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政府帳目委員會  
審議審計署署長第六十九號報告書第一章  
社會福利署對整筆撥款的管理

— 多謝你 2018 年 1 月 16 日致社會福利署（社署）署長的來信。就信中提出有關上述事宜的問題，本人現獲授權回覆。  
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**財務監察**

- (a) 社署在 GEN3 第 10(d) 項所提供機構 11 的整體儲備數字是根據機構 11 提交的 2016-17 年度經審計的財務報表內顯示的機構整體儲備金額。該整體儲備金額包括機構 11 的整筆撥款儲備、公積金儲備和從其他服務及營運獲得的儲備。

根據機構 11 提交的 2016-17 年度財務報表附註，機構的主要活動包括家庭、青少年及兒童服務、學校社會工作、青少年外展社會工作、長者服務、復康服務、社區發展服務、教育服務、賓館及營地服務，以及與宗教相關事工等。



機構 11 表示其累積儲備主要來自其自負盈虧的賓館及私人教育服務等。

- (b) 行政署於 2017 年 7 月通知社署，將會向所有相關決策局發出問卷，以了解各局在其政策範疇內執行行政署《通函》有關控制和監察受資助機構高層管理人員薪酬事宜指引的現況，並收集它們對指引的意見，以考慮是否需要和如何更新指引及／或澄清部分執行上的細節。

行政署 2017 年 10 月初向各相關決策局發出上述問卷，並於同年年底收回各局的回覆，現正就搜集到的資料進行整理和分析，以及按需要向個別決策局索取進一步資料。行政署表示會盡快完成資料分析的工作，並與財經事務及庫務局及相關決策局和部門討論是否需要和如何更新指引及／或澄清部分執行上的細節。

在社署方面，待行政署決定會否就其《通函》有關指引作出更新、修訂或澄清後，社署會隨即與受資助機構商討修訂《整筆撥款手冊》（《手冊》）有關監察受資助機構高級行政人員的薪酬的規則和指引，以及執行新指引或安排的細節。

- (c) 「受資助非政府機構最高三層人員薪酬條件檢討報告」（檢討報告）的表格載於附件一。
- (d) 除了因應行政署《通函》有關指引要求受資助機構提交檢討報告的機制外，所有受社署資助的機構每年均須向社署提交「受資助非政府機構最高級三層人員薪酬條件自我評估報告」。此外，接受整筆撥款資助的機構亦須每年向社署呈交周年財務報告，並在報告內呈報由整筆撥款支付的個人全年薪酬超過 70 萬元的職位數目及開支資料。（周年財務報告範本見附件二）

根據《手冊》第 4.14 至 4.19 段，社署要求受資助機構設有公眾問責架構，以及披露向社署呈交的周年財務報告及檢討報告（如適用），就公帑的運用向公眾負

**\* 委員會秘書附註：有關附件一及附件二，請分別參閱此報告書的附錄 9 及附錄 10。**



責。機構除了在公眾提出要求時須提供有關報告外，亦須透過以下一個或以上的途徑披露有關資料：

- 在中央行政單位／總辦事處告示板的當眼處張貼有關資料；
- 把有關資料上載到機構的網站；
- 在機構的年報匯報有關資料<sup>1</sup>；或
- 透過特別通告、通訊或其他方式發布有關資料。

此外，社署已由 2017 年 6 月起在社署網頁建立與相關受資助機構周年財務報告網頁的連結或上載其有關報告，以方便公眾查閱報告及加強機構的透明度和公眾問責。有關網址如下：

[https://www.swd.gov.hk/tc/index/site\\_ngo/page\\_AFRandRR/](https://www.swd.gov.hk/tc/index/site_ngo/page_AFRandRR/)

(e) (i)(ii)(iii)

就《津貼及服務協議》（《協議》）與非《協議》活動須作成本分攤的要求，有關規定和指引如下：

- 根據政府《財務通告第 9/2004 號》有關管理及控制政府給予資助機構撥款的指引，受資助機構（例如非政府機構）必須為自資舉辦的活動開立獨立帳目，並確保受資助計劃沒有在金錢上或實物方面為自資活動提供補貼；及
- 為實施上述政府的財務通告，《手冊》第 2.37 段規定整筆撥款是用以支付《協議》所定服務或相關活動的營運開支。《手冊》第 3.3 段亦訂明，機構必須確保所有交易事項均須記錄在適當的帳簿及其他會計記錄內，並把《協議》規定服務和有關支援服務，以及非《協議》規定服務分別記帳。

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<sup>1</sup> 如機構發放年報，其周年財務報告必須構成機構年報的一部分。任何機構如選擇不在年報中提供周年財務報告，則必須把整份最新的周年財務報告上載至機構網站，並在年報中標明連結至周年財務報告的網址。



社署理解非政府機構對《協議》與非《協議》活動須作成本分攤的關注。社署一直透過津貼科指定機構聯絡主任，以及財務科指定聯絡人和支援熱線，為非政府機構就分別記帳及成本分攤事宜解答問題、提供意見和支援。社署會就每個查詢機構的個別情況，與機構一同釐清成本分攤的原則和討論合適的分攤方案。社署亦曾於 2016 年 6 月至 10 月期間，分批與全部受資助非政府機構的最高管理層會面，並商討包括處理成本分攤的安排等事宜。

政府已於 2017 年 11 月開展優化整筆撥款津助制度的檢討工作，其中一項檢討範疇包括審視與《協議》相關活動的評估準則，以及闡明《協議》／與《協議》相關服務和其他非《協議》服務的成本分攤原則，供非政府機構參考。

(iv)

社署已聯絡兩宗個案的有關非政府機構，商討所涉及的《協議》服務與非《協議》服務分攤成本的基準和比例。

就個案一，機構同意修訂有關中央廚房服務開支分攤予《協議》及非《協議》服務的比例，並會在即將召開的機構管理委員會會議上商討。

就個案二，機構表示有既定分攤開支機制。如該非《協議》服務單位的開支項目可清楚辨識（如個案中的租金、差餉及電費開支），有關開支將由非《協議》服務單位負責。但對於未能清晰分辨的開支項目（如個案中的水費、技工薪金及行政總裁薪酬），機構會以非《協議》服務單位向總辦事處支付行政服務費用的方式分攤開支，有關行政服務費用會存入整筆撥款帳戶列作收入。

社署會與有關機構繼續商討分攤開支的安排，確保受資助的服務不會為非資助服務提供任何形式的補貼。

(v)

社署一向關注小型機構在財務管理方面所需的支援，相關支援重點列舉如下：



- 在 2009 年 10 月至 2012 年 3 月期間舉辦多次小型非政府機構的分享會，內容包括財務管理、資助審查、人力資源管理及機構管治等，以協助機構提升管理及財務管理的能力；
- 在 2015 年 9 月至 2016 年 2 月期間為所有受資助機構董事局成員及管理人員舉辦「最佳執行指引遠見卓識計劃」，內容亦涵蓋財務管理；
- 在 2016 年初經獎券基金撥款超過 970 萬元予香港社會服務聯會推行為期四年的「非政府機構董事會網絡」計劃，與包括香港會計師公會在內的不同專業界別協作，為非政府機構董事會提供更多培訓機會，同時建立更強網絡聯繫以及資料庫，並進行研究，加強機構間的經驗分享，創造及傳承專業管理的知識，讓非政府機構的整體管治能力得以進一步提升；
- 社署於 2016 年 6 月至 10 月期間與全部受資助非政府機構的最高管理層分批會面時曾商討包括財務管理等事宜；以及
- 當小型機構在分攤中央行政開支方面遇到困難時，社署會透過津貼科指定機構聯絡主任制度，以及財務科指定聯絡人和支援熱線，為機構提供適切的支援。

