

OFFICIAL REPORT OF PROCEEDINGS**Wednesday, 12 November 1986****The Council met at half-past Two o'clock****PRESENT**

HIS EXCELLENCY THE GOVERNOR (*PRESIDENT*)
SIR EDWARD YOUDE, G.C.M.G., G.C.V.O., M.B.E.
THE HONOURABLE THE CHIEF SECRETARY
SIR DAVID AKERS-JONES, K.B.E., C.M.G., J.P.
THE HONOURABLE THE FINANCIAL SECRETARY
MR. PIERS JACOBS, O.B.E., J.P.
THE HONOURABLE THE ATTORNEY GENERAL
MR. MICHAEL DAVID THOMAS, C.M.G., Q.C.
THE HONOURABLE LYDIA DUNN, C.B.E., J.P.
THE HONOURABLE CHEN SHOU-LUM, C.B.E., J.P.
THE HONOURABLE PETER C. WONG, C.B.E., J.P.
THE HONOURABLE ERIC PETER HO, C.B.E., J.P.
SECRETARY FOR TRADE AND INDUSTRY
DR. THE HONOURABLE HO KAM-FAI, O.B.E., J.P.
THE HONOURABLE ALLEN LEE PENG-FEI, O.B.E., J.P.
THE HONOURABLE HU FA-KUANG, O.B.E., J.P.
THE HONOURABLE WONG PO-YAN, O.B.E., J.P.
THE HONOURABLE DONALD LIAO POON-HUAI, C.B.E., J.P.
SECRETARY FOR DISTRICT ADMINISTRATION
THE HONOURABLE CHAN KAM-CHUEN, O.B.E., J.P.
THE HONOURABLE CHEUNG YAN-LUNG, O.B.E., J.P.
THE HONOURABLE MRS. SELINA CHOW LIANG SHUK-YEE, O.B.E., J.P.
THE HONOURABLE MARIA TAM WAI-CHU, O.B.E., J.P.
DR. THE HONOURABLE HENRIETTA IP MAN-HING, O.B.E., J.P.
THE HONOURABLE CHAN YING-LUN, J.P.
THE HONOURABLE MRS. RITA FAN HSU LAI-TAI, J.P.
THE HONOURABLE MRS. PAULINE NG CHOW MAY-LIN, J.P.
THE HONOURABLE PETER POON WING-CHEUNG, M.B.E., J.P.
THE HONOURABLE YEUNG PO-KWAN, C.P.M., J.P.
THE HONOURABLE KIM CHAM YAU-SUM, J.P.
THE HONOURABLE JOHN WALTER CHAMBERS, J.P.
SECRETARY FOR HEALTH AND WELFARE
THE HONOURABLE JACKIE CHAN CHAI-KEUNG
THE HONOURABLE CHENG HON-KWAN
THE HONOURABLE HILTON CHEONG-LEEN, C.B.E., J.P.
DR. THE HONOURABLE CHIU HIN-KWONG

THE HONOURABLE CHUNG PUI-LUM
THE HONOURABLE THOMAS CLYDESDALE
THE HONOURABLE HO SAI-CHU, M.B.E., J.P.
THE HONOURABLE HUI YIN-FAT
DR. THE HONOURABLE CONRAD LAM KUI-SHING
THE HONOURABLE MARTIN LEE CHU-MING, Q.C., J.P.
THE HONOURABLE LEE YU-TAI
THE HONOURABLE DAVID LI KWOK-PO, J.P.
THE HONOURABLE LIU LIT-FOR, J.P.
THE HONOURABLE NGAI SHIU-KIT, O.B.E., J.P.
THE HONOURABLE POON CHI-FAI
PROF. THE HONOURABLE POON CHUNG-KWONG
THE HONOURABLE SZETO WAH
THE HONOURABLE TAI CHIN-WAH
THE HONOURABLE MRS. ROSANNA TAM WONG YICK-MING
DR. THE HONOURABLE DANIEL TSE, O.B.E., J.P.
THE HONOURABLE ANDREW WONG WANG-FAT
THE HONOURABLE HARNAM SINGH GREWAL, E.D., J.P.
SECRETARY FOR TRANSPORT
THE HONOURABLE GRAHAM BARNES, J.P.
SECRETARY FOR LANDS AND WORKS
THE HONOURABLE RONALD GEORGE BLACKER BRIDGE, O.B.E., J.P.
SECRETARY FOR EDUCATION AND MANPOWER
THE HONOURABLE DAVID GREGORY JEAFFRESON, C.B.E., J.P.
SECRETARY FOR SECURITY

ABSENT

THE HONOURABLE JOHN JOSEPH SWAINE, O.B.E., Q.C., J.P.
THE HONOURABLE STEPHEN CHEONG KAM-CHUEN, O.B.E., J.P.
THE HONOURABLE RICHARD LAI SUNG-LUNG
THE HONOURABLE PANG CHUN-HOI, M.B.E.
THE HONOURABLE HELMUT SOHMEN
THE HONOURABLE TAM YIU-CHUNG
THE HONOURABLE LAU WONG-FAT, M.B.E., J.P.

IN ATTENDANCE

THE CLERK TO THE LEGISLATIVE COUNCIL
MR. LAW KAM-SANG

Papers

The following papers were laid pursuant to Standing Order 14(2):

<i>Subject</i>	<i>L.N. No.</i>
Subsidiary Legislation:	
Fire Services Ordinance	
Fire Service (Installation Contractors) (Amendment) Regulations 1986	263
Public Health and Municipal Services Ordinance	
Public Health and Municipal Services Ordinance (Amendment of First Schedule) Order 1986.....	264
Companies Ordinance	
Companies (Interest on Investments) (No. 6) Notice 1986	265
Pharmacy and Poisons (Amendment) Ordinance 1986	
Pharmacy and Poisons (Amendment) Ordinance 1986 (Commence- ment of Sections 3 and 4) Notice 1986.....	266
Public Health (Animals and Birds) Ordinance	
Regulation of Movement of Dogs Order 1986	267

Sessional Papers 1986-87:

- No. 14—Supplementary provisions approved by the Urban Council during the second quarter of the financial year 1986/87.

Oral answers to questions**Control of neon signs**

1. MR. CHEONG-LEEN asked: *With regard to the control of neon signs, will the Government inform this Council what steps are being taken to eliminate environment hazards and danger to life and limb arising from dangerous neon signs?*

SECRETARY FOR LANDS AND WORKS: Sir, when the Buildings and Lands Department receives information, either from the public or from other government departments, that a sign appears to be dangerous, it is immediately inspected by a building surveyor. If this confirms that action is required to make the sign safe, a notice is served on the owner of the sign requiring it to be removed or repaired within a specified time. If the owner cannot be found or if he does not take the necessary action within the specified time, the Buildings and Lands Department arranges for the sign to be removed or repaired, and where possible recovers the cost from the owner. If the inspection shows the sign

to be immediately dangerous, the Buildings and Lands Department has it removed immediately, again subsequently recovering the costs from the owner, if possible.

The Buildings and Lands Department takes similar action to remove signs that present a danger to traffic or obstruct traffic signs on request from the Transport Department.

MR. CHEONG-LEEN: *Sir, does the department have sufficient staff at the moment and, if it does not, is it contemplating increasing the staff?*

SECRETARY FOR LANDS AND WORKS: Sir, for the purpose of removing dangerous signs, the staff is reasonably adequate.

MR. CHENG: *Sir, would the Secretary for Lands and Works advise this Council whether the removal or repair works would be carried out at the expense of Government if the owner cannot be found? If the answer is affirmative, what is the order of government expenditure on that account each year?*

SECRETARY FOR LANDS AND WORKS: The answer to the first question is yes because dangerous signs must be removed and the answer to the second I will have to give in writing though I understand it was somewhere under \$500,000. (See Annex I)

MRS. CHOW: *Sir, does the Buildings and Lands Department take any active steps to check whether signs become dangerous or whether it only acts on complaints?*

SECRETARY FOR LANDS AND WORKS: Sir, as I said in my answer, it acts on complaints.

MR. CHEN: *Sir, is government approval necessary for signs to be put up in the first place especially those which may affect the structural soundness of the building?*

SECRETARY FOR LANDS AND WORKS: Sir, in general there is no procedure for application to put up signs in the first place though in the case of very large signs the owners may be required to submit plans under the Buildings Ordinance.

MR. JACKIE CHAN (in Cantonese): *Sir, will Government consider more effective control measures, for example, by requiring that the owners must apply for a licence from Government and that certain safety measures must be complied with before they are allowed to be put up?*

SECRETARY FOR LANDS AND WORKS: Sir, I missed part of that question I am afraid. I understand it refers to abandoned signs and the present action takes no regard of ownership until the serving of notice, so if an abandoned sign

becomes dangerous, it becomes the subject of action but not through being abandoned. Indeed, it is very unlikely that the department will know until it is dangerous whether it is an abandoned sign or it is one still owned by somebody.

MR. YEUNG: *Sir, what is the specified time within which the dangerous sign has to be removed and what action will be taken by the Government if the cost is not recovered by the owner?*

SECRETARY FOR LANDS AND WORKS: *Sir, I know that the specified time is a short one because we are dealing with a dangerous structure. As I said in my answer, if the notice is not responded to and subsequently Government has to spend the cost of demolishing the sign, then it will depend why the Government has been unable to recover the cost. If it is because we can't discover the owner, then the money will have to be written off. If the owner can be discovered, an action will be taken against the owner to recover.*

Honorarium for district board members

2. DR. LAM asked (in Cantonese): *In view of the recent increase in allowances given to Legislative Council and Regional Council members, will Government consider reviewing the allowance for district board members, and if so, how long will it take to complete such a review?*

SECRETARY FOR DISTRICT ADMINISTRATION: *Sir, it is the intention of Government to introduce a mechanism whereby the level of honorarium for district board members will be reviewed in the light of the results of the pay trend survey conducted each year. This means that a review will be carried out early next year so that an increase in the level of honorarium will take effect from the beginning of the next financial year. The proposed arrangement will allow reviews on a similar basis to be conducted at regular intervals in the future.*

The Administration will also recommend the immediate introduction of a monthly rent allowance to assist board members in setting up their own offices for the purposes of meeting their constituents and carrying out other activities related to their work as district board members. These proposals will be submitted to the Finance Committee of this Council early next month.

