernando CHEUNG enquired whether expenses for spectacles and dental care were included in the calculation of CSSA standard payment rates. Acting DDSW(Administration) said that the weighting system of SSAIP was updated every five years on the basis of the findings of the Household Expenditure Survey on CSSA Households. CSSA recipients could flexibly deploy the standard payment rates to cover their living expenses including those for spectacles and dental care.

26. The Deputy Chairman said that when the Panel discussed and received deputations' views on the review of CSSA in 1998, many members and deputations had expressed objection to the exclusion of expenses for spectacles and dental care from the CSSA standard payment rates. Given that spectacles and dental care were essential to elderly persons, the Administration should not evade the problem. SLW responded that the Administration was in the process of updating the SSAIP weighting system and would take into account members' views.

Action

27. In response to the Deputy Chairman's invitation of views, members present supported in principle the submission of the funding proposal to FC for consideration.

V. The situation of lead in drinking water in child care centres and residential care homes and the follow-up actions by the Administration

[LC Paper Nos. CB(2)181/15-16(05) to (06)]

(The Chairman took the chair at this juncture)

28. At the invitation of the Chairman, DSW briefed members on the situation of lead in drinking water in child care centres and residential care homes ("RCHs") and the follow-up actions taken by the Administration. She said that as at 5 November 2015, water sampling tests had been completed for 78 welfare units (water sampling test had been completed for 55 welfare units as at 30 October 2015). These 78 welfare units included four residential child care centres, five residential special child care centres, three children's home, 16 day child care centres, 16 day special child care centres, 33 small group homes and one hostel for pregnant girls. All the drinking water samples taken from these welfare units were found to comply with the World Health Organization ("WHO")'s provisional guideline value of not more than 10 micrograms per litre for lead in drinking water ("WHO Guidelines").

Taking different water samples for lead tests

29. Expressing dissatisfaction that the Administration did not provide details on the water sampling tests conducted for the welfare units listed in the Annex to its paper (LC Paper No. CB(2)181/15-16(05)), Dr Helena WONG sought information on how these tests were conducted. DSW responded that SWD and the Water Supplies Department ("WSD") had collaborated and conducted the tests in accordance with WSD's prescribed requirements and procedures. Assistant Director (Family & Child Welfare) ("ADSW(Family & Child Welfare)") explained the steps the relevant welfare units should take for water sampling tests and the process of conducting the tests.

30. Dr Helena WONG opined that the information on the water sampling tests provided by the Administration could not help members and the public understand the situation of lead in drinking water in the welfare units concerned. She said that the United States Environmental Protection

Action

Admin

Agency and many countries had very stringent guidelines on conducting water sampling tests for schools and child care centres to ensure that drinking water consumed by children would not be contaminated by lead. In North Wales, different drinking water samples (e.g. hot water, cold water, water stored inside the kettle overnight, water after running the tap for a few minutes, etc.) were collected from the same premises for testing and comparing the level of lead. As the health and well-being of children should be the primary concern of SWD, SWD should not blindly follow the guidelines of WSD in conducting water sampling tests. She requested the Administration to provide (a) information on the lead level of each of the water sample taken from the aforesaid 78 welfare units; (b) SWD's guidelines provided for welfare units on using wall-mounted kettles, water sampling procedures, reducing lead exposure and maintaining water safety; and (c) the number of welfare units which had followed SWD's guidelines mentioned in (b) above. She also requested the Administration to conduct tests for samples of water stored overnight inside wall-mounted kettles and water samples which were taken after running water at a tap for two to five minutes from these welfare units. The Administration should compare the test results and provide the findings to the Panel.

Admin

31. Noting that different numbers of water samples were taken from the 55 welfare units, Mr POON Siu-ping sought information on the number of water sampling tests conducted for each of these units. Mr LEUNG Kwok-hung also asked the reasons for the variation in the number of water samples taken from these welfare units. ADSW(Family & Child Welfare) responded that the numbers of water samples collected and water sampling tests conducted depended on the number of drinking water taps in these units.

Conducting water sampling tests for welfare units serving elderly persons, the chronically ill and persons with disabilities

32. The Deputy Chairman and Dr Fernando CHEUNG said that apart from children, elderly persons, the chronically ill and persons with disabilities were also more easily affected by lead. They took the view that the Administration should be proactive in conducting water sampling tests for welfare units serving these groups of people.