### 非政府機構服務質素的自我評估

- (f) 社署透過「服務表現監察制度」（監察制度）監管非政府機構的受資助服務。在監察制度下，社署與機構為受資助服務共同制訂《協議》，以釐定服務標準及評估服務表現。機構須妥善管理其轄下的單位，使其符合《協議》的要求，包括基本服務規定、服務量／服務成效標準及服務質素標準。

社署每年會向所有受資助機構發信，要求機構按監察制度的規定，就轄下各服務單位能否符合個別《協議》的基本服務規定、服務量／服務成效標準及服務質素標準進行自我評估，並提交自我評估報告。若有不符



合規定的地方，機構須同時提交改善計劃，並落實有關措施。自我評估報告亦須按社署指定的格式填寫。自我評估報告的相關表格會連同致機構的信件一同發出，並上載於社署網頁。請參考附件三及附件四的例子。

除了要求機構提交自我評估報告外，社署亦會在每個監察週期內（每三年為一週期）探訪所有受資助機構，到其獲抽選的受資助服務單位進行評估探訪或突擊探訪，以評估及監察其服務表現，包括檢視其所屬《協議》的基本服務規定、服務量／服務成效標準及服務質素標準的執行記錄及相關數據。

若在探訪或機構提交的報告中發現有不合規定的地方，社署會採取下列措施：

- 若發現就服務量／服務成效標準的自我評估有不準確的地方，社署會澄清對個別服務量／服務成效標準的理解和定義，以及量度有關標準的準則，並在有需要時製備相關說明及／或指引以釐清有關評估方法；
- 社署會致函有關機構要求機構作出修正，並須同時檢視其審查機制，以確保服務單位製備和向社署提交的統計資料和報告準確無誤；
- 就有不符合規定的地方，包括基本服務規定、服務量／服務成效標準及服務質素標準，社署會要求機構提交改善計劃；及
- 監察其落實改善措施的情況。

(g) 機構 B 的個案

就審計報告內表十六有關機構 B 的個案，機構 B 解釋數據出錯純屬人為錯誤，並不是機構對服務量標準存有不正確的理解。事件後機構 B 已加強內部覆核機制，由現時只由負責治療師覆核數據外，亦會由中心副主管作全面覆檢，最後再由中心主管作隨機抽檢，以確保數據的準繩度。



機構 B 所滙報的服務量與服務標準差距甚大，原因如下：

- 社署 2014 年 3 月開展的「嚴重殘疾人士家居照顧服務」是以到戶形式服務居於社區的嚴重殘疾人士，服務對象並非由中央輪候冊轉介，營辦機構在服務開展初期需投放不少時間及人力資源與醫院、診所、輔助及專職醫療專業、其他康復服務及家居照顧服務單位、病人自助組織等建立聯繫及轉介網絡，因此需時累積個案數目及服務量；
- 營辦機構的服務團隊之主要員工涉及多個專業範疇（包括物理治療師／職業治療師、護士及社工）及個人照顧工作人員等，機構在招聘員工方面面對不少困難和挑戰；及
- 服務開展至今仍處於發展階段，社署一直與各營辦機構檢視及討論優化服務的方案，分析服務提供的各項元素及流程。雙方確認於規劃階段釐訂的服務量定義及計算方法未能涵蓋若干直接服務（如離院前及到戶專業評估、家居改裝等）及間接服務（如多專業個案會議以制定及協調治療計劃、訓練個人照顧工作人員及治療助理以提供個人化的照顧、為個案安排合適的治療儀器等）的時數，以致出現數據未能全面反映各機構的實際服務量的情況。社署會逐一跟進及調整個別項目的服務量計算。

鑑於家居照顧服務的使用率較預期為低，社署已聯同提供服務的非政府機構檢討了該服務的津助安排及修訂了有關《協議》，經修訂的《協議》已由 2015 年 4 月起生效。根據修訂安排，機構所獲得的全年資助（按月發放）是與所服務的個案量掛鉤，以善用公帑。

#### 機構 F 的個案

就審計報告內表十六有關機構 F（單位 J）的個案，社署已聯絡該機構。單位 J 為一所兒童及青年中心。據了解，單位 J 於 2014-15 至 2016-17 年度曾分別為六歲以下的幼兒及退休男士提供活動。兒童及青年中心的服務對象為 6 至 24 歲的兒童及青少年。為不屬該年齡組別的參加者所提供的活動，一般不視作《協議》所規定的服務。由於機構 F 將上述活動的節數及出席人數計算在



中心的《協議》總服務量內，加上人為的計算錯誤，故導致多報服務量的情況。

社署會繼續作出跟進，向機構重申應確保以整筆撥款提供《協議》內的相關活動及準確匯報服務量／服務成效，並會要求機構 F 修訂相關年度統計報表，呈交社署再作檢視。

- (h) 鑑於家居照顧服務的使用率較預期為低，為求善用公帑，社署聯同提供服務的非政府機構檢討了該服務的津助安排及修訂了有關《協議》，經修訂的《協議》已由 2015 年 4 月起生效。根據修訂安排，機構所獲得的全年資助（按月發放）與所服務的個案量掛鈎，情況如下：

- 單位在年內如未達個案量 50%，則獲資助的 50%；
- 單位在年內如達到議定個案量 50%或以上至 75%以下，會獲資助的 75%；及
- 單位在年內如達到議定個案量 75% 或以上，會獲資助的 100%。

個案量的定義是「曾向服務使用者及其家人／照顧者提供包括輔導和支援服務等社會工作介入措施的個案的數目」。

- (i) 非政府機構的所有受資助服務單位須遵守一套共 16 項的服務質素標準，有關標準訂明了服務單位在管理及提供服務方面應具備的質素水平。

社署已為每項標準訂立了一套「準則」及「評估指標」說明，有關詳情已載於《評估模式參考指引》及《執行手冊》，並已上載於社署網頁。

機構須根據每項標準的「準則」及「評估指標」，按各自的情況，為轄下各服務單位制訂相關的政策及程序，以及各項標準的執行細節。





社署亦會在進行服務表現探訪期間檢視有關服務質素標準的政策及程序文件，以及相關的執行記錄，以確保單位符合有關規定。

有關服務質素標準 11 的「準則」及「評估指標」說明等，可參考以下網頁：

《評估模式參考指引》

[https://www.swd.gov.hk/tc/index/site\\_ngo/page\\_service\\_per/sub\\_serviceper/id\\_matrixtemplate/](https://www.swd.gov.hk/tc/index/site_ngo/page_service_per/sub_serviceper/id_matrixtemplate/)

《執行手冊》

[https://www.swd.gov.hk/tc/index/site\\_ngo/page\\_service\\_per/sub\\_serviceper/id\\_sqshandbook/](https://www.swd.gov.hk/tc/index/site_ngo/page_service_per/sub_serviceper/id_sqshandbook/)

- (j) 社署與機構 C 在 2017 年 3 月訂定 2017 年 3 月 1 日至 2020 年 2 月 29 日期間的新《協議》時，雙方協議修訂相關服務成效標準的定義（包括巴氏量表及羅頓量表評分有所增加的服務使用者比率）以更能顯示機構的服務表現。由於新《協議》於 2017 年 3 月才生效，該機構於同月獲社署通知，應採用服務成效標準的舊定義來擬備 2016-17 年度（即 2016 年 4 月至 2017 年 3 月）的全年統計數字，或在擬備全年統計數字時扣除 2016-17 年度最後季度（即 2017 年 1 月至 3 月）的統計數字。可是，機構 C 匯報 2016-17 年度的全年統計數字時，誤用了服務成效標準的新定義，以致在匯報相關服務成效標準達標水平時出錯。問題是出於人為錯誤。