DR. LAM (in Cantonese): *Sir, in view of the fact that the Legislative Council, Urban Council and Regional Council Members had their allowances revised at different dates, some district board members said that Government seemed to be treating them rather less fairly. Could Government inform this Council whether consideration could be given to revising the allowance for members of the various councils and district boards on the same date?*

SECRETARY FOR DISTRICT ADMINISTRATIONS: Sir, although the basis for adjustment among the Urban Council, Regional Council, Executive Council and Legislative Council and district boards allowances is somewhat different, the annual pay trend survey is the basis on which such adjustment is made and there is no reason why the timing cannot be adjusted in future.

Bus shelters containing asbestos

3. MRS. NG asked (in Cantonese): *Since asbestos-related materials have been used in the construction of some bus passenger shelters, will Government inform this Council whether such shelters pose any health hazards to the public, and if so, whether any measures will be taken to remove the health hazards?*

SECRETARY FOR LANDS AND WORKS: Sir, the bus shelters which contain asbestos do not pose any appreciable health hazard to the public. The asbestos is contained in an asbestos cement roofing material where the asbestos fibres are held fast by the cement. Release of fibres into the air would only occur if the material was badly damaged. The bus companies who are responsible for building the shelters also maintain them, and if there is any need to replace roofing panels, a substitute which does not contain asbestos cement is now used. In the course of time, under the normal maintenance programme, all asbestos cement will ultimately be replaced. No asbestos materials are now used in the construction of new bus shelters. So I think I can confidently assure Mrs. NG that bus shelters are safe to the public.

MRS. NG (in Cantonese): *Sir, some bus shelters are put up with funds given by district boards. Will these bus shelters be included in the bus companies maintenance programme, for these bus shelters are exposed to the elements and could easily be damaged. I hope that Government could really pay attention to this question of damage to bus shelters?*

SECRETARY FOR LANDS AND WORKS: Sir, I will look into the question of these special bus shelters put up by district boards. I was, in reply to the question referring to the normal ones which are put up by the Government and by the bus companies and I didn't in my reply say there was actually a programme for replacement. In fact, they are replaced as necessary.

MR. HU: *Sir, is there any government project presently in the construction stage which may use asbestos material and if so does the Government intend to replace this material with substitutes which does not contain asbestos?*

SECRETARY FOR LANDS AND WORKS: Sir, in general asbestos products are no being used in government projects but there are a few instances where the asbestos materials of the more stable kind have been specified for particular use

and I am aware of at least one case of that. This is because in fact the use of this material in the circumstances has been considered very carefully by the departments concerned. It is the best material and the use of it constitutes no danger.

Telephone booking service for specialist clinics

4. DR. CHIU asked: *In view of the fact that patients with reference letters from doctors wishing to attend specialist clinics of government hospitals have to wait for up to half a day just to get an appointment, will Government consider providing a telephone booking service to minimise the inconvenience caused?*

SECRETARY FOR HEALTH AND WELFARE: Sir, while I understand that it is unusual for patients to have to wait for as long as half a day to make appointments in government specialist clinics, I agree with Dr. CHIU's suggestion that a telephone appointment system would be more efficient and convenient to patients. I understand this is already the practice in two out of the eight specialist clinics.

Dr. CHIU will be pleased to know that, with effect from next month, a telephone appointment system will in future be adopted as standard practice in all the government specialist clinics, with the exception of the Sai Ying Pur Jockey Club Clinic where, because of the large number of clinic sessions being operated, it will take a little longer to introduce the new arrangements. It should be possible to operate a telephone appointment system in this clinic in about three months time.

DR. CHIU: *Sir, I am pleased to learn that appropriate action will be taken in the best interests of patients. Will the Government inform this Council whether this telephone booking service can be made by referring doctors' offices as well as by the patients directly?*

SECRETARY FOR HEALTH AND WELFARE: Sir, I will have to consult with the Director of Medical and Health Services on the appropriateness and practicability of this point and write to Dr. CHIU. (See Annex II)

DR. IP: *Sir, it is very gratifying that Government has at last decided to introduce this, three years after my request. As it is the practice for specialist clinics to require a referral note from a doctor, will Government be following the example of the Prince of Wales Hospital, whereby after a telephone booking the referral note should be sent by mail to the specialist clinic concerned?*

SECRETARY FOR HEALTH AND WELFARE: Sir, I will put this suggestion to the Director of Medical and Health Services.

Noise pollution in buildings adjoining flyovers

5. DR. TSE asked (in Cantonese): *According to a survey conducted recently by several Kowloon City District Board members, the noise pollution problem encountered by residents living on both sides of the flyover at Kowloon City Road far exceeded the maximum toleration limit stipulated in the Hong Kong Planning Standards and Guidelines published in November 1985. Will the Government inform this Council:*

- (a) *whether there are any plans to compensate these residents and other residents who are similarly affected, and to reduce the level of noise pollution in these cases; and*
- (b) *whether the Government, in constructing public facilities such as flyovers, has any plan to introduce legislation to stipulate that such facilities must be subject to noise control as well as other environmental protection requirements, so as to safeguard the interests of the residents living in the vicinity?*

SECRETARY FOR LANDS AND WORKS: Sir, if I may, I will answer the second part of the question first.

Nowadays wherever possible at the planning stage of new road works, measures are taken to contain noise and other pollution by careful selection of routes and by siting new residential development away from the road. In addition, during the design stage an environmental review is now carried out on all new major construction projects including highways and flyovers. The purpose of such an environmental review is to ensure that the environmental standards stipulated in the Hong Kong Planning Standards and Guidelines published in November 1985 are met wherever practicable, by for example the incorporation of appropriate noise reduction measures.

So we are now doing all that is reasonably possible to avoid serious noise problems when we build flyovers. For some roads in the past such as the Kowloon City Road, this has not always been the case and complete avoidance of the problem has not been possible due to the very crowded conditions under which we have had to operate.

The only real answer to the extreme cases, in which I would include Kowloon City Road lies in the replanning and redevelopment of the buildings affected. But we can only achieve this, if at all, fairly slowly. On Dr. TSE's first question I do not think that compensation either statutory or *ex-gratia* is the answer. Since the Kowloon City Road flyover system was completed ownership and occupation of many of the properties affected has changed and doubtless will continue to do so. I see no way in which a system of either statutory or *ex-gratia* compensation payments could be operated.

DR. TSE (in Cantonese): *Sir, concerning the redevelopment of buildings that will have financial implication and as far as I am aware, if the residents affected are to receive compensation, they must lodge their complaint when the project is gazetted. May I ask according to the experience of the Government, when these projects are gazetted, apart from having an effect on the major developers or the major owners of these properties, whether the gazette notice would be able to attract the attention of the residents or tenants, because if they are not aware of these notices being gazetted, they will be deprived of the opportunity to claim compensation. And so I feel that this would not be very effective in alerting the residents?*

SECRETARY FOR LANDS AND WORKS: *Sir, I think that Dr. TSE's worries have very considerable relevance to this particular road. I recall when it was gazetted under the Streets (Alteration) Ordinance, many years ago, in fact it attracted only very few objections and I think, if I recall it rightly, no actual claims for compensation. So, as at that time, there was an opportunity for the residents to object and for the owners to claim compensation for loss of value of their properties and it was not taken. I think that nowadays there is a very much more comprehensive system of giving notice to affected people. The system through the district boards, greater activities of the district offices, do ensure nowadays that this position will not happen again. Nevertheless, as at the time the procedure was there and the proper measures under the Ordinance were taken and in many cases objections and claims were received even at this time, but it would appear that it is quite possible that the residents and the owners of Kowloon City District were not as aware of the problem as they would be now.*

MISS DUNN: *Sir, what is the status of the guideline referred to by the Secretary for Lands and Works? What sanctions are available to the Government if contractors fail to meet the standards and guidelines and finally could he answer the second part of Dr. TSE'S question, which was whether the Government has any plan to introduce legislation to stipulate that facilities such as flyovers must be subject to noise control?*

SECRETARY FOR LANDS AND WORKS: *Sir, I have to answer the second part of the question first because I have forgotten what the first was in listening to the second. As far as Government's plans to introduce noise legislation, they are in the hands of the Secretary for Health and Welfare but I am aware that he is introducing legislation which will enforce noise control. I now recall what the first part of her question which was about the standards and guidelines. Standards and guidelines are essentially standards and guidelines for use within the Government as they affect planning. They are not standards and guidelines for noise control over contractors who would be actually making the noise and, of course, contractors do not design our public facilities.*

Control of physical fitness centres and beauty treatment centres

6. MR. LEE YU-TAI asked: *In view of the increasing trend towards the establishment of physical fitness centres and organisations purporting to offer beauty treatment services which may be hazardous to health, will Government inform this Council whether it has any plans to regulate and monitor their activities?*

SECRETARY FOR HEALTH AND WELFARE: Sir, there is at present no legislation specifically designed to regulate the activities either of physical fitness centres or organisations purporting to offer beauty treatment services.

The majority of physical fitness centres are operated as private clubs and the activities they promote, if supervised by trained instructors and if preceded by a medical check-up are considered to be conducive rather than hazardous to health.

As regards beauty treatment centres, treatment involving medical or surgical operations or the use of drugs is governed by the Medical Registration Ordinance, the Pharmacy and Poisons Ordinance, and the Antibiotics Ordinance, and can only be performed by persons who are qualified and registered under those Ordinances.

I am aware that from time to time new techniques are introduced both for beauty treatment and physical fitness. These will be monitored to determine whether any form of regulation is required.

MR. LEE YU-TAI (in Cantonese): *Sir, because of beauty contests, many people are in favour of beautifying themselves, so would Government step up some sort of educational campaign saying that some of these beauty treatment is hazardous to health?*

SECRETARY FOR HEALTH AND WELFARE: Sir, we will certainly watch the forms of beauty treatment and I am assured by the Director of Medical and Health Services that he does this, and if there is any indication that there is treatment which is causing serious problems we will consider whether legislation is required to deal with it.