33. DSW responded that in conducting water sampling tests, priority would be accorded to welfare units serving children aged below six who had to stay in the units for long hours and consume drinking water in the units. The Administration had been keeping in view the situation of lead in drinking water and had uploaded health advice for reducing lead exposure

Action

and advice on installation and use of wall-mounted kettles connected with inside service on SWD's website. In addition, SWD had sent letters to RCHEs and residential care homes for persons with disabilities ("RCHDs") on such pieces of advice. Many welfare units had taken steps to maintain safety of drinking water having regard to the health advice and information provided by the Administration. The Administration had assisted RCHEs and RCHDs in purchasing water filters through the Government Logistics Department ("GLD"). Welfare units were welcomed to call the enquiry hotline provided by SWD to seek advice.

34. Mr LEUNG Kwok-hung was of the view that the Administration should adopt a zero-tolerance attitude for lead in drinking water and strive to resolve the problems. As elderly persons were also prone to the effect of lead in drinking water, he urged the Administration to conduct water sampling tests for RCHEs. The Deputy Chairman asked whether the Administration would conduct water sampling tests for subvented RCHEs and RCHDs and encourage private RCHEs and RCHDs to conduct water sampling tests.

35. DSW responded that the Administration had been keeping in view the arrangements for water sampling tests adopted by welfare units including RCHDs and RCHEs. Guidelines on water sampling procedures and information on accredited laboratories in Hong Kong were disseminated. Some welfare units had indicated that they had already arranged water sampling tests with accredited laboratories and did not require the Administration's assistance in this regard. RCHEs and RCHDs could make their own arrangements for water sampling tests and the Administration would provide them with assistance, if necessary.

36. In response to Mr POON Siu-ping's enquiry about the timetable for completing water sampling tests for all the 200 odd welfare units, DSW said that the tests were estimated to be completed before end of 2015.

37. The Chairman said that the Administration should monitor the development and conduct water sampling tests for welfare units serving elderly persons and persons with disabilities when the Administration had the required resources. He requested DSW to relay members' concerns to WSD and ask WSD to make reference to overseas experience in handling lead in drinking water.

Action

Conducting water sampling tests for non-governmental organizations ("NGOs") serving small children

38. Mr LEUNG Che-cheung asked whether the Administration would consider arranging water sampling tests for NGOs which provided occasional child care services. DSW responded that water sampling tests would be arranged for private and subvented RCHs for children and welfare units which served children aged below six who had to stay in the units for long hours and consume drinking water in the units. ADSW(Family & Child Welfare) supplemented that water sampling tests would also be arranged for welfare units providing day child care services for children aged below six, such as Mutual Help Child Care Centres and Neighbourhood Support Child Care Project. In response to Mr LEUNG Che-cheung's enquiry about the definition of "staying in the units for long hours", ADSW(Family & Child Welfare) said that the Administration would see whether the children would consume drinking water in the units where they used the service frequently.

Providing water filters for welfare units

39. Mr POON Siu-ping enquired about the reasons for providing water filters for the welfare units the water samples of which did not exceed the WHO Guidelines. DSW responded that to ease the worries of the parties concerned, water filters were provided for these welfare units as an emergency arrangement before water sampling tests were conducted.

40. Mr LEUNG Che-cheung said that to protect the health of small children, the Administration should provide water filters for all welfare units serving small children, regardless of whether lead was found in drinking water in these units. DSW responded that the Administration also shared the concern towards young children, and all welfare units (including day care centres) serving children aged below six had already been assisted in the purchase of water filters and included in the water sampling tests.

41. Dr Fernando CHEUNG said that welfare units with complicated hot water supply system might require special water filters which could be very expensive. As welfare units were not provided with extra subsidies for purchasing water filters, not all welfare units would install water filters in the premises. Besides, some welfare units had reflected that it would cost more and take longer time to purchase water filters through GLD. The Administration should look into the situation of individual welfare units instead of merely providing them with advice and information. He called on

Action

the Administration to provide and install water filters free of charge for RCHEs, RCHDs and welfare units serving elderly persons and persons with disabilities who had to consume drinking water in the units. The Administration should also bear the costs for replacing filter cartridges for these welfare units.