社署已就個案 C 與各日間社區康復中心營辦機構舉行會議，就類似情況與各機構探討錯誤原因，並會制定指引供各營辦機構的員工參閱及遵守。此外，社署已要求各單位主管檢視其工作流程，加強監管措施以防範同類錯誤再次出現。

- (k) 正如在第 (f) 項所述，社署每年會向所有受資助機構發信，要求機構按監察制度的規定，就轄下各服務單位能否符合個別《協議》的基本服務規定、服務量／服



務成效標準及服務質素標準進行自我評估，並提交自我評估報告。若有不符合規定的地方，機構須同時提交改善計劃，並落實有關措施。自我評估報告亦須按社署指定的格式填寫。自我評估報告的相關表格會連同致機構的信件一同發出，並上載於社署網頁。

社署審閱機構提交的自我評估報後會發信通知機構是否接納其改善計劃。實際例子請參考附件三及附件四。

- (l) 社署已根據審計署提供的資料向表十七的六間機構了解，並知悉全部六間機構已就未達標準的情況作適當跟進，當中有一宗機構仍需時處理，另有一宗機構就審計署的評估持不同意見。詳情見附件五。


社署亦已提醒機構加強員工培訓，以確保其服務單位提供安全的環境予職員和服務使用者。

- (m) 在審計署進行檢視前，社署對機構 D 就服務使用者完成預定訓練節數 10%或以上便視作完成訓練的做法並不知悉。社署已與各日間社區康復中心營辦機構開會跟進審計報告，確定除機構 D 外，其餘的營辦機構均沒有機構 D 對完成個人訓練計劃的理解。與會的治療師均認為「已完成」的個人訓練及支援計劃在其專業都會被理解為已完成整個訓練及支援計劃而不是指完成部分的計劃。據悉機構 D 一般都會為服務使用者設計由三個月至一年不等的訓練及支援計劃，由於治療時間較長，有部分服務使用者在症狀有改善後便不大願意出席中心的跟進治療及評估，因此機構 D 在有部分服務使用者在完成計劃 10%的情況下便被當作「已完成」個人訓練及支援計劃計算。機構 D 已承諾改善，考慮根據不同的病徵設計適切的個人訓練及支援計劃，並會遵行社署對服務量／服務成效標準達標水平的要求。雖然眾營辦機構除機構 D 外均符合社署在這方面的要求，為求清晰詮釋社署在服務量／服務成效標準達標水平的要求，社署會聯同各營辦機構制定指引，以確保對《協議》的內容及定義有統一的理解。

如有任何查詢，歡迎致電與本人聯絡。



社會福利署署長

(郭志良  代行)

副本送：

勞工及福利局局長

(經辦人：鄭健先生)

財經事務及庫務局局長

(經辦人：黃潔怡女士)

行政署署長

(經辦人：周舜宜女士)

審計署署長

(經辦人：張濟中先生)

二零一八年二月八日



Our Ref.:  
Tel. No. :  
Fax No. :

20 March 2017

Chief Executive Officers/Directors of  
Subvented Non-governmental Organisations (NGOs)

Dear Sir/Madam,

**Service Performance Monitoring System (SPMS)**

**Self-assessment on  
Service Quality Standards (SQSs), Essential Service Requirements (ESRs)  
& Output/Outcome Standards (OS/OCs) and  
Action Plans on Unmet Areas in 2016-17**

Under the SPMS, service operators are required to submit the annual agency-based Self-assessment Report (SAR) to the Department in April each year. The SAR should include the self-assessment results of all subvented service units with Funding and Service Agreements (FSAs) under your management. Your self-assessment should cover the following:

- (a) individual service unit's compliance with 16 SQSs and ESRs;  
and
- (b) individual service unit's OS/OCs performance.

While action plan(s) are required to be submitted together with the SAR for service units with non-complied SQS(s)/ESR(s) and under-performed OS/OC(s), you may also report your good practices on SQSs and innovative/value-added services in the SAR. However, the good practices reported may not be counted as track record on performance monitoring of the service operator.

I would like to stress that the self-assessment is a key component of SPMS, which respects and honours the corporate governance of service operators. The manner of conducting the self-assessment forms part of the track record of service operators.

**\* 委員會秘書附註：本文件只備英文本。 \***



To facilitate your self-assessment and preparation of the SAR covering April 2016 to March 2017 (2016-17), the following documents are attached:

- (a) the proforma for 2016-17 SAR (Annex I); and
- (b) service units that can be exempted from 2016-17 SAR (Annex II).

This letter together with the proforma can also be downloaded from SWD Homepage<sup>1</sup>. Grateful if you would submit your 2016-17 SAR by completing the proforma and return to the Subventions Section of the Department on or before 20 April 2017. If you have any enquiries on this subject, please contact \_\_\_\_\_ on \_\_\_\_\_.

Yours sincerely,

for Director of Social Welfare

Encl.

c.c. Chairpersons of all subvented NGOs

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<sup>1</sup> Website: [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_r-info/](http://www.swd.gov.hk/en/index/site_ngo/page_r-info/)

Please forward the completed proforma to Subventions Section, Social Welfare Department at 38/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong (fax: 2575 5632) **on or before 20 April 2017**.

## PROFORMA

### Service Performance Monitoring System (SPMS) Self-assessment on Compliance with SQSs, ESRs and OS/OCs in 2016-17

Name of Service Operator : \_\_\_\_\_

#### I. Result of Self-assessment on 16 SQSs and ESRs

This NGO has conducted a self-assessment on 16 SQSs and ESRs based on the tools and suggested process<sup>Note 1</sup> including the examination of all documents and their implementation as well as the formulation of action plans for non-compliant areas by:

[Please  as appropriate]

- Service unit manager(s)
- Service coordinator(s)
- Internal audit team
- Others (please specify): \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO having been operated for 12 full months in 2016-17 is/are assessed to have met the requirements of all criteria of 16 SQSs and ESR(s) as stipulated in respective Funding and Service Agreement(s).
- The following service unit(s) of this NGO has/have unmet area of SQS(s) or ESR(s) and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix I*):

<i>Name of Service Unit(s) with Non-compliance</i>	<i>Unmet Area of SQS(s)/ESR(s)</i>

Any other remarks on self-assessment:

[Please  as appropriate, if any, and provide details in separate sheets]

- Good Practice<sup>Note 2</sup>, including SQSs, value-added and innovative service (please specify):
- \_\_\_\_\_

<sup>Note 1</sup> Details about the self-assessment mechanism are laid down in Chapter 4 of the Performance Assessment Manual which can be downloaded from [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_serviceper/sub\\_serpassessment](http://www.swd.gov.hk/en/index/site_ngo/page_serviceper/sub_serpassessment).

<sup>Note 2</sup> The good practices reported may not be counted as track record on performance monitoring of the service operator / service unit(s). For 'Good Practice' on SQSs, we refer to the practice over and above the basic requirement of SQS, not commonly practised and such practices may be considered by other service operators as good example for the reference of their service units.

**II. Result of Self-assessment on OS/OCs Performance**

This NGO has conducted an annual assessment on OS/OC(s) of all subvented service unit(s) by:  
 [Please  as appropriate]

- Service unit manager(s)**
- Service coordinator(s)**
- Internal audit team**
- Others (please specify):** \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO is/are assessed to have met their corresponding OS/OC(s) in 2016-17.
- The following service unit(s) of this NGO has/have under-performance in OS/OC(s) in 2016-17 and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix 2*) except for those on the exemption list at Annex II:

<i>Name of Service Unit(s) with Unmet OS/OC(s)</i>	<i>Unmet OS/OC(s)</i>

Remark: Service operators should ensure that all statistics reported in the SIS forms are accurate. If amendments to the OS/OC statistics of 2016-17 are needed, the amended data, together with full justification, should be attached to this proforma for re-submission.