Central provident fund

7. MR. HUI asked: *On 28 May 1986, the Secretary for Education and Manpower advised this Council that the Government was 'nearing completion of a reassessment of the arguments for and against a central provident fund'. Will Government inform this Council:*

- (a) *whether the exercise has been completed;*
- (b) *whether the results will be released in the form of a report for public consultation; and*
- (c) *what is the Government's position towards the establishment of a central provident fund in Hong Kong?*

SECRETARY FOR EDUCATION AND MANPOWER: Sir, as you said in your annual address on 8 October, the Administration has recently completed an internal reassessment of the arguments for and against such a scheme.

I think the Government's present position on this issue has also been made clear, Sir, in your address, when you said 'the implications of introducing such a scheme are far-reaching. Decisions on such matters will affect not only the welfare of individuals in the workforce, but also, as experience elsewhere shows, the general state of our economy. They cannot be taken lightly. Alternative means of affording protection to employees must also be examined.' In short, the Government's present position is that, because of its far-reaching implications, the proposal needs to be considered with great care.

The Administration is therefore now seeking the views of appropriate consultative bodies, in particular the Labour Advisory Board, which represents the views of both employees and employers and the Social Welfare Advisory Committee, which represents the views of a wide range of welfare organisations. Since the proposal also has far-reaching economic, actuarial and monetary implications, the Administration is also consulting three bodies with expertise in these areas, the Hong Kong Association of Banks, the Life Insurance Council of Hong Kong and the Discussion Group on the Hong Kong Economy. When all these views have been obtained a decision will be taken as to what form any further consultation should take. I am not yet, therefore, in a position to give a definite reply on this point. However, as stated, Sir, in your address, the views of Members of this Council will, of course, be sought before any decision is taken.

MR. HUI: *Sir, I am glad to learn that many bodies or groups concerned with the issue will be consulted on the scheme. Could the Secretary kindly inform this Council whether he is also willing to consult the OMELCO Manpower Panel, which is also very concerned about this matter?*

SECRETARY FOR EDUCATION AND MANPOWER: Sir, I would certainly wish to have the views of the OMELCO Manpower Panel on this issue. In my view, the best timing for this would probably be after we already have the advantage of the views of the LAB and the other bodies being consulted at this preliminary stage.

MR. SZETO (in Cantonese): *Sir, can Government inform this Council about the consultation of the central provident fund? Will there be a deadline for this consultation and if there is a deadline, when will it be?*

SECRETARY FOR EDUCATION AND MANPOWER: At the moment this has been left to the committees concerned; I would expect them to take a reasonable time over this and I see no immediate need for a deadline. Of course, if it seemed that the issue was being dragged out unnecessarily then we might have to impose one, but at this stage it is being left to the committees concerned and I would assume that they would just take a few weeks and then give us their views.

Drowning in open pits at construction sites

8. MR. ANDREW WONG asked (in Cantonese): *Will Government inform this Council what measures are being taken to ensure that the risk of children being drowned in open pits at construction sites is reduced to a minimum and whether these measures are adequate?*

SECRETARY FOR LANDS AND WORKS: Sir, all government contracts now require contractors to take proper precautions to fence, guard, light and drain all open pits and trench excavations which could pose a danger to the public, and to children in particular.

In order to enforce these requirements, instructions have been issued to all staff concerned with the control of sites, drawing their attention to all the necessary steps to be taken to fence excavations adequately and to prevent the ponds forming on sites. Responsibility for safety on private sites lies with the authorised persons and contractors, and a practice note has been issued to the authorised persons drawing attention to the requirement for fencing of sites and other measures to safeguard the public. Amendments to the Construction Sites (Safety) Regulations, which were enacted in 1983, require *inter alia* adequate fencing of excavations to prevent accidents.

MR. ANDREW WONG (in Cantonese): *In 1983 the hon. Miss Lydia DUNN raised a similar question. Since then, what is the number of accidents involving drowning of children, the number of children involved and the nature of the sites concerned: were they public sites or private sites?*

SECRETARY FOR LANDS AND WORKS: Sir, since Miss Lydia DUNN asked this question and the Director of Public Works gave a reply in this Council in February 1983, in that particular year there were three accidents which were directly or indirectly site-related, although two of them had nothing to do with the fault of the contractor in that a little girl and a little boy fell into the sea at the Chai Wan Reclamation and sea-wall. There was one further accident

in that year, when a nine-year-old boy drowned himself or was drowned in a manhole, immediately following a typhoon. I think the problem there was that he got onto the site but should not have been able to get there. Since then up until this year, there have not been any other such accidents as far as we can discover, except that in this year at Mui Wo a two-and-a-half-year-old child fell into a pond which was partly within a work site area. The pond had been there long before the work site area, and it wasn't all within it and there wasn't anything I think that the construction company could have done. All these cases I have quoted were all in some way related to government contracts.

MR. HO: *May I ask the Secretary to continue on with his answer in the second page in which he mentioned about the additional measures. for example, safety officers and safety supervisors which will be provided later on, and that he is satisfied with all the measures so far employed in this area?*

SECRETARY FOR LANDS AND WORKS: Sir, after hearing so much of me this afternoon I thought you might be anxious to see the less. but I will indeed continue.

In addition, the new Factory and Industrial Undertakings (Safety Officer and Safety Supervisors) Regulations, shortly to come into force, will impose a new requirement for safety officers on construction sites. A full time safety officer will have to be employed on all construction sites having more than 200 workers, and any site with more than 20 workers will require a safety supervisor. As part of their duties, these officers will be responsible for ensuring that open pits at construction sites are made safe in accordance with the law and contract conditions to ensure the safety of workers and the general public.

I am satisfied that the measures being taken to reduce hazards on construction sites to a minimum are adequate. However, in conclusion, I would say that, notwithstanding the additional legal requirements introduced in recent year to minimise risks, construction sites are dangerous places, particularly to children. They should never be considered as 'adventure playgrounds'. and parents also should make every effort to instill into their children the dangers of entering such sites.

Overseas educational institutes

9. MR. LIU asked (in Cantonese): *In view of recent invitation for enrolment conducted in Hong Kong by overseas secondary schools and colleges for local students to study abroad some of which have subsequently been found to be seriously sub-standard, will Government inform this Council:*

- (a) *whether these overseas education institutes are required to be examined by departments concerned before they can make such invitations in Hong Kong; and*
- (b) *whether the departments concerned have provided reference materials on these institutes in order to protect the interests of local students who intend to study abroad?*

SECRETARY FOR EDUCATION AND MANPOWER: Sir, overseas educational institutions, which are not providing any form of service in Hong Kong, but seeking only to advertise here, are not subject to any form of scrutiny. As the institutions concerned have no local presence, it would not be practicable to undertake an assessment of their services.

There are, however, a number of ways in which students can obtain information about overseas institutions. The Overseas Students and Scholarships Section of the Education Department has a large collection of reference materials on educational institutions in the United Kingdom, the Commonwealth and the United States. Students wishing to know more about opportunities for study overseas can seek detailed advice from officers of the section in the light of their own specific needs. Schools are regularly advised by circular of these services.

In addition, the department's Careers Education Section, which maintains close liaison with the Hong Kong Association of Careers Masters and Guidance Masters, can also assist students seeking information about overseas study.

Other sources of information are also available. Most of the local tertiary institutions maintain stocks of reference materials for the use of their students, the British Council can provide information about a wide range of British institutions and the local consulates and commissions of overseas countries can also be approached.

MRS. FAN: *Sir, it is difficult for local students to assess the worthiness of overseas secondary schools and colleges and the organisations offering this information in Hong Kong do not necessarily have information on those schools advertising in Hong Kong. Is the Government in a position or is the Government prepared to consider a mechanism in co-operation with other organisations in Hong Kong, to assist local students to make a reasonable assessment and therefore avoid falling victim to substandard institutions overseas?*

SECRETARY FOR EDUCATION AND MANPOWER: Sir, the Government does attempt to provide the fullest possible information we can on these institutions. If Mrs. FAN or any other Member has any suggestions for improving this service, we should certainly be very happy to consider any such suggestions.

DR. HO: *Sir, what would Government do should the parents of Hong Kong students who have been enrolled in an overseas educational institution find out later that such an institution is seriously substandard and report it to the Government or to the Education Department?*

SECRETARY FOR EDUCATION AND MANPOWER: *Sir, I think we can enquire into such cases as are brought to our attention but if the institutions are overseas there is a limit to what we can do apart from warning other students about them.*

Traffic accident in Tuen Mun

10. MR. TAI asked: *In relation to the accident in Tuen Mun which occurred on 5 November 1986 involving a double-decker bus and in which five people were killed and 61 people injured, will Government inform this Council:*

- (a) what assistance, be it legal or social, has been or will be given to the families of the victims in the accident, and what is the up-to-date position;*
- (b) how long will it take for the departments concerned to investigate into the causes of the accident and whether the investigation report will be made public; and*
- (c) what measures have been or will be taken to minimise the possibility of similar accidents from happening?*

SECRETARY FOR TRANSPORT: *Sir, Mr. TAI's question is in three parts. the first part of which concerns the various forms of assistance which Government is providing. The families of the victims in the accident have been approached by staff of the Social Welfare Department and have been offered assistance to cope with this tragic situation. Such assistance includes counselling, temporary placement of young children, advice on other community resources such as legal aid, and financial assistance under the Traffic Accident Victims Assistance Scheme. Families with financial difficulties are being assisted to apply for waiver of hospital charges and for cash grants from charitable trust funds.*

Under the TAVA Scheme. burial grants of up to \$3,000 for each victim have been offered, as have cash grants to meet other needs either under this scheme or from other charitable trust funds. To date, four of the families concerned are receiving financial assistance. but the total amount which may be disbursed in these ways is not yet known. and a number of the families concerned have not yet known, and a number of the families concerned have not yet decided whether they wish to seek such assistance.