42. DSW responded that subvented RCHEs and RCHDs could make use of the Lump Sum Grant ("LSG") subvention or the grant under the Lotteries Fund ("LF") to purchase water filters. Visiting medical officer/practitioner services were provided for residents of RCHEs and RCHDs and frail elderly persons and persons with disabilities were encouraged to seek doctors' advice when they had health concerns.

43. Expressing concern about the health effects of lead on elderly persons, the chronically ill and children, Mr Albert HO called on the Administration to conduct water sampling tests periodically for welfare units serving these groups of people. Given that the sources of lead in drinking water had yet to be ascertained, he wondered whether water filters could solve the problems. He suggested that welfare units the level of lead in drinking water of which had exceeded the WHO Guidelines should stop using wall-mounted kettles until the problems had been resolved.

44. DSW responded that the Administration had been paying close attention to the findings of the investigations into the incidents in respect of the sources of lead in drinking water. Regarding the suggestion of ceasing to use wall-mounted kettles in some welfare units, DSW said that there were different ways in handling different types of wall-mounted kettles. WSD's guidelines and suggestions on the installation and use of wall-mounted kettles connected with inside service were uploaded on SWD's website. The Administration would keep in view the situation and welfare units were welcomed to call SWD's enquiry hotline to seek advice. The Administration would provide support for welfare units if necessary.

45. The Chairman said that some welfare units might not have sufficient LSG subvention left for purchasing water filters or replacing wall-mounted kettles after meeting manpower and recurrent expenses. He hoped that the Administration would allow welfare units to purchase water filters and wall-mounted kettles using LF if these apparatuses were not on the furniture and equipment list of LF ("F&E List"). DSW responded that wall-mounted kettle was on the F&E List. The Chairman said that to his understanding, some wall-mounted kettles were quite expensive and welfare units could not use LF to purchase wall-mounted kettles the prices of which had exceeded the approved amount. He was of the view that the prices of some items on the F&E List were outdated and should be reviewed.

VI. Pilot Scheme on Peer Supporters for Ex-mentally Ill Patients
[LC Paper No. CB(2)181/15-16(07)]

46. At the invitation of the Chairman, Permanent Secretary for Labour and Welfare ("PS(LW)") briefed members on the Administration's proposal of the two-year Pilot Scheme on Peer Supporters for Ex-mentally Ill Patients ("Pilot Scheme").

Support for and career development of peer supporters

47. Mr POON Siu-ping and Mr LEUNG Che-cheung enquired about the basis of setting the salary level for peer supporters. Mr POON sought information on whether minimum level and maximum level would be set for the salary of peer supporters, the basis to evaluate the effectiveness of the Pilot Scheme and the resources required to implement the Pilot Scheme on a regular basis in future.

48. PS(LW) responded that as peer supporters would become employees of the NGOs participating in the operation of the Pilot Scheme, the NGOs must ensure that the employment conditions were in compliance with the Employment Ordinance. Salary levels of programme workers in the welfare sector and peer supporters of similar projects would be used as a reference for NGOs to consider the salary for peer supporters. NGOs might offer higher salary to peer supporters but should ensure the sustainability of the funding for meeting the salary expenses throughout the employment period. As the pilot period was two years, NGOs were reminded that it would be more desirable to offer employment contracts of not longer than two years to peer supporters. They could consider offering shorter than two years employment contracts to peer supporters according to individual circumstances. They were also encouraged to provide flexibility in respect of early termination of contracts, e.g. waiving the payment in lieu of notice, if peer supporters wished to take up employment in the open market before the expiry of contracts.

49. Dr Fernando CHEUNG said that four welfare organizations had been operating schemes on peer supporters for ex-mentally ill patients since 2012. According to the findings of the surveys conducted by the University of Hong Kong and the Chinese University of Hong Kong, these schemes were effective. The Administration should draw up a plan for regularizing the Pilot Scheme. Given the short pilot period of the Pilot Scheme and the salary level of peer supporters, NGOs might have difficulties in retaining peer supporters. He called on the Administration to put in place a mechanism to centrally coordinate training, salary structure, promotion,

Action

evaluation, etc. for peer supporters. To this end, he urged the Administration to consider increasing its financial commitment to the Pilot Scheme.