**Signature :** \_\_\_\_\_

**Name :** \_\_\_\_\_

**Post :** **Chairperson of Board/Management Committee/ NGO Head \***

**Service Operator :** \_\_\_\_\_

**Contact Person :** \_\_\_\_\_ **(Name & Post)**

**Tel No. :** \_\_\_\_\_ **Fax No.:** \_\_\_\_\_

**E-mail Address :** \_\_\_\_\_

**Date :** \_\_\_\_\_

*\*delete as appropriate*

## Action Plan for Unmet Area of SQS/ESR as at April 2017

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all unmet areas in SQSs/ESRs of its concerned service units. *One Action Plan is required for each unmet area.*
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_  
 Name of Service Unit : \_\_\_\_\_  
 Funding and Service Agreement : \_\_\_\_\_

I. Criterion of SQS: No. \_\_\_\_\_ / ESR concerned\*:

II. The area not yet achieved:

III. Reason(s) for not achieving the above area:

IV. Action(s) to be taken for achieving the above area:

V. Planned time frame for completing the action(s):

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese] :	Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date:

\* delete as appropriate



## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. ***One Action Plan is required for each under-performed OS/OC.***
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_

Name of Service Unit : \_\_\_\_\_

Funding and Service Agreement : \_\_\_\_\_

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in <u>2015-16</u> (if yes, please state the actual performance of 2015-16 also)

I. Reason(s) for not achieving the OS/OC :

II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

III. Planned time frame for completion of the action(s) proposed above:

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese]:	Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date:

**Subvented Service Units Exempted from Self-assessment  
for the Period Covering April 2016 – March 2017**

Types of Service Units	Self-assessment on SQSs & ESRs	Self-assessment on OS/OCs Performance
1. Service units operated for less than 12 months during 1 April 2016 – 31 March 2017 which include: <ul style="list-style-type: none"> <li>▪ new service units commenced operation during the period; and</li> <li>▪ service units ceased operation during the period.</li> </ul>	Exempted	Exempted
2. Service units under service re-engineering during 1 April 2016 – 31 March 2017.	Fully/Partially exempted if there are changes in OS/OCs requirements of the FSA concerned	Fully/Partially exempted if there are changes in OS/OCs requirements of the FSA concerned
3. Service units with reporting cycle different from this assessment cycle covering 1 April 2016 – 31 March 2017.	Exempted <sup>1</sup>	Exempted <sup>1</sup>

<sup>1</sup> Service units with different reporting cycle, e.g. the service of Integrated Programme in Kindergarten-cum-Child Care Centre, with reporting cycle changed to September – August w.e.f. September 2009, are required to submit their SAR to the Subventions Section by 20 September 2017.

Please forward the completed proforma to Subventions Section, Social Welfare Department at 38/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong (fax: 2575 5632) **on or before 20 April 2017.**

## PROFORMA

### Service Performance Monitoring System (SPMS) Self-assessment on Compliance with SQSs, ESRs and OS/OCs in 2016-17

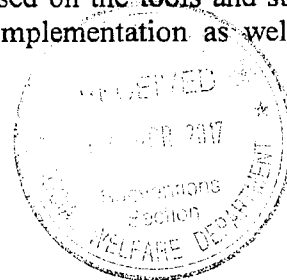
Name of Service Operator: \_\_\_\_\_

#### I. Result of Self-assessment on 16 SQSs and ESRs

This NGO has conducted a self-assessment on 16 SQSs and ESRs based on the tools and suggested process<sup>Note 1</sup> including the examination of all documents and their implementation as well as the formulation of action plans for non-compliant areas by:

[Please  as appropriate]

- Service unit manager(s)
- Service coordinator(s)
- Internal audit team
- Others (please specify): \_\_\_\_\_



Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO having been operated for 12 full months in 2016-17 is/are assessed to have met the requirements of all criteria of 16 SQSs and ESR(s) as stipulated in respective Funding and Service Agreement(s).
- The following service unit(s) of this NGO has/have unmet area of SQS(s) or ESR(s) and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix I*):

<i>Name of Service Unit(s) with Non-compliance</i>	<i>Unmet Area of SQS(s)/ESR(s)</i>

Any other remarks on self-assessment:

[Please  as appropriate, if any, and provide details in separate sheets]

- Good Practice<sup>Note 2</sup>, including SQSs, value-added and innovative service (please specify):

<sup>Note 1</sup> Details about the self-assessment mechanism are laid down in Chapter 4 of the Performance Assessment Manual which can be downloaded from [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_serviceper/sub\\_serassessment](http://www.swd.gov.hk/en/index/site_ngo/page_serviceper/sub_serassessment).

<sup>Note 2</sup> The good practices reported may not be counted as track record on performance monitoring of the service operator / service unit(s). For 'Good Practice' on SQSs, we refer to the practice over and above the basic requirement of SQS, not commonly practised and such practices may be considered by other service operators as good example for the reference of their service units.

**II. Result of Self-assessment on OS/OCs Performance**

This NGO has conducted an annual assessment on OS/OC(s) of all subvented service unit(s) by:  
 [Please  as appropriate]

- Service unit manager(s)**
- Service coordinator(s)**
- Internal audit team**
- Others (please specify):** \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO is/are assessed to have met their corresponding OS/OC(s) in 2016-17.
- The following service unit(s) of this NGO has/have under-performance in OS/OC(s) in 2016-17 and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix 2*) except for those on the exemption list at Annex II:

<i>Name of Service Unit(s) with Unmet OS/OC(s)</i>	<i>Unmet OS/OC(s)</i>
	OS 3c,
	OS 7a, OS 7b

Remark: Service operators should ensure that all statistics reported in the SIS forms are accurate. If amendments to the OS/OC statistics of 2016-17 are needed, the amended data, together with full justification, should be attached to this proforma for re-submission.

**Signature :** \_\_\_\_\_

**Name :** \_\_\_\_\_

**Post :** ~~Chairperson of Board/~~ **Chairperson of Management Committee/ NGO Head\***

**Service Operator :** \_\_\_\_\_

**Contact Person :** \_\_\_\_\_ **(Name & Post)**

**Tel No. :** \_\_\_\_\_ **Fax No.:** \_\_\_\_\_

**E-mail Address :** \_\_\_\_\_

**Date :** \_\_\_\_\_

*\*delete as appropriate*

## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. One Action Plan is required for each under-performed OS/OC.
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_  
 Name of Service Unit : \_\_\_\_\_  
 Funding and Service Agreement : 長者鄰舍中心

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in <u>2015-16</u> (if yes, please state the actual performance of 2015-16 also)
OS 3c	一年內舉辦的小組、活動及計劃的總數：提供護老者支援服務，包括互助支援小組及培訓活動等；	40	30	/

## I. Reason(s) for not achieving the OS/OC :

提供給護老者的支援服務，由於不少護老者的時間未能配合，故某部分的小組或培訓活動因未有足夠人數而取消。

## II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

- (1) 提早宣傳護老者的支援小組或培訓活動，讓護老者能預留時間參與。
- (2) 改變部份中心開放時間，以配合護老者的放假時間進行活動，例如：星期日。
- (3) 安排平行小組或培訓活動，長者及護老者可一同參與，方便護老者的照顧需要。