As I noted previously, Social Welfare Department staff are informing the victims and their dependants that the services of the Legal Aid Department are available to them. Since the reply was drafted, one has in fact just applied

for legal aid and others who may wish to do so may apply either at the department's main office at 66 Queensway, 24th floor, Hong Kong, or at the Branch Office at Ritz Building, 8th floor, Nathan Road, Mong Kok, where every assistance will be provided. For professional reasons, the Director of Legal Aid cannot actively seek out those in need of assistance but, in the circumstances of this tragic case, he will make arrangements for the appropriate applications to be completed at the hospital if first requested to do so by the injured persons or their family members.

The second part of this question concerns the investigation of the accident. The Royal Hong Kong Police are investigating fully the circumstances surrounding this accident and it should be appreciated that up to 100 statements will have to be taken and the evidence of experts collected, including forensic evidence. It is not possible to say how long this will take but, upon completion, a report will be made to the coroner who will decide whether or not to hold a public hearing. Further the police file will be referred to the Attorney General's Chambers who will consider whether or not there are any grounds for prosecution. The substance of the report itself will not be made public other than through the courts of Hong Kong.

The third part of this question concerns measures to minimise the possibilities of similar accidents occurring in future. The measures adopted by Government to promote the safety of buses can be summarised as follows:

- (a) as regards buses themselves:
- each bus type undergoes design approval, weighing, brake testing, stability testing and full inspection by Transport Department staff to check for compliance with relevant safety regulations;
 - each individual bus undergoes a pre-commissioning full inspection by Transport Department staff before licensing;
 - once on the road, all buses are inspected once every year by Transport Department staff resulting in a Certificate of Roadworthiness;
 - at intervals of between three to five years, buses receive a major overhaul by the operator, and a more searching examination by Transport Department staff, resulting in a Certificate of Fitness;
 - spot checks on buses by Transport Department staff are conducted periodically and at random to check on steering, brakes, tyres, suspension, lighting, and all other parts essential to safety;
 - monitoring by Transport Department staff of the maintenance facilities and maintenance programmes of the operators, including regular liaison meetings between Transport Department and the senior engineering staff of the franchised companies to promote greater mechanical safety and to take up with them any deficiencies which may have been revealed;

- (b) as regards the operation of buses:
- agreement with the companies on their bus driver training programmes;
 - testing of bus drivers for licensing;
 - adjustment of schedules to meet traffic conditions;
 - trial runs of buses of the type to be used on a proposed new route, under the supervision of the Transport Department staff;
 - design of roads and road surfaces, including signs and markings, with safety as a paramount factor;
 - detailed on-site investigations by traffic and highway engineers to identify whether the road environment has been a contributory factor to an accident, and to take any necessary remedial action;
 - close liaison with the police in the investigation of an accident to ensure prompt follow-up action to remedy any failings or deficiencies which may have been revealed with implications to the overall standard of bus safety.

Sir, the police investigation into the accident is still continuing. Any lessons of general or specific application which might be learned once the cause or causes of this accident are known will be fully taken into account and reflected in Government's procedures or requirements, or taken up with the bus companies, as appropriate.

MR. TAI: *Sir, will the Secretary inform this Council whether his department is completely satisfied with the stability factor of this particular model of doubledecker bus, in comparison with other models of double-decker bus now running on the road?*

SECRETARY FOR TRANSPORT: Sir, the bus involved is a Leyland Victory Mark II. Buses of this type fully comply with the static tilt test requirement of 28 degrees without overturning. There are some 700 buses of this type in use in Hong Kong; since their introduction they have run about 250 million kilometres, and initial analysis of KMB bus accidents involving all types of buses between 1983 and 1985 shows that the Leyland Victory Mark II has the lowest involvement rate per vehicle of all accident types, among all types of buses.

MISS TAM: *Sir, my question is similar to Mr. TAI Chin-wah's and it goes— does the Government monitor the safety record of different types of buses, to assess its standard of performance in terms of safety and advise the bus company on its bus purchasing programmes?*

SECRETARY FOR TRANSPORT: Sir, I think the answer to that question is yes; accidents are monitored by the Transport Department.

MR. CHEN: *Sir, I am more concerned about the operation of buses, in other words the way in which the bus is driven. With regard to the testing of bus drivers for licensing, is there a minimum driving experience requirement in order to qualify to drive a bus, especially a double-decker bus?*

SECRETARY FOR TRANSPORT: Sir, the KMB requires all applicants to possess at least three years' driving experience with no record of driving convictions. After recruitment, successful applicants are given a four-week indoor and outdoor training programme including briefings on relevant legislation. Thereafter, the applicant must pass a rigorous bus driver test before a driving licence for a public bus is issued.

MRS. CHOW: *Sir, will an investigation be conducted, apart from the police investigation, from the technical and engineering point of view, to establish whether present standards adopted by Government are adequate for this particular type of bus, given that eight buses of the same model have experienced similar accidents since their introduction?*

SECRETARY FOR TRANSPORT: Sir, the mechanical aspects of the bus figure in the investigations that are being conducted by the police in conjunction with professional staff from the Transport Department. Any lessons that are learned as I have said in my main answer, will be carefully evaluated with a view to seeing whether the lessons learned should be applied in practice.

PROF. POON: *Sir, I think the bus licensing requires that no passenger be allowed to stand on the upper deck, but this regulation is not always strictly followed. In fact, allowing passengers to stand on the upper deck will raise the centre of gravity of a bus, and make the bus less stable on turning sharp corners. So would Government inform this Council what steps it will take to ensure that that regulation is followed?*

SECRETARY FOR TRANSPORT: Sir, Prof. POON is quite right in saying that no standing passengers are allowed on the upper deck. I fear that we may be straying into the area of speculation as to the cause of this particular accident in this regard, but standing passengers on the upper deck is a point which is given attention by police officers on beat duty.

Written answer to question

Environmental and noise problems created by certain trades in residential zone

11. MR. POON CHI-FAI asked: *In view of complaints by the public about law and order as well as environmental and noise problems created by commercial bathhouses, massage establishments and printing/publishing and allied industries being operated in buildings in commercial/residential and residential (A) zones, will Government consider deleting reference to the above trades under the columns:*

'Uses always permitted' and 'uses that may be permitted on application to the Town Planning Board' in the notes attached to Outline Zoning Plans?

SECRETARY FOR LANDS AND WORKS: Sir, the notes regarding uses are parts of statutory town plans and are approved in respect of each draft plan published by the Town Planning Board. I will accordingly ask the board what it thinks of Mr. POON's suggestion.

I should however like to comment that commercial bath houses, massage establishments and printing/publishing businesses are a necessary and have traditionally operated in both commercial and residential areas. Moreover by no means all of such operations give any worries to their neighbours. The board will thus have to consider a balance between the varied interests involved and the implications of any such amendments to the notes.

Government Business

Motions

JUDICIAL SERVICE COMMISSION ORDINANCE

THE CHIEF SECRETARY moved the following motion: That the First Schedule to the Judicial Service Commission Ordinance be amended—

- (a) by inserting, after 'Coroner', the following—
'Principal Magistrate';
- (b) by inserting, after 'Magistrate', the following—
'Special Magistrate'; and
- (c) by adding, after 'Registrar of the Supreme Court', the following—
'Deputy Registrar, Supreme Court Assistant Registrar, Supreme Court'.

He said: Sir, I move that the First Schedule to the Judicial Service Commission Ordinance be amended as set out in the resolution tabled before Members.

As prescribed by section 6 of the Ordinance, one of the functions of the Judicial Service Commission is to advise the Governor regarding the filling to vacancies in judicial offices stipulated in the First Schedule to the said Ordinance. In practice, appointments to the offices of Deputy Registrar and Assistant Registrar, Supreme Court; Principal Magistrate; and Special Magistrate have also been made on the advice of the Judicial Service Commission. The resolution seeks to reflect the de facto position by including these offices in the First Schedule.

Sir, I beg to move.

Question put and agreed to.

FACTORIES AND INDUSTRIAL UNDERTAKINGS ORDINANCE

THE SECRETARY FOR EDUCATION AND MANPOWER moved the following motion: That the Factories and Industrial Undertakings (Carcinogenic Substances) Regulations 1986 made by the Commissioner for Labour on 2 September 1986 be approved.

He said: Sir, I move the resolution standing in my name on the Order Paper, seeking approval of the Factories and Industrial Undertakings (Carcinogenic Substances) Regulations 1986.

These regulations were made by the Commissioner for Labour on 2 September and in accordance with section 7(3) of the Factories and Industrial Undertakings Ordinance, they have been submitted to Your Excellency and are now referred to this Council for approval. The Labour Advisory Board has been consulted and supports their introduction.

The proposed regulations seek to prohibit the manufacture or use in any industrial undertaking of four dangerous chemicals and any of their compounds and any substance containing any of these compounds. These chemicals are known to cause cancer and contact of any kind is dangerous. Exemption from the prohibition is provided for under special circumstances: for example, where such substances are manufactured or used for the purpose of research, testing or investigation.

The proposed regulations also seek to control the manufacture and use of four other chemicals and any of their salts, and the manufacture of two others. On the basis of the evidence so far available, these chemicals are suspected of being cancer-inducing. The regulations require industrial undertakings:

- to take all practicable steps to prevent people employed in a process involving any controlled substance or its salts from being exposed to the risk of inhaling, ingesting or otherwise absorbing the substance;
- to issue written precautionary instructions to any employee who may have to handle such substances;
- to keep controlled substances in closed and properly labelled receptacles; and
- to arrange periodic medical examination, by a competent medical practitioner, of employees handling controlled substances.

Penalties for contravening the regulations vary from \$10,000 to \$30,000, depending on the nature of the offence.

The substances to be prohibited or controlled are used mainly as dyestuffs and are not, as far as we know, manufactured or used in Hong Kong at present. These regulations are therefore precautionary in nature and are unlikely to have any adverse effect upon industry.

A guide will be published to familiarise workers and employers with the contents of these regulations.

Sir, I beg to move.

PROF. POON: Sir, I am delighted that the Government has now proceeded with a motion on the Factories and Industrial Undertakings (Carcinogenic Substances) Regulations 1986. Being a university teacher and research worker in chemistry by profession. I am concerned about the adequacy of safety precautions in the use of carcinogenic substances for various purposes.