50. PS(LW) responded that the 11 subvented NGOs to be invited to join the Pilot Scheme did not need to undergo competitive bidding. They were required to submit proposals to the Administration on the Pilot Scheme which should include information on salary and criteria for staff evaluation. NGOs could decide the salary level and evaluation criteria for their peer supporters or agreed among themselves to adopt the same salary level and evaluation criteria. They also had the flexibility in deciding the model to be adopted for the Pilot Scheme. The Administration would evaluate the effectiveness of the Pilot Scheme during the pilot period to consider whether to regularize the Pilot Scheme in future and the model to be adopted in the regularization. She further said that the Administration had exchanged views with the 11 subvented NGOs and the Hong Kong Council of Social Service ("HKCSS") regarding training, promotion and support for peer supporters. HKCSS would assist in coordinating the support for peer supporters.

51. In response to Mr TANG Ka-piu's enquiry about the employment support for peer supporters, PS(LW) said that training on job-seeking would be provided for peer supporters who had no working experience. For peer supporters who had special skills, assistance would be provided to facilitate them to rejoin the open market and, or even better, to return to their previous professions. NGOs might consider continuing the employment with peer supporters if the Pilot Scheme was regularized or offering them other positions in their organizations irrespective of whether the Pilot Scheme was regularised or not.

52. The Chairman said that some NGOs might only pay peer supporters at the statutory minimum wage rate if they were not required to return the unused funding to the Administration. The Administration should provide guidelines for the NGOs on setting the salary for peer supporters so as to protect their interest. PS(LW) responded that the funding for the Pilot Scheme would not be provided in the form of LSG subventions and the unused portion should be returned to the Administration. As such, there was no incentive for NGOs to underpay peer supporters and peer supporters' interest would be fully protected.

53. Noting that only \$100,000 was allocated to training under the Pilot Scheme, Mr LEUNG Kwok-hung wondered whether proper training would be provided for peer supporters. The Chairman said that given the small

Action

amount of training expenses, NGOs would not be able to provide training for peer supporters on their own. PS(LW) responded that the 11 subvented NGOs were considering consolidating their funding for the provision of training for peer supporters. The Administration would assist them in soliciting assistance from training institutes, e.g. the Employees Retraining Board, the Vocational Training Council, if necessary.

Coverage and scale of the Pilot Scheme

54. In response to the enquiries of Mr POON Siu-ping and Mr LEUNG Che-cheung about the districts to be covered by the Pilot Scheme, PS(LW) said that the 11 subvented NGOs to be invited to participate in the operation of the Pilot Scheme were operating the 24 Integrated Community Centres for Mental Wellness ("ICCMWs") which were set up by SWD across the territory. If all these NGOs accepted the Administration's invitation, the Pilot Scheme would cover the 18 districts in the territory. The Administration had received positive feedback from these NGOs towards the Pilot Scheme and anticipated that the Pilot Scheme would cover all 18 districts. The Administration would consider the need to engage more NGOs to participate in the scheme if and when it was regularized having regard to the development of the Pilot Scheme.

55. Mr TANG Ka-piu suggested that young drug abusers who were suffering from mental health diseases should also be covered by the Pilot Scheme and Counselling Centres for Psychotropic Substance Abusers should be invited to participate in the operation of the Pilot Scheme. PS(LW) said that the Administration was open minded towards expanding the scale of the Pilot Scheme and inviting more NGOs to join the scheme if the Pilot Scheme was regularized.

56. In response to Dr Fernando CHEUNG's suggestion of including half-way houses in the Pilot Scheme, PS(LW) said that NGOs might deploy peer supporters to half-way houses or other psychiatric service units provided that peer supporters were under the guidance of professional staff of the NGOs concerned in carrying out their duties.

57. Having regard to the large number of mentally-ill patients, Mr Albert HO was of the view that more resources should be allocated to providing support for mentally-ill patients. The Administration should expand the scale of the Pilot Scheme and speed up the implementation and regularization of the Pilot Scheme. Mr LEUNG Kwok-hung said that given that the 24 ICCMW had been in operation since 2012, the Administration should expand the support services for ex-mentally ill patients rather than launching the scheme on a pilot basis.