## III. Planned time frame for completion of the action(s) proposed above:

於2017/18年持續地進行工作計劃，並達到目標。

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese]:	Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date:
			20 Apr 2017

## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. One Action Plan is required for each under-performed OS/OC.
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_  
 Name of Service Unit : \_\_\_\_\_  
 Funding and Service Agreement : 長者鄰舍中心

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in <u>2015-16</u> (If yes, please state the actual performance of 2015-16 also)
OS 7a	為隱蔽或需要照顧的長者提供的服務：每月隱蔽或需要照顧的長者活躍個案的平均數目	35	30.83	8.33

## I. Reason(s) for not achieving the OS/OC :

1. 本中心在2015年12月，才聘請到多一位社工人手處理個案輔導等工作，由於未有足夠人手全面地籌劃隱長個案服務，以致發掘個案的工作遲了起步開展，導致平均個案數目在年內未能達標。
2. 經過同事們在年內的努力，3月份隱長個案服務數字已達到49，唯平均個案仍只能達到30%，雖較議定水平稍低，但比較2015-16年度平均個案數目有增長，情況有改善。

## II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

為確保2017/18年度全年平均個案能達標，本中心會持續地推行以下工作計劃：

1. 人力架構轉變，因應福利工作員離任，轉為聘請一位社工替補處理隱長個案，以及聘請多一位半職社工，集中私樓及鄉郊村落發掘個案的工作。
2. 藉與地區持份者如商舖、互委會、大廈管理處及鄉郊村落各村長建立合作伙伴關係，宣傳中心服務，以及轉介有需要個案給中心社工跟進。
3. 繼續透過定期家訪及電話慰問較少到中心及體弱之會員。
4. 建立長者互助網絡，鼓勵會員通知中心需要幫助的長者。
5. 以外展工作方法在戶外接觸長者，發掘有需要的長者個案。
6. 加強服務宣傳如街站派單張等。

## III. Planned time frame for completion of the action(s) proposed above:

於2017/18年持續地進行工作計劃，並達到目標。

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese]:	Signature:
Post & Rank [English & Chinese]: Centre In-charge			
Contact Phone No.:	Fax No.:	E-mail Address:	Date: 20 Apr 2017

## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. ***One Action Plan is required for each under-performed OS/OC.***
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_  
 Name of Service Unit : \_\_\_\_\_  
 Funding and Service Agreement : 長者鄰舍中心

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in <u>2015-16</u> (if yes, please state the actual performance of 2015-16 also)
OS 7b	為隱蔽或需要照顧的長者提供的服務：一年內處理的隱蔽或需要照顧的長者個案的流轉率	20%	10.91%	11.11%

## I. Reason(s) for not achieving the OS/OC :

由於隱蔽或需要照顧的長者的個案工作遲了起步開展，所以大部份個案仍在跟進中，因此較少結束個案，與2015-16年度個案的流轉率相若，未能達致結束個案流轉率的要求指標。

## II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

督導社工如何清晰個案目標，訂立具體工作計劃及介入時限，以縮短每個個案要處理的時間。

## III. Planned time frame for completion of the action(s) proposed above:

於2017/18年持續地進行工作計劃，並達到目標。

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]: _____		[Chinese]: _____	Signature: _____
Post & Rank [English & Chinese]: _____			Date: _____
Contact Phone No.:	Fax No.:	E-mail Address:	
			20 Apr 2017





社會福利署

Social Welfare Department

Our Ref. :  
Tel No. :  
Fax No. :

7 July 2017

### **Service Performance Monitoring System (SPMS)**

#### **Self-assessment on Service Quality Standards (SQSs), Essential Service Requirements (ESRs) & Output/Outcome Standards (OS/OCs) and Action Plans on Unmet Areas in 2016-17**

I refer to the 2016-17 Self-assessment Report (SAR) submitted by your organisation on 20.4.2017 regarding the captioned subject.

Please be informed that the Action Plans attached to your SAR in respect of the non-compliant areas of the following service units are considered acceptable:

1. (OS3c)
2. (OS7a, OS7b)

As regards the performance assessment against OS/OC(s) as stated in your SAR, we will scrutinise all relevant information relating to your self-assessment and notify you of the details if there is any under-reporting of under-achieved OS/OC(s) in your SAR.

Taking this opportunity, you are advised to remind your staff of the spirit under SPMS which is to ensure the accountability for public funds and the provision of quality social welfare services to service users. For details of the monitoring mechanism, you may refer to the SPMS Performance Assessment Manual and the respective Funding and Service Agreements applicable to your service units.

If you have any enquiries, please contact me on



Yours sincerely,

( )  
for Director of Social Welfare

Our Ref.:  
Tel. No. :  
Fax No. :

20 March 2017

Chief Executive Officers/Directors of  
Subvented Non-governmental Organisations (NGOs)

Dear Sir/Madam,

**Service Performance Monitoring System (SPMS)**

**Self-assessment on  
Service Quality Standards (SQSs), Essential Service Requirements (ESRs)  
& Output/Outcome Standards (OS/OCs) and  
Action Plans on Unmet Areas in 2016-17**

Under the SPMS, service operators are required to submit the annual agency-based Self-assessment Report (SAR) to the Department in April each year. The SAR should include the self-assessment results of all subvented service units with Funding and Service Agreements (FSAs) under your management. Your self-assessment should cover the following:

- (a) individual service unit's compliance with 16 SQSs and ESRs;  
and
- (b) individual service unit's OS/OCs performance.

While action plan(s) are required to be submitted together with the SAR for service units with non-complied SQS(s)/ESR(s) and under-performed OS/OC(s), you may also report your good practices on SQSs and innovative/value-added services in the SAR. However, the good practices reported may not be counted as track record on performance monitoring of the service operator.

I would like to stress that the self-assessment is a key component of SPMS, which respects and honours the corporate governance of service operators. The manner of conducting the self-assessment forms part of the track record of service operators.

**\* 委員會秘書附註：本文件只備英文本。**

香港灣仔皇后大道東 248 號陽光中心 38 樓 社會福利署 津貼組  
Subventions Section, Social Welfare Department, 38/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong



To facilitate your self-assessment and preparation of the SAR covering April 2016 to March 2017 (2016-17), the following documents are attached:

- (a) the proforma for 2016-17 SAR (**Annex I**); and
- (b) service units that can be exempted from 2016-17 SAR (**Annex II**).

This letter together with the proforma can also be downloaded from SWD Homepage<sup>1</sup>. Grateful if you would submit your 2016-17 SAR by completing the proforma and return to the Subventions Section of the Department on or before **20 April 2017**. If you have any enquiries on this subject, please contact \_\_\_\_\_ or \_\_\_\_\_.