In recent years, there have been a number of industrial accidents resulting in explosions caused by chemicals. In fact, besides explosions, another indicator of a serious hazard in the use of chemicals is cancer. Therefore, it is important that more emphasis on the safety aspect should be put on the regulations concerning the use of carcinogenic substances. The regulations aim at prohibiting the manufacture and use of four chemical compounds and ensuring the use of six other chemical substances in the safest practicable manner. No industrial undertakings in Hong Kong will be adversely affected by these regulations since none of the four prohibited substances identified are currently manufactured or used by Hong Kong industries. The regulations requiring proprietors to take all practicable steps to prevent persons employed in the manufacture or use of the six controlled substances from being exposed to the risk of inhaling, ingesting or otherwise absorbing these substances and to appoint a medical practitioner to carry out medical examinations of persons so employed on a regular basis are most welcome. Providing a safeguard in advance of a potential hazard is definitely a movement in the right direction. Prevention is better than cure.

The flexibility provided in the regulation for the use of carcinogenic substances in medical or scientific research, investigation or testing is very sensible. The exemptions indicated in the regulations for research work will ensure that relevant scientific research in universities and tertiary institutions will not be affected by the Regulations. I am glad that consideration was given to research work in drafting the regulations.

With these remarks, Sir, I welcome and support the motion.

MR. NGAI: Sir, I rise in support of the Factories and Industrial Undertakings (Carcinogenic Substances) Regulations 1986 as moved by the Secretary for Education and Manpower. As a matter of fact, I am ready to support any move to safeguard the health of employees in industry provided, of course, that it is reasonable and practicable.

The proposed regulations seek to prohibit the manufacture and use of four chemical compounds and their salts which are known to be carcinogenic and to control the manufacture and use of six chemical compounds and their salts which are suspected to be cancer-inducing. This purpose should be well appreciated by industry as I believe no sane proprietor will oppose the proper promotion of occupational safety and health for workers in industrial environments. I would go so far as to suggest that, provided our resources permit, other cancer-inducing substances used in industry and any other trades should be sought out and put under proper control.

Regulation 6 prescribes safety precautions to be observed by the proprietor where the named chemicals are concerned. I raise this in particular because the requirement that the proprietor should 'take all practicable steps' to meet this regulation led some of us to feel a little perturbed to begin with since what is considered to be 'practicable' is not clearly defined or explained in the regulations. However, thanks to the Administration, we were assured that the proposed legislation is precautionary in nature and is directed against genuinely irresponsible employers. We were also given to understand that the fact that this clause is open to interpretation would provide a further safeguard for the employer should controversy arise. While to some, this explanation may not be entirely satisfactory, the difficulty of getting an exhaustive definition can be easily appreciated. Bearing in mind that this piece of proposed legislation is for precautionary purposes, I would like to suggest that the Administration include as many safety steps to be taken as it can think of in the guide to these regulations for distribution to relevant industrial concerns.

With these remarks, Sir, I support the motion.

SECRETARY FOR EDUCATION AND MANPOWER: Sir, I am grateful to Prof. POON and Mr. NGAI for their support for this motion. This is one more step down the road to improving industrial safety in protecting employees in manufacturing industries from the dangers of hazardous materials. As Prof. POON remarked, 'prevention is better than cure'. Mr. NGAI has pointed out that the use of the word 'practicable' in regulation 6 is not defined. The aim is to deal with situations which are not provided for or anticipated in the regulations as processes and conditions may change. The spirit of this provision is to impose a general duty on the employer in addition to any specific provisions in the law. It is not the intention to impose unnecessary burden for employers and the factory inspectors will do all they can to advise employers on the safety measures that may be required in any particular circumstances. I confirm that the guide to these regulations will include advice on how to comply with these provisions.

Question put and agreed to.

First Reading of Bills**PENALTIES FOR PRACTICE OF MEDICINE AND DENTISTRY BY
UNREGISTERED PERSONS (MISCELLANEOUS AMENDMENTS) BILL 1986****ANTIBIOTICS (AMENDMENT) BILL 1986**

Bills read the First time and ordered to be set down for Second Reading pursuant to Standing Order 41(3).

Second Reading of Bills**PENALTIES FOR PRACTICE OF MEDICINE AND DENTISTRY BY
UNREGISTERED PERSONS (MISCELLANEOUS AMENDMENTS) BILL 1986**

THE SECRETARY FOR HEALTH AND WELFARE moved the Second Reading of: 'A Bill to amend the Medical Registration Ordinance, the Medical Clinics Ordinance and the Dentists Registration Ordinance'.

He said: Sir, I move that the Penalties for Practice of Medicine and Dentistry by Unregistered Persons (Miscellaneous Amendments) Bill 1986 be read the Second time.

This Bill is intended to facilitate the prosecution of offences relating to the illegal practice of medicine and dentistry, and to increase the penalties for such offences.

The need for these amendments became evident as a result of a court case in December 1984, in which the operator of an illegal clinic was prosecuted for a number of offences, including operating an illegal clinic, and illegal possession and use of antibiotics and poisons. The police enquiries leading to this case were the result of complaints by a number of patients, some of whom had suffered serious permanent disabilities after receiving treatment at an illegal clinic. The court case highlighted a number of defects in the existing law. First, although the offences may in some cases be very serious ones, they are only triable summarily in a magistrates' court. Secondly, by virtue of the Magistrates Ordinance prosecutions may be debarred if proceedings do not commence within six months of the offence. Thirdly, the present level of penalties is inadequate to deal with the more serious offences where diagnosis and treatment results in injury to the persons treated.

The Penalties for Practice of Medicine and Dentistry by Unregistered Persons (Miscellaneous Amendments) Bill 1986 seeks to rectify the deficiencies in the Medical Registration Ordinance, the Medical Clinics Ordinance, and the Dentists Registration Ordinance.

Clause 4 amends section 27 of the Medical Registration Ordinance so that fraudulent registration as a medical practitioner becomes an indictable offence and carries a higher penalty. Clause 5 amends section 28 of the Ordinance so that the offences of pretending to be qualified to practise medicine, and of actually engaging in illegal practice are dealt with in separate sub-sections. The first type of offence will continue to be triable summarily but will be subject to an increased maximum fine. Illegal practice will be made an offence triable summarily or on indictment and will be subject to much more severe penalties. In cases where such illegal practice results in injury, it is proposed that the penalty should be a maximum fine of \$100,000 and imprisonment for three years on summary conviction and imprisonment for seven years on conviction on indictment. Clause 6 amends section 32 to increase the penalties for the offence where a person who is not a registered medical practitioner claims to be capable of treating diseases of the eye.

The Bill also amends the Medical Clinics Ordinance. Clause 8 provides that prosecutions relating to offences of managing or practising medicine in an unregistered clinic may proceed by indictment. The penalties are also revised. As in the case of the Medical Registration Ordinance, an additional indictable offence with heavier penalties is created to deal with those cases where the treatment given results in injury.

The Bill also amends the Dentists Registration Ordinance along similar lines.

Sir, I would like to make it quite clear that although the Bill seeks to increase the penalties for the illegal practice of medicine, the provisions will not apply to the practice of traditional Chinese medicine or to practice by registered pharmacists, physiotherapists, occupational therapists, optometrists, medical laboratory technicians or radiographers or to first aid treatment. Nor will Chinese doctors trained in western medicine be affected since they can continue to become qualified to practise in Hong Kong under the Licentiate Scheme.

Sir, I move that the debate on this motion be now adjourned.

Motion made. That the debate on the Second Reading of the Bill be adjourned.

Question put and agreed to.

ANTIBIOTICS (AMENDMENT) BILL 1986

THE SECRETARY FOR HEALTH AND WELFARE moved the Second Reading of: 'A Bill to amend the Antibiotics Ordinance'.

He said: Sir, I move that the Antibiotics (Amendment) Bill 1986 be read the Second time.

This Bill stems from the same case involving the operator of an illegal clinic as the Bill on which I have just spoken, and I will therefore not repeat in detail the justification for it. This Bill seeks to amend section 10 of the Antibiotics Ordinance by raising the level of penalties for the unlawful sale and possession of antibiotics. It also extends the time limit for summary proceedings to be commence from six months to 12 months from the date of the commission of the offence. These proposals are in line with similar provisions for the control of pharmaceutical products and poisons under the Pharmacy and Poisons Ordinance.

Sir, I move that the debate on this motion be now adjourned.

Motion made. That the debate on the Second Reading of the Bill be adjourned.

Question put and agreed to.

PUBLIC HEALTH AND MUNICIPAL SERVICES (AMENDMENT) (NO. 2) BILL 1986

Resumption of debate on Second Reading (29 October 1986)

DR. CHIU: Sir, I rise to support the Bill before us today which aims at enabling regulations to be made by the Governor in Council to prohibit the importation, manufacture, sale, offering or possession for sale of smokeless tobacco products. As I shall indicate in a moment, the Bill and detailed representations thereon have been fully considered by Members. We believe that there are health risks associated with smokeless tobacco and in the interest of the public, we agree that there should be the strictest control over this product in Hong Kong. In deciding on what kind of control should be adopted, thought has been given to the following three options:

- (a) a voluntary agreement with the tobacco companies to restrict the promotion of smokeless tobacco products so that they will not be targeted at young people;
- (b) by requiring the placement of health warning labels on the smokeless tobacco package which warn the consumer that the product may cause oral cancer, gum disease and loosening of teeth; and
- (c) to impose a total ban on the importation, manufacture and sale of such products.

After careful consideration, we have decided that the most severe measure is necessary since we feel that, in this particular case, the protection of health of the public should be our overriding concern, and that the most cautious attitude should be adopted in dealing with matters of this nature.

In considering the above options, we have taken into account the representations against the Bill made by the US Tobacco Asia-Pacific, Inc. which first approached legislative councillors through the OMELCO Duty Roster Member System. In addition to writing to Members collectively and to some of us separately on an individual basis, the company also sent us a large amount of reference material in support of its case. At the request of the company's representatives, a meeting was also held for them to give an oral presentation to a group of Members. The views and submissions of the US Tobacco Asia-Pacific, Inc. have been discussed in detail in the context of the Bill at two in-house meetings.