Action

58. Mr TANG Ka-piu said that as some NGOs were operating several ICCMWs, he was concerned about whether there would be peer supporters for every ICCMW. In this connection, he sought information on the total number of full-time peer supporters to be employed by NGOs and the mode of engaging peer supporters, i.e. whether peer supporters would be employed on a short-term basis, whether a full-time position would be filled up by several part-time peer supporters, etc.

59. PS(LW) responded that the key features of the Pilot Scheme were drawn up taking into account the mode of operation and effectiveness of the programmes on peer supporters for ex-mentally patients run by the four welfare organizations and the views of the 11 subvented NGOs. The four welfare organizations had engaged a total of 22 peer supporters. Having regard to the experience of these welfare organizations, the NGOs' capacity to train peer supporters and the scale of the ICCMWs they were operating, the Administration considered that the proposed number of peer supporter positions (i.e. two to six full time positions for each NGO) appropriate. There would be altogether 32 full-time equivalent peer supporter positions under the Pilot Scheme and NGOs could engage peer supporters on part-time or full-time basis not exceeding the equivalent number of full-time position allocated. The number of peer supporters to be employed by an NGO would depend on the service scale of the ICCMWs concerned. NGOs would be reminded to take account of the service needs in the deployment and redeployment of peer supporters to ICCMWs. The Administration would review the number of peer supporter positions in conducting the evaluation of the Pilot Scheme.

Professional qualifications for peer supporters

60. Mr LEUNG Che-cheung said that as more and more teenagers had mental health problems because of drug abuse, support for mentally ill persons should be strengthened. He expressed concern about the difficulties in selecting peer supporters and sought information on the selection criteria of peer supporters.

61. PS(LW) responded that as the Administration wished to allow NGO more flexibility in recruitment, it would not impose too many restrictions on selection of peer supporters. However, NGOs would be reminded to select suitable candidates for the job. NGOs should ensure that peer supporters would receive suitable training and were under guidance of professional staff in carrying out their duties.

Action

62. Mr Albert HO said that the Administration should consider establishing professional qualifications under the Qualifications Framework ("QF") to enable the professionalization of peer supporters and facilitate career development of peer supporters. The Chairman said that upon regularization of the Pilot Scheme, the Administration should establish qualification requirements of peer supporters for NGOs.

63. PS(LW) responded that for the Pilot Scheme there would be no specific qualification requirement for peer supporters in order to give existing peer supporters an opportunity to gain experience through the Pilot Scheme. NGOs were welcomed to provide professional training for peer supporters to facilitate them to acquire qualifications under QF. That said, the Administration would not rule out exploring the formulation of professional qualifications of peer supporters under QF in the longer term, and would keep in view the training provided for peer supporters by NGOs during the pilot period. The Administration would also consider establishing qualification benchmarks if peer support services for ex-mentally ill patients were professionalized in future.

Objectives of the Pilot Scheme

64. Mr LEUNG Kwok-hung was of the view that the Pilot Scheme had conflicting objectives as it sought to train peer supporters to provide support for ex-mentally ill patients on the one hand and assist them in pursuing open employment on the other. He opined that too much flexibility was given to NGOs under the Pilot Scheme. Sharing a similar view, Dr Fernando CHEUNG said that the Pilot Scheme lacked a clear direction. The Pilot Scheme should direct towards developing peer supporters to become professionals and providing them with career prospect. This would help minimize the stigmatization of ex-mentally ill patients and meet the great demand for support services by ex-mentally ill patients. The Administration should formulate a plan for the deployment and co-ordination of resources in respect of training, remuneration and career development for peer supporters to attract them to remain in the profession.

65. PS(LW) responded that if the Pilot Scheme was regularized, the post of peer supporter would be included in the permanent establishment of the NGOs concerned. The NGOs concerned would have the flexibility to retain existing peer supporters or train up new staff to fill the vacancies left by peer supporters who succeeded to seek employment in the open market.

Action

VII. Any other business

66. There being no other business, the meeting ended at 12:52 pm.

Council Business Division 2
Legislative Council Secretariat
20 January 2016