Yours sincerely,

for Director of Social Welfare

Encl.

c.c. Chairpersons of all subvented NGOs

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<sup>1</sup> Website: [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_r-info/](http://www.swd.gov.hk/en/index/site_ngo/page_r-info/)

Please forward the completed proforma to Subventions Section, Social Welfare Department at 38/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong (fax: 2575 5632) **on or before 20 April 2017.**

## PROFORMA

### **Service Performance Monitoring System (SPMS) Self-assessment on Compliance with SQSs, ESRs and OS/OCs in 2016-17**

**Name of Service Operator** : \_\_\_\_\_

#### **I. Result of Self-assessment on 16 SQSs and ESRs**

This NGO has conducted a self-assessment on 16 SQSs and ESRs based on the tools and suggested process<sup>Note 1</sup> including the examination of all documents and their implementation as well as the formulation of action plans for non-compliant areas by:

[Please  as appropriate]

- Service unit manager(s)**
- Service coordinator(s)**
- Internal audit team**
- Others (please specify):** \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO having been operated for 12 full months in 2016-17 is/are assessed to have met the requirements of all criteria of 16 SQSs and ESR(s) as stipulated in respective Funding and Service Agreement(s).
- The following service unit(s) of this NGO has/have unmet area of SQS(s) or ESR(s) and the corresponding Action Plan(s) is/are attached (please use the form at **Appendix I**):

<i>Name of Service Unit(s) with Non-compliance</i>	<i>Unmet Area of SQS(s)/ESR(s)</i>

Any other remarks on self-assessment:

[Please  as appropriate, if any, and provide details in separate sheets]

- Good Practice<sup>Note 2</sup>, including SQSs, value-added and innovative service (please specify):
- \_\_\_\_\_

<sup>Note 1</sup> Details about the self-assessment mechanism are laid down in Chapter 4 of the Performance Assessment Manual which can be downloaded from [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_serviceper/sub\\_serpassessment](http://www.swd.gov.hk/en/index/site_ngo/page_serviceper/sub_serpassessment).

<sup>Note 2</sup> The good practices reported may not be counted as track record on performance monitoring of the service operator / service unit(s). For 'Good Practice' on SQSs, we refer to the practice over and above the basic requirement of SQS, not commonly practised and such practices may be considered by other service operators as good example for the reference of their service units.

**II. Result of Self-assessment on OS/OCs Performance**

This NGO has conducted an annual assessment on OS/OC(s) of all subvented service unit(s) by:  
 [Please  as appropriate]

- Service unit manager(s)**  
 **Service coordinator(s)**  
 **Internal audit team**  
 **Others (please specify):** \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO is/are assessed to have met their corresponding OS/OC(s) in 2016-17.
- The following service unit(s) of this NGO has/have under-performance in OS/OC(s) in 2016-17 and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix 2*) except for those on the exemption list at Annex II:

<i>Name of Service Unit(s) with Unmet OS/OC(s)</i>	<i>Unmet OS/OC(s)</i>

Remark: Service operators should ensure that all statistics reported in the SIS forms are accurate. If amendments to the OS/OC statistics of 2016-17 are needed, the amended data, together with full justification, should be attached to this proforma for re-submission.

**Signature :** \_\_\_\_\_

**Name :** \_\_\_\_\_

**Post :** **Chairperson of Board/Management Committee/ NGO Head \***

**Service Operator :** \_\_\_\_\_

**Contact Person :** \_\_\_\_\_ **(Name & Post)**

**Tel No. :** \_\_\_\_\_

**Fax No.:** \_\_\_\_\_

**E-mail Address :** \_\_\_\_\_

**Date :** \_\_\_\_\_

*\*delete as appropriate*

## Action Plan for Unmet Area of SQS/ESR as at April 2017

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all unmet areas in SQSs/ESRs of its concerned service units. ***One Action Plan is required for each unmet area.***
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_  
 Name of Service Unit : \_\_\_\_\_  
 Funding and Service Agreement : \_\_\_\_\_

I. Criterion of SQS: No. \_\_\_\_\_ / ESR concerned\*:

II. The area not yet achieved:

III. Reason(s) for not achieving the above area:

IV. Action(s) to be taken for achieving the above area:

V. Planned time frame for completing the action(s):

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese] :	Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date:

\* delete as appropriate

## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. ***One Action Plan is required for each under-performed OS/OC.***
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator : \_\_\_\_\_

Name of Service Unit : \_\_\_\_\_

Funding and Service Agreement : \_\_\_\_\_

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in <u>2015-16</u> (if yes, please state the actual performance of 2015-16 also)

I. Reason(s) for not achieving the OS/OC :

II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

III. Planned time frame for completion of the action(s) proposed above:

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]:		[Chinese]:	Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date:



**Subvented Service Units Exempted from Self-assessment  
for the Period Covering April 2016 – March 2017**

Types of Service Units	Self-assessment on SQSs & ESRs	Self-assessment on OS/OCs Performance
1. Service units operated for less than 12 months during 1 April 2016 – 31 March 2017 which include: <ul style="list-style-type: none"> <li>▪ new service units commenced operation during the period; and</li> <li>▪ service units ceased operation during the period.</li> </ul>	Exempted	Exempted
2. Service units under service re-engineering during 1 April 2016 – 31 March 2017.	Fully/Partially exempted if there are changes in OS/OCs requirements of the FSA concerned	Fully/Partially exempted if there are changes in OS/OCs requirements of the FSA concerned
3. Service units with reporting cycle different from this assessment cycle covering 1 April 2016 – 31 March 2017.	Exempted <sup>1</sup>	Exempted <sup>1</sup>

<sup>1</sup> Service units with different reporting cycle, e.g. the service of Integrated Programme in Kindergarten-cum-Child Care Centre, with reporting cycle changed to September – August w.e.f. September 2009, are required to submit their SAR to the Subventions Section by 20 September 2017.

## Annex I (P.1)

Please forward the completed proforma to Subventions Section, Social Welfare Department at 38/F, Sunlight Tower, 248 Queen's Road East, Wan Chai, Hong Kong (fax: 2575 5632) **on or before 20 April 2017.**

## PROFORMA

### Service Performance Monitoring System (SPMS) Self-assessment on Compliance with SQSs, ESRs and OS/OCs in 2016-17

Name of Service Operator : \_\_\_\_\_

#### I. Result of Self-assessment on 16 SQSs and ESRs

This NGO has conducted a self-assessment on 16 SQSs and ESRs based on the tools and suggested process<sup>Note 1</sup> including the examination of all documents and their implementation as well as the formulation of action plans for non-compliant areas by:

[Please  as appropriate]

- Service unit manager(s)
- Service coordinator(s)
- Internal audit team
- Others (please specify): \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO having been operated for 12 full months in 2016-17 is/are assessed to have met the requirements of all criteria of 16 SQSs and ESR(s) as stipulated in respective Funding and Service Agreement(s).
- The following service unit(s) of this NGO has/have unmet area of SQS(s) or ESR(s) and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix I*):

Name of Service Unit(s) with Non-compliance	Unmet Area of SQS(s)/ESR(s)

Any other remarks on self-assessment:

[Please  as appropriate, if any, and provide details in separate sheets]

- Good Practice<sup>Note 2</sup>, including SQSs, value-added and innovative service (please specify):

<sup>Note 1</sup> Details about the self-assessment mechanism are laid down in Chapter 4 of the Performance Assessment Manual which can be downloaded from [http://www.swd.gov.hk/en/index/site\\_ngo/page\\_serviceper/sub\\_serpassessment](http://www.swd.gov.hk/en/index/site_ngo/page_serviceper/sub_serpassessment).

<sup>Note 2</sup> The good practices reported may not be counted as track record on performance monitoring of the service operator / service unit(s). For 'Good Practice' on SQSs, we refer to the practice over and above the basic requirement of SQS, not commonly practised and such practices may be considered by other service operators as good example for the reference of their service units.

**II. Result of Self-assessment on OS/OCs Performance**

This NGO has conducted an annual assessment on OS/OC(s) of all subvented service unit(s) by:  
 [Please  as appropriate]

- Service unit manager(s)
- Service coordinator(s)
- Internal audit team
- Others (please specify): \_\_\_\_\_

Result of our self-assessment is [Please  as appropriate]:

- All subvented service unit(s) of this NGO is/are assessed to have met their corresponding OS/OC(s) in 2015-16.
- The following service unit(s) of this NGO has/have under-performance in OS/OC(s) in 2015-16 and the corresponding Action Plan(s) is/are attached (please use the form at *Appendix 2*) except for those on the exemption list at Annex II:

<i>Name of Service Unit(s) with Unmet OS/OC(s)</i>	<i>Unmet OS/OC(s)</i>
	OS1
	OS1

Remark: Service operators should ensure that all statistics reported in the SIS forms are accurate. If amendments to the OS/OC statistics of 2016-17 are needed, the amended data, together with full justification, should be attached to this proforma for re-submission.