Sir, before I conclude my speech today, let me point out that the Bill, once enacted, will be applicable to all brands of smokeless tobacco products, irrespective of their manufacturer or country of origin.

With these remarks, Sir, I support the motion.

MR. CHEONG-LEEN: Sir, the representative of US Tobacco Asia-Pacific Incorporation, which has been making representations on this Bill, came to see me yesterday in connection with the letter which the Secretary for Health and Welfare wrote to them yesterday on this matter.

One of the points raised with me by the representative was that the Administration did not provide him as he requested with information to show that the US Surgeon General is on record in support of a ban here in Hong Kong.

If this information has not yet been supplied by the Secretary for Health and Welfare, I would urge that it be done as soon as possible.

I am concerned that if Government does not fully clarify this point in particular, there might be unnecessary misunderstandings that the passage of this Bill could be misconstrued as an anti-US import restriction, as, I am informed, suggested by the representative, and which misunderstanding or misconstruing ought not to be the case.

Certainly Hong Kong believes in and consistently practises free trade principles, and we in Hong Kong have no intention at all to depart from such principles.

Sir, with these remarks, I support the Bill.

SECRETARY FOR HEALTH AND WELFARE: Sir, I am grateful to Members for their careful consideration and their support of this Bill and in particular to Dr. CHIU for his remarks. This Bill is strictly a health measure, which has no connection whatsoever with trade policy as has been suggested by representations made by the US Tobacco Company, one of the major producers of smokeless tobacco. The effect of the Bill and the proposed regulations would be a comprehensive

ban on local manufacture and sale as well as on importation. This will effectively prevent any local manufacturer from starting production here for this or any other market.

With reference to Mr. CHEONG-LEEN's remarks, I will certainly contact the representatives of the US Tobacco Company to clarify the point about the United States Surgeon General because I must confess to be a little surprised that this point was raised with Mr. CHEONG-LEEN rather than myself. In any case, I cannot see that this point is relevant to the question of whether the Bill before Council today represents an anti-US import restriction.

Sir, Members will be interested to know that Hong Kong is not alone in Asia in taking action to stem the dangers of smokeless tobacco as a product with a great potential attraction for the young, for whom it may easily be an introduction to nicotine dependence for life as well as posing a serious cancer risk. The problem posed by this product has now attracted the attention of other countries in similar situations. I'm told at a major world medical conference in Singapore last week, smokeless tobacco was recognised as a serious health risk which is of concern to a number of Asian countries. Several countries in which, like Hong Kong, it is not yet a generally established habit, are now taking an interest in Hong Kong's action. I understood that the Singapore Deputy Minister of Health has stated that his ministry is taking immediate steps to look into the possibility of a ban under their health regulations on similar lines to the measure before Members today. As Dr. CHIU has rightly pointed out, having considered a number of possible methods of tackling this problem we are satisfied that in Hong Kong's circumstances the Bill before Council represents the most practicable means.

Question put and agreed to.

Bill read the Second time.

Bill committed to a Committee of the whole Council pursuant to Standing Order 43(1).

Committee stage of Bill

Council went into Committee

PUBLIC HEALTH AND MUNICIPAL SERVICES (AMENDMENT) (NO. 2) BILL 1986

Clauses 1 to 4 were agreed to.

Council then resumed.

Third Reading of Bill

THE CHIEF SECRETARY reported that the

PUBLIC HEALTH AND MUNICIPAL SERVICES (AMENDMENT) (NO. 2) BILL 1986

has passed through Committee without amendment, and moved the Third Reading of the Bill.

Question put on the Bill and agreed to.

Bill read the Third time and passed.

Adjournment

Motion made. That this Council do now adjourn—THE CHIEF SECRETARY.

HIS EXCELLENCY THE PRESIDENT: As 13 Members have given notice of their intention to speak, I propose to exercise my discretion under Standing Orders 9(7) and 9(8) to allow Members such time as is necessary to complete their speeches, and such time as is then necessary for the Official Member to reply to those speeches, before putting the question on the adjournment.

Care and services for the elderly

DR. HO: Sir, it is a privilege for me to open the debate on Care and Services for the Elderly. The debate is so scheduled that it heralds the coming of the 8th Festival for the Elderly on the following Sunday. Hong Kong's population is ageing and is ageing at a fairly rapid pace. As indicated in the 1986 bi-census, the projected proportion of people aged 60 and above to the total population is roughly 11.5 per cent. Nowadays, we are all living longer than our fathers.

The purpose of this debate is to bring to the attention of the Government the inadequacies of a wide spectrum of services on which the elderly may depend for their well-being. As the elderly have already made their share of contributions to the progress and prosperity of our community, we would like to see to it that they spend their twilight years in dignity, decency and peace. In this debate, there are 13 speakers, addressing on the following topical areas:

- medical and dental services,
- social welfare and community services,
- economic security,
- housing, and
- policy and planning.

Each speaker will make an effort to limit their speech to about six minutes.

Sir, I have been working conscientiously on improving the lot of the elderly single persons living in bed-space apartments. I recall that I spoke in this Chamber in October 1980 and again in March last year about their appalling living conditions. I am heartened to learn that an inter-departmental working group under the aegis of the Secretary for Health and Welfare has been set up in May 1985 to examine ways and means to improve the general safety and living conditions of those senior singletons who live in dilapidated apartments. As I understand it, the provisions in the Fire Services Ordinance and the Public Health and Urban Services Ordinance are of limited application in the abatement of fire risks and in the alleviation of occupancy density in these boarding houses. This Council is eager to know what recommendations have been proposed by the working group and how the Government reacts to the recommendations. A degree of urgency should be accorded to this issue, because the beneficiaries are frail and aged persons.

In parallel to the various housing schemes for elderly people, the Government has imaginatively planned to provide sheltered housing for the elderly in new public housing estates. Those eligible for this new type of accommodation must be capable of self-care. The first project will be at Hang On Estate in Ma On Shan, and will start operating at the end of this year. It will provide accommodation for about 130 senior citizens under the management of a warden. The policy thrust of the sheltered housing scheme is to enable the elderly people to remain active in the community for as long as possible, with the support of a network of services in the vicinity to meet their various personal needs. This objective is commendable and has been well accepted in other countries.

However, the success of this scheme will hinge heavily on the community service provisions at the implementation level. It is not enough to have on the drawing board comprehensive plans and earmarked spaces for different community services. But rather, the sponsors for these community services must be secured well ahead of time, and the actual operation of these services must be carefully synchronised with the moving in of the elderly residents. However, this immaculate co-ordination of community services is hard to achieve in a new town where all facilities and amenities have to start from scratch. Ma On Shan at this present stage of development is far from a full-fledged, self-contained community. It is located quite a distance from the built-up Sha Tin new town, and the transport links between these two places will not be well established for some time. I therefore am afraid that when the sheltered housing scheme starts operating at the end of this year, the elderly residents will find no community

services and facilities in Ma On Shan to meet their needs and therefore will have to rely on the services available in Sha Tin. This will inevitably cause much inconvenience and hardship for the residents who, apart from dealing with their adjustment problems associated with settling down in a new environment, have to cope with personal problems arising from the process of ageing. Their physical feebleness and mobility difficulties would hinder them from taking advantage of those community services across the Tolo Harbour. Furthermore, the enormous task of co-ordinating the various kinds of services is quite beyond the authority of the Housing Department. The good will, commitment and concerted enforcement co-operation of relevant government departments must be sought. Hence, I urge the Government to exercise great care in ensuring dovetailing the service provision with the in-take of these sheltered housing units.

As pointed out earlier, the elderly people are confronted with a wide range of needs arising from ageing. Planning of services must therefore take a wholistic approach in order to be effective. Co-ordination and collaboration among the relevant government departments and community organisations is essential. In order to ensure speedy and full co-operation, the co-ordinating machinery must be vested with sufficient powers and given easy and quick access to the top level of the Central Government. To implement the agreed-upon master plan for the elderly, the departments concerned are, in fact, asked to re-set their departmental priorities in manpower and in resource allocation, thus digressing their efforts from achieving the department's primary objectives. In the interest of efficient implementation, a policy directive from the highest level of Central Government is therefore imperative.

A Central Co-ordinating Committee on Services for the Elderly was set up in 1981, but was dissolved in 1985. In spite of its short life span, the committee had made significant achievements in planning and monitoring the progress of various programmes. In view of the importance of proper co-ordination and of the appropriate level of authority, I propose that a Commissioner for the Elderly, equivalent to the Commissioner for Rehabilitation, be established in the Government Secretariat.

DR. IP: Sir, I assure you I will try to make you feel as if I've only spoken for six minutes. But before I begin, I would like to qualify my speech with the following remarks...

Firstly, my request for additional services for the elderly is in no way shifting the responsibility of the care of the elderly from 'the individual' to that of 'the community'. Chinese as a race is known to pay great respect to the elderly...a tradition of which I am proud. Neither do I intend to turn Hong Kong from a thriving capitalist state into that of a socialist one. What I strive for is a fine balance whereby we pool together our resources to help those elderly who are not fortunate enough to be looked after by a family, while admitting also that even for those who have a family, there are blacksheep among us who will shirk

their pious responsibility. When that happens it is then appropriate for Government to step in.

Secondly, my requests for additional services for the elderly is in no way calling for massive additional government expenditure. The basis for change falls primarily on:

1. a redirection and better utilisation of available resources,
2. a matter of forward thinking and planning, and
3. frequent reminders and public encouragement.

Thirdly, there are other deficient services for the elderly, such as convalescent homes, homes for the elderly, and community health services, all of which my colleagues will be dealing with in depth. Without duplicating our efforts, suffice to say, they have my support.

Sir, our medical services for the elderly is no worse than the medical services we offer to the public in general and it is best dealt with under a medical heading. I will therefore elaborate on three different subjects, all of which, however, are health related. They are:

1. dental health,
2. physical health, and
3. mental health.

But before I leave the subject of medical services altogether, might I say here that the Medical and Health Department has beaten even the Housing Department in giving priority to the elderly. In that in most clinics, all elderly patients over the age of 65 are seen first without having to wait. This practice has been in existence for some 20—30 years ... a good practice I must say, for all to follow!

Dental health

In a community health project carried out by dental students from the Prince Philip Dental Hospital, among the 118 elderly individuals living in the David Trench Home for the aged, 29 per cent were found to be without any teeth, 60 per cent require dentures, 53 per cent have not visited dentists for more than 10 years, and 42 per cent require at least two fillings each. There was also widespread misconception about causes and treatment of common dental diseases and a low utilisation of the meagre dental service available in Hong Kong. Although this study may not be representative of the overall situation in Hong Kong, I don't think it is far wrong. This is substantiated by another project financially sponsored by the Zonta Club of Hong Kong; where dental students, this time with their university lecturers launched into a dental treatment scheme for the elderly at Tai O. After detailed examination there, it was found that a high demand for the provision of denture, a significant need for extraction of roots, and a substantial need for oral hygiene instruction and professional cleansing of teeth and gums exist. It was also found that numerous

elderly people suffer from pain, inability to chew properly and discomfort emanating from their oral status.

What the government dental service offers for the elderly who is not a civil servant, nor on public assistance is confined to (1) free dental extraction. (2) treatment of medically related dental problems while hospitalised, and (3) dental treatment for the purpose of teaching at the dental hospital.

Modern dentistry is primarily aimed at conservation, therefore dental extraction is the least of what an elderly edentulous patient need. Furthermore in modern ambulatory medicine, hospitalisation is the least of what an elderly patient wants. What the elderly desires is a good set of dentures for him to adequately enjoy his food in the last years of his life, and not to have his carious teeth studied but then turned away because it is not suitable for teaching.

I am appealing therefore to Government to look into the feasibility of offering dental service to the senior citizens of our community in the following way:

1. To extend the services of the dental therapist now servicing school children, to the elderly by teaching them oral hygiene.
2. To offer part subvention in the form of a rebate to those existing non-profit making dental clinics of subvented organisations when they offer service to elderly patients over the age of 65 years.
3. Redirecting some of the dental extraction clinic sessions now open to the general public, to service the dental needs of the elderly patients.

These general dental clinics, so called, but which we all know cater for nothing else but dental extractions, are archaic and butchery in the eyes of modern conservational dentistry. For the dentist, they are unpleasant to work in. For those who are turned away because their tooth is not bad enough for extraction, they have two choices, either to return later when the tooth is then bad enough for extraction, or to have their tooth removed anyway although it can be saved. Both alternatives are against good dental practice.

We must have the courage to change such bad practices and turn such useful resources into those of modern dentistry, which is in keeping with the needs of our society.

Physical health

I will now turn to physical health. On the topic of physical health, I would like to say a few words about abuse of the elderly and road traffic accidents involving the elderly pedestrian.

Abuse of the elderly

It hurts me to see elderly persons having to carry heavy weights while doing odd jobs to supplement their meagre old age allowance. If we close our eyes to such facts and do no more, are we not, in a very subtle way abusing our elderly?

The existence of the abuse of the elderly has been well documented in a pilot survey done by the Hong Kong Council of Social Service in 1983. It revealed that among 277 cases of elderly abuse some 65.5 per cent of cases occurred in public housing estates, and 74 per cent are widowed. Bad or poor relationship with family exists in 89 per cent of cases. Some 90 per cent of those abused have few friends or visitors of less than once per month. 43.5 per cent of these cases were over 75 years of age. Astonishingly, don't think that only the disabled elderly are subject to abuse, because some 63 per cent of these cases are able bodied men and women!

46 per cent of the abuse are instituted by daughters-in-law and 34 per cent by sons.

The form that abuse takes is through neglect in 35.5 per cent of cases, frank physical assault in 28 per cent of cases, forced to work in 21.5 per cent of cases. treated as a human ball in 17.2 per cent of cases, and abandoned in hospital, street or police station in 17 per cent of cases.

It is true that Chinese families on the whole respect the old, but we must frankly face the reality that such elderly abuse do exist, be aware of it, find ways and means of alert and co-ordinate services to protect and offer assistance to the elderly who are being abused.

I am particularly concerned about my estimate of a wider existence of apparently 'mild' cases of abuse which goes unnoticed, such as when an elderly relative is treated as a cheap pair of hands and ask to perform, without rest, fairly laborious household chores. In return they are given a bedspace. three meals a day and an option to stay with the family. There is the possibility that the content of the study is only the tip of the iceberg. Let us make sure it is not!

I consider that it is now appropriate for Government to create a hotline service whereby any good citizen, neighbour or relative can telephone to seek urgent help on any matters related to the elderly. Such matters can then be investigated into and services for the elderly co-ordinated to offer remedy to pressing problems. Those who seek help may have been subjected to a range of abuse from frank physical purposeful ones which must be less common to subtle abuse as in the case of an overworked elderly relative in a financially stressed family. It may range from a berserk mentally deranged elderly suffering from dementia of old age, to a bed-ridden elderly abandoned at home by the working members of the family who have no alternatives. Both situations indicate the inability of the family to cope and they are the early warning signals of elderly abuse.

I would like to quote a comment made by the Attorney General in his speech on the Domestic Violence Bill in which he said, 'The known figures may be relatively small, but I take the view that this ... would be justified even if

there was only one case where the victim of violence wished to take advantage of its provisions.' The same goes for what such a government hotline service can offer in the handling of elderly abuse.

Road traffic accidents

As regards to road traffic accidents, it is not uncommon nowadays to see elderly hemiplegics limping across the road at dangerous cross-roads. They do that because it is a short cut to their destination. It then really becomes a short cut to their life! Education of the elderly on transport safety has its values, but we must understand that the alternatives open to them to get to their destination may well be a detour of a distance a few times that of the original and which may involve climbing up and down one or more foot-bridges.

It is therefore not surprising that in the 1985 statistics on pedestrian casualties, 18 per cent occurs in the over sixties. Worse still is that, in the same year, among 220 pedestrian deaths, 142 are senior citizens over 60. What I believe is worrying to the Road Traffic Section of the Royal Hong Kong Police is that while pedestrian casualties has fallen from over 9 000 to just over 6 000 per year between 1981 and 1985, pedestrian casualties over the age of 60 has not fallen accordingly and is staying over the one thousand mark. From what I have said earlier, we can understand why! For Members' interest, the peak time of accidents are around noon and 5 pm.

I have no perfect cure for our traffic problems in Hong Kong but on top of better design of roads and facilities for crossing and education on road sense, it may not be a bad idea to follow what the Canadian Chinese are doing for their senior citizens. Similar to how traffic police and road workers identify themselves by wearing a yellow and orange fluorescent clothing while working on dangerous bends, we can likewise custom design a useful conspicuous apparel to be worn or carried by our senior citizens to alert the traffic. I have here an example from the Chinese Canadian Road Safety Association in Vancouver, for our reference, a green conspicuous bag that the elderly can carry and a glittering logo which says 'B.C.'—Be Safe. For this idea to be successful, the design of the apparel must be pleasing to the elderly and useful for him to go about his daily activities. For it to stand out enough to alert the motor drivers, it must be of a bright colour during the day and fluorescent in the night, and the design must be made to identify with the elderly. A social service organisation, together with the Royal Hong Kong Police, has just today launched such a competition to gain public awareness. I look forward to the outcome.

Mental health

I now turn to mental health. In the normal process of ageing, a person becomes more clumsy in his movements and therefore becomes frightened of travelling lest he falls. He begins to see less well and is therefore deprived of the pleasure we get from normal vision. He becomes hard of hearing and often misinterprets

what is said to be critical of him. All in all, it becomes more difficult for him to understand others and the fast pace of our changing society. It also becomes more difficult for us to understand him! And he knows it! He becomes withdrawn and temperamental, making himself even less attractive to be with. He begins to think and talk to himself and then withdraws into a world of his own, misinterpreting the whole world to the point of being suicidal. All this can happen in differing degrees to anyone of us when we age. And it even happens to some of us now! Possessing good education, wealth, good family ties and the like do not exempt anyone of us.

What is therefore most important is the maintenance of good mental, psychological and emotional health in old age by preventing or reversing the vicious cycle I have earlier described. To do that, elderly people must get out of the house, meet people, keep in contact, keep in tune, enjoy the leisures of life, feel useful and contributory, ... and be contributory. We must as a community do everything we can to ensure that the elderly persons can do all these things. We must ensure that they can move about safely despite their physical disability. We must make sure that their failing vision is compensated with glasses. We must make sure they are supplemented with a hearing aid. We must make sure that they get to enjoy all the leisures of life that we can, at times when we are working and unlikely to be competing with them to use such facilities.

In Hong Kong, we have in no way exhausted all the facilities we can offer the elderly, here are some examples on how as a community we can encourage our senior citizens to keep in tune with the real world!

1. The Ocean Park should allow free admission to elderly over the age of 65 years, on all weekdays when most people are working.
2. There should be a minimum of seats reserved free for the elderly in the Urban Council and Regional Council theatrical and concert performances during the day and when it is known to be undersubscribed. I am directing this to Mr. Hilton CHEONG-LEEN, Mr. Kim CHAM and Mr. CHEUNG Yan-lung for their consideration.
3. It would be encouraging if buses, ferries, trams, MTR, and in the future LRT were to step in voluntarily and without financial commitment by Government to offer free rides for elderly over the age of 65 years during off-peak hours between the hours of 10 and 11 am and between 3 to 4 pm for the purpose of diverting the senior citizens from the rush hour traffic. This is advantageous equally for the elderly, for the public and for the transport companies alike.
4. Senior citizen cards should be issued to all those aged 65 and over, which clearly states their entitlement.
5. To ensure that the elderly get preferential treatment on boarding all transport facilities, such as taxi, buses, MTR and LRT and so on where applicable, special entry point for the elderly and handicapped should be

considered as part of future planning. As part of public education and campaign, sign posts to remind the public to make way for the elderly and handicapped should be strategically placed at points of crowd collection. There should be seats designated for the elderly and the handicapped on all public transport facilities and that the general public is told to use these facilities only if they are not taken by the elderly and the handicapped. I am sitting appropriately next to Miss Maria TAM, the chairman of the Transport Advisory Committee. I'm sure she is taking note on this point.