Signature : \_\_\_\_\_

Name : \_\_\_\_\_

Post : ~~Chairperson of Board/Management Committee~~ / NGO Head \*

Service Operator : \_\_\_\_\_

Contact Person : \_\_\_\_\_ (Name & Post)

Tel No. : \_\_\_\_\_ Fax No. : \_\_\_\_\_

E-mail Address : \_\_\_\_\_

Date : \_\_\_\_\_

\*delete as appropriate

## Action Plan for Under-performed OS/OC in 2016-17

**IMPORTANT NOTE:**

1. The service operator is required to formulate Action Plans for all under-performed OS/OCs of its concerned service units. One Action Plan is required for each under-performed OS/OC.
2. The service operator may be required to report in writing the progress of the Action Plan according to a specified time frame.

Name of Service Operator :

Name of Service Unit :

Funding and Service Agreement : Non-medical Voluntary Drug Treatment and Rehabilitation Services

Under-performed OS/OC (e.g. OS1/OC3)	Description of OS/OC Indicator	Agreed Level (as stipulated in FSA or SIS Form)	Actual Performance of the Service Unit in 2016-17	Any under-achievement of the same OS/OC in 2015-16 (if yes, please state the actual performance of 2015-16 also)
OS1a	Rate of placement occupancy (Female) in residential program	65%	MOS:60%及LTC:40%  50%	38%

I. Reason(s) for not achieving the OS/OC :

- 1) 因青少年的隱蔽吸毒情況及受個人節慶(如：自己/朋友生日、親友壽宴)影響，一方面影響申請人舍個案的數量，另一方面也影響已入舍舍友的穩定性。
- 2) 申請人於安排約見後缺席面試，並未能聯絡，有部份面見後因未能申請綜援及有經濟壓力而終止申請及入舍。
- 3) 有關戒毒及濫藥的社區教育及輔導增多，吸毒青少年相對地較接受社區輔導服務。
- 4) 舍友接受院舍規則(如：禁煙、有紀律的生活程序及課堂學習)的意識較薄弱，阻礙其考慮入住院舍。
- 5) 未能與懲教所合作，雖能與感化官及綜合家庭服務中心聯絡，但未能確實在其工作小組會議中作服務簡介。

II. Action(s) taken and result (effectiveness) / action(s) to be taken to meet the Agreed Level of the OS/OC in the following year:

- 1) 與項目發展部合作，建立「外展intake隊」，以外展Intake的手法，擴闊接觸濫藥者，增加推廣宿舍服務，並藉以提升服務使用率。

- 2) 繼續加強與相關醫院及輔導機構聯繫，參與分享會、服務交流會及研討會以推廣院舍服務，擴闊轉介來源，在北區醫院、葵涌醫院、青山醫院明心樓藥物誤用診所等的資訊架放置院舍服務單張。
- 3) 推行適切的計劃及興趣小組(如：優點銀行獎勵計劃、舒壓結他小組、職前培訓小組、親親大自然小組、義工小組等)，以迎合舍友的興趣及需要，藉以加強她們的歸屬感。
- 4) 保留為釋囚提供三個月的短期住宿服務，另一方面也繼續主動與感化官及綜合家庭服務中心聯絡和預約在其工作小組會議中作服務簡介，盼能提升轉介。
- 5) 繼續加強與濫用精神藥物者輔導中心、家計會、醫院、戒煙社福機構、外展隊等合作，引入不同類型的小組，增加濫藥者對相關戒毒機構服務的接觸，以助舍友入住的穩定性。同時，可增加濫用精神藥物者輔導中心、家計會、醫院、戒煙社福機構、外展隊對院舍的認識從而提高轉介。
- 6) 繼續於電話查詢及申請面見時，了解申請者的濫藥事件及已吸毒年期(毒齡)，並作出建議(毒齡長建議長期一年服務，毒齡短建議短期服務)及表明服務特色(\_\_\_\_\_能提供寧靜的環境去學習)，若毒齡長的申請者堅持在\_\_\_\_\_進行住宿服務，會按其需要讓她們選擇在\_\_\_\_\_地點進行較長的住宿服務。
- 7) 於\_\_\_\_\_新增「易達面談室」及Intake-Express服務，以方便感化官作轉介及探訪，感化官可於\_\_\_\_\_約見舍友，也可以致電\_\_\_\_\_轉介個案，加快入舍安排。

### III. Planned time frame for completion of the action(s) proposed above:

因着上半年的策略，宿舍整體的入住率由38%提升至50%，故會繼續沿用部分策劃以提升入住率。

進行時段	行動內容	2016-2017進展情況
4/2017 – 31/3/2018	<ul style="list-style-type: none"> <li>● 繼續在各藥物誤用診所/輔導機構的資訊架放置院舍服務單張，擴闊轉介來源。</li> <li>● 繼續安排及檢視社工和舍監團隊，於舍友入舍的首星期(7天)內，社工接觸及關顧舍友不少於 5次、舍監安排講解院舍程序和規則，以加強關顧和情緒支援。</li> <li>● 舍友入舍後的首月開辦「適應小組」，並持續地舉行適應小組以協助適應。</li> <li>● 於舍友入住20天後在舍內安排與家人/轉介社工開會，以讓舍友家長/直系親屬/轉介社工了解舍友進展，鼓勵完成住宿期。</li> </ul>	<ul style="list-style-type: none"> <li>● 在明心樓、北區醫院、葵涌醫院東區醫院的資訊架放置服務單張，也在2016年12月、2017年3月以郵寄方式寄出會訊以擴闊轉介來源。</li> <li>● 上年度_____共進行3個為期4節的適應小組，也進行了19次入舍適應會，而每位新入舍舍友均由總舍監於首日講解院舍程序和規則，</li> </ul>

		利用個人、小組及家人支援的介入方式以協助舍友適應及鼓勵完成住宿期。
4/2017 – 31/3/2018	<ul style="list-style-type: none"> <li>推行適切的計劃及興趣小組(如：優點銀行獎勵計劃、舒壓結他小組、職前培訓小組、親親大自然小組、義工小組等)，以迎合舍友的興趣及需要，藉以加強她們的歸屬感。</li> </ul>	<ul style="list-style-type: none"> <li>於上年度進行適切的小組及獎勵計劃</li> </ul>
4/2017 - 31/3/2018	<ul style="list-style-type: none"> <li>保留為釋囚提供三個月的短期住宿服務，另一方面也繼續主動與感化官及綜合家庭服務中心聯絡和預約在其工作小組會議中作服務簡介，盼能提升轉介。</li> </ul>	<ul style="list-style-type: none"> <li>暫未能收到懲教所的轉介個案，但仍保留為釋囚提供3個月的短期院舍服務。雖有與感化官、感化官及保護家庭及兒童課的社工聯絡及作預約安排到其工作小組進行服務簡介，惜至今仍在安排中。</li> </ul>
10/2017 – 31/3/2018	<ul style="list-style-type: none"> <li>與項目發展部合作，建立「外展intake隊」，以外展Intake的手法，擴闊接觸濫藥者，利用網上平台及WHATSAPP媒介、主動到高危場所擴闊接觸及識別隱蔽濫藥者。一方面為合適人士提供網上資訊、網上朋輩(過來人)輔導、社工個案管理、家庭支援、五天短期住醫院式的介入及提供醫療津貼以擴闊推廣戒毒的資訊，另一方面也可提升他們求助的動機。</li> <li>同時也與項目發展部合作，到中小學進行社區教育(如：講座和過來人分享)</li> </ul>	<ul style="list-style-type: none"> <li>上年度由追尋生命計劃的轉介個案共24人(短期計劃：14人，長期計劃：10人)，當中11人成功入舍，有5人正安排中。</li> </ul>

4/2016 – 31/3/2018	<ul style="list-style-type: none"> <li>● 繼續於電話查詢及申請面見時,了解申請者的濫藥事件及已吸毒年期(毒齡),並作出建議(毒齡長建議長期一年服務,毒齡短建議短期服務)及表明服務特色(提供寧靜的環境去學習),若毒齡長的申請者堅持在進行住宿服務,會按其需要讓她們選擇在地點進行較長的住宿服務。</li> <li>● 致函推廣新增「易達面談室」及Intake-Express服務,以方便感化官作轉介及探訪,感化官可於約見舍友,也可以致電轉介個案,加快入舍安排。</li> </ul>	<ul style="list-style-type: none"> <li>● 在電話查詢、申請面見當中共13人因個人原因而不考慮長期服務,而選擇短期服務,最後共8人均能順利入舍,其中兩人也能在進行一年及九個月的住宿服務。</li> <li>● 自12月作推廣後共2位舍友的感化官使用「易達面談室」,感化官的回應是正面及覺得方便的。同時,也收到感化官使用Intake-Express服務,當中有1個成功轉介個案。</li> </ul>
4/2017 – 31/3/2018	<ul style="list-style-type: none"> <li>● 繼續參與分享會、服務交流會及研討會以推廣院舍服務,擴潤轉介來源。</li> <li>● 加強與業界作交流,到訪不同的院舍,共商合作的空間以擴潤轉介、優化服務。</li> </ul>	<ul style="list-style-type: none"> <li>● 已進行了共5次服務交流。(16/6、18/8、26/8、28/9、21/1)</li> <li>● 於30/3到訪中途宿舍作交流。</li> <li>● 預計於12/5到訪作交流。</li> </ul>

Responsible Service Coordinator/Supervisor of Service Unit			
Name [English]: [Chinese]:			Signature:
Post & Rank [English & Chinese]:			
Contact Phone No.:	Fax No.:	E-mail Address:	Date: 20-4-2017



社會福利署

Social Welfare Department

Our Ref. :  
Tel No. :  
Fax No. :

17 July 2017

Dear :

**Service Performance Monitoring System (SPMS)**

**Self-assessment on  
Service Quality Standards (SQSs), Essential Service Requirements (ESRs) &  
Output/Outcome Standards (OS/OCs) and  
Action Plans on Unmet Areas in 2016-17**

I refer to the 2016-17 Self-assessment Report (SAR) submitted by your organisation on 20.4.2017 regarding the captioned subject.

Please be informed that the Action Plan attached to your SAR in respect of the non-compliance of OS1 of \_\_\_\_\_ is considered acceptable.

As regards the performance assessment against OS/OC(s) as stated in your SAR, we will scrutinise all relevant information relating to your self-assessment and notify you of the details if there is any under-reporting of under-achieved OS/OC(s) in your SAR.

Taking this opportunity, you are advised to remind your staff of the spirit under SPMS which is to ensure the accountability for public funds and the provision of quality social welfare services to service users. For details of the monitoring mechanism, you may refer to the SPMS Performance Assessment Manual and the respective Funding and Service Agreement applicable to your service unit.

If you have any enquiries, please contact me on \_\_\_\_\_

Yours sincerely,

( \_\_\_\_\_ )  
for Director of Social Welfare



非政府機構未達服務質素標準 9 的跟進

機構	單位	審計署的資料	機構回覆
機構 F	單位 F 至 I	<ul style="list-style-type: none"> <li>• 單位於 2015 年未有進行火警演習。</li> <li>• 單位有一滅火筒未能按走火通道圖所示被確認位置(因被物品遮蔽)。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已於 2016 年及 2017 年進行火警演習。</li> <li>• 單位已移開遮蔽滅火筒的物品。</li> </ul>
	單位 J 及 K	<ul style="list-style-type: none"> <li>• 就惡劣天氣安排方面，單位在會訊、佈告板及入口處所示與單位的服務質素標準文件所述有不一致的地方。</li> <li>• 單位每年檢查急救箱一次而非每半年一次。</li> <li>• 單位於 2016 年未有進行火警演習。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已修訂相關文件。</li> <li>• 單位已修訂有關文件為每年檢查急救箱一次。</li> <li>• 單位已於 2017 年進行火警演習。</li> </ul>

機構	單位	審計署的資料	機構回覆
機構 G	單位 L 至 N	<ul style="list-style-type: none"> <li>• 單位在洗衣房未按文件所示備有急救箱。</li> <li>• 單位部分存放於急救箱內的物品已過期。</li> <li>• 單位天花窗發現有裂痕，曾於 2016 年 10 月找工程師檢查確認沒有即時危險。但單位未有備存有相關記錄及隨後的跟進情況。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已檢視所需的急救箱數目及存放位置。由於洗衣房所處的樓層已適當地放置了急救箱，因此無需再添置。</li> <li>• 單位已更換過期的物品。</li> <li>• 機構已安排專業人士再作評估，並會備存記錄。</li> </ul>
	單位 O	<ul style="list-style-type: none"> <li>• 單位部分存放於急救箱內的物品已過期。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已更換過期的物品。</li> </ul>

機構	單位	審計署的資料	機構回覆
機構 H	單位 P 至 R	<ul style="list-style-type: none"> <li>• 單位在地下張貼的走火路線圖未有標示在廚房位標示有兩張滅火毯；在二樓及三樓張貼的走火路線圖亦未有標示所有滅火筒的位置。</li> <li>• 單位未有備存物理治療設備、電力系統裝置及設備、去水渠口以及消防室的檢查記錄。</li> <li>• 單位有三個消防喉轆被物品遮蔽。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已修正相關的走火路線圖。</li> <li>• 單位已進行相關檢查，並備存相關記錄。</li> <li>• 單位已移開遮蔽消防喉轆的物品，並在消防喉轆旁加上告示，提醒員工不要遮蔽消防喉轆。</li> </ul>

機構	單位	審計署的資料	機構回覆
機構 I	單位 S 及 T	<ul style="list-style-type: none"> <li>• 在 2017 年 6 月 14 日至 2017 年 6 月 25 日實施紅色級別措施，單位仍有安排家長觀課週。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位就審計署的評估持不同意見。</li> <li>• 單位表示在實施紅色級別措施期間有按照其政策程序，暫停義工及訪客的探訪，以及在舉行家長活動時作特別安排。單位在進行家長活動時，已考慮到傳染病的性質及幼兒狀況，於探訪期間進行有限度的分隔安排，而家長觀課則在走廊外觀察幼兒生活環境及活動情況，以避免病菌散播及滿足家長關愛幼兒的需要。</li> </ul>
機構 J	單位 U 及 V	<ul style="list-style-type: none"> <li>• 單位有一個滅火筒被物品遮蔽。</li> <li>• 單位的防火設施未有如期巡查。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已移開遮蔽滅火筒的物品。</li> <li>• 單位已按時巡查防火設施。</li> </ul>
機構 K	單位 W	<ul style="list-style-type: none"> <li>• 單位部分存放於急救箱內的物品已過期。</li> </ul>	<ul style="list-style-type: none"> <li>• 單位已更換過期的物品。</li> </ul>