6. And lastly, many other similar examples which I shall not elaborate further for lack of space.

Sir, life expectancy study between 1971 and 1978 has revealed an increase of five years for men and three years for women, to ages of 72 and 78 years respectively. There is now over half a million people over 60 years of age and there will be three quarters of a million by 1991. In the year 2025, there will be 1 million elderly people in Hong Kong. The latter statistics include all of us sitting here in this Council today.

With these concluding remarks, Sir, I look forward to working towards a better quality of life for the senior citizens of our community and to offer them the respect we badly owe them for making Hong Kong what it is today!

4.13 pm

HIS EXCELLENCY THE PRESIDENT: At this point, Council might like a short break.

4.35 pm

HIS EXCELLENCY THE PRESIDENT: Council will resume.

DR. LAM (in Cantonese): Sir, in recent years there are changes in the way of life in Hong Kong and the traditional Chinese family system has been replaced by the two member nucleus family. Improvement in medicine together with social progress and improvement in the standard of living means that people are enjoying longer life. Ten years ago, old people aged 60 or over numbered 400 000 but now the numbers have increased to 640 000. The increase in the number of old people means that the problem of old people is becoming even more noticeable. In the past five years, the rate of old people committing suicide has increased from 143 to 206 annually. This reflects that old people have to face a lot of psychological problems other than those in their daily lives. Therefore, we must urgently and comprehensively review and formulate new policies for old people. In the past, various reports on policy for old people are based on 'care by the family' to build a 'caring society' and to provide various social services and measures for the old people so that they would recognise them-

selves as being a member of the society. The 1985 review of the five-year plan for social welfare development in Hong Kong and objectives formulated after the review of the 1982 programme plan of services for the elderly reflects that services provided for elderly people are still backward and inadequate, for example, there is a shortfall of over 4 000 when the homes for the aged and care and attention centres are added together. It is estimated that over 1 000 old people are abandoned by their families and approximately 30 000, because of financial reasons, are living in very poor conditions. Centres for the aged and community centres for the aged, both forming the backbone of community services provided to old people, are listed under category II service, with subsidies provided to cover 70 per cent of approved expenditure. Therefore there are serious problems in our policy towards the elderly as well as the services, both in quality and quantity, provided.

On the other hand, there is also a lack of communication between the authorities and the voluntary agencies and this affects improvement plans for the aged. Therefore I suggest that the authorities should set up a centralised committee on policy for the aged as soon as possible. Its members should comprise various government departments and voluntary agencies, and this should replace the old system which is the sole responsibility of the Health and Welfare Branch. The terms of reference should be as follows:

To redefine areas of particular concern, to provide comprehensive medical assistance, personal and family counselling; social services and financial support to the aged having regard to the social, political, economical and environmental condition in Hong Kong.

In addition to that, the number of old people who are physically handicapped and who require long-term treatment are gradually increasing. Many of them receive old age and disability allowances and public assistance. But this minimal grant cannot be adequate for their health. Therefore I have the following suggestions:

- (1) There should be community nursing scheme which provides regular medical check-up and health education for old people to teach them suitable exercise and to take healthy food in order to prevent sickness and to improve their health.
- (2) The geriatric wards, both in terms of facilities, medical staff and budget, only take up a small ratio in the overall medical plan. In those wards, there is a shortfall of 1 583 beds for the aged and by 1990, the shortfall will increase to a 1 670, and by 1995, the shortfall will further increase to 1811. Therefore, the Government must change and improve the policy as soon as possible to meet this urgent need.
- (3) The Government should actively expand the day-time hospital for the aged and should also increase the number of clinics, psychiatric wards, community nursing service and medical scheme for the aged. The

student medical scheme has been carried out for many years. Why are the old and the weak not provided with suitable medical scheme? Is the Government prejudicial against the old people?

Sir, birth, old age, sickness and death are inevitable processes in life. Hospice service is a matter of concern and is very important. The hospice service support groups which comprises of medical personnel, counsellors and members of the clergy can offer the patients and their families support, consolation and encouragement. The Government should, therefore, further expand hospice service to enable the old and the sick to enjoy the remaining days of their lives in dignity. If the Government could set up a complete central provident fund, then we would certainly reduce the financial and psychological burden of old people.

Sir, in a materialistic society, people will consider old people a burden of the society. But we should not forget that old people spend their life working for the prosperity of the society. Therefore we should look after them and help them to have a healthy, stable and happy old age.

MR. LIU (in Cantonese): Sir, in the policy debate last week, I put forward certain proposals concerning welfare services for the elderly and requested the relevant government departments to give them serious consideration. Now, I would like to make some brief remarks to further support my request.

At present, there are about 600 000 elderly residents who are over 60 years old in Hong Kong, representing 11 per cent of the total population. This is a relatively high ratio. Elderly people have made valuable contributions to the society, and it is the society's responsibility to provide an appropriate level of welfare services for them. The Government's major policy on elderly services was set out in the 'White Paper: Social Welfare in the 1980s' published in 1979. After a lapse of seven years which brought about considerable social changes and in view of the growing number of elderly people, it is now necessary to review the various welfare programmes contained in the White Paper. Both the allocation of resources and the overall concept of elderly services should be re-considered to facilitate the formulation of a new set of elderly programmes better suited to the practical situation.

Firstly, the policy on allocation of funds formulated seven years ago is obviously inadequate to cope with the demand for elderly services today because of the growing population of elderly people. As a result, there is still a serious shortage of facilities such as community centres, care and attention homes, and hospital beds for the aged. The Government should consider allocating additional funds to improve the situation.

Secondly, the voluntary agencies have all along played an important role in providing welfare services for the elderly. The Government should provide these agencies with additional financial and administrative support.

Moreover, from a social point of view, it seems that as a result of rapid social development, our elderly population have been forgotten. They are neglected by the society and are not properly cared for. The problem is aggravated over the past few years by the increasing number of Hong Kong people seeking emigration overseas who decide to place their elderly family members in hostels or private homes where they are left unattended in a pitiable situation. If the aged are not properly taken care of, the situation will develop into a social problem. In this respect, I fully support the Social Welfare Department and the relevant voluntary agencies in their efforts to promote family life education in recent years. I am also glad to see that the education authorities has been placing much emphasis on the promotion of moral education in recent years. I believe that only through a good family education can the public appreciate the invaluableeness of elderly people and attach more importance to the promotion of the well-being of the elderly.

As for schools, the various activities organised by the students' social services groups such as visits to hostels for the aged and the presentation of entertainment programmes and gifts bring immense joy and comfort to the elderly. Such activities are meaningful in that they not only uphold highly esteemed virtues in the Chinese tradition of extending one's care for his own aged parents to the aged people in general and respecting old people and honouring the virtuous man, but also cultivate among the students a sense of care for their fellowmen. The spirit of these activities should be affirmed and encouraged.

Finally, I would like to remind the Government to consider implementing a preferential scheme which entitle the elderly (over 70 years old) to use public transport, cultural and recreational facilities free of charge or at a special rate of charge.

MRS. NG (in Cantonese): Sir, according to the 1986 bi-census, the average population growth rate in the past five years is 1.6 per cent, the lowest in the past 25 years. The medium age of our population has increased to 29 years old, reflecting a phenomenon of ageing in our population. The Hong Kong Government should therefore strengthen the provision of services to the elderly people.

Life in Hong Kong is stressful and tense. Members of the family have to work hard in order to earn a living. So how can we expect them to look after the aged who are in their 60s or 70s. So many members of the younger generation are beginning to ignore this group of people who have contributed to our prosperity and progress.

To begin with, the income of the old people will correspondingly reduce after their retirement. The Administration therefore should model after the practice of the western countries and give various concessionary scheme for elderly people. As a matter of fact, I am happy to say that many organisations in Hong Kong are providing elderly services, for example, free medical check-ups and give concessionary rates for maxi-cab services. Even shop operators are giving

concessionary rates to old people. These schemes are organised by the district boards and are supported by local people. Their initiative to help the elderly deserves our praise and promotion. At present, 13 out of the 19 district boards are providing such services. As they are conducted by the various committees under district boards, a lot of manpower and resources are wasted and efficiency cannot be guaranteed. If the Central Government can co-ordinate the provision of such services and concessionary schemes for the elderly, they will be run more efficiently and on a larger scale.

Secondly, housing. The Housing Department should provide more housing units for elderly singletons to enable those who are in need and those who can look after themselves to have a place to live. This will reduce family disputes or disputes between elderly people living together.

Thirdly, social life. The Hong Kong Government and various local organisations should provide different kinds of activities for the old people. Recently when I went to Australia to attend the Commonwealth Parliamentary Conference, I saw a group of old people performing happily on stage. This kind of activity provides entertainment to the public and help the elderly to feel happy and young.

Fourthly, hospital services. Although we have three subvented hospitals in Hong Kong with 1 015 infirmary beds, old people who suffer from chronic illness will be left unattended in the hospital if their families are unable to take care of them. That's why the authority should increase the number of bed in the homes for the aged and in infirmaries. According to my understanding, there are 4 700 old people waiting to be accommodated in homes for the aged and infirmaries. The Government should speed up the building of these homes and infirmaries.

The Social Welfare Department has formed a special working group, with members from the Health and Welfare Branch and representatives from the Hong Kong Council of Social Service and private hostel operators to look into the code of practice of the various privately run homes for the elderly. From February to June this year, the working group had conducted six meetings to look into the details of the code of practice and in mid-June, they submitted a report to the Director of the Social Welfare Department and later on in October, the Social Welfare Department announced the details of the code of practice. Though the code of practice is rather detailed and clear, yet only 60 per cent of our private homes for the elderly can conform to the stipulations. The remaining are unable to comply and some of them may wind up or operate on a deficit basis. The code of practice is a very good proposal. However, if some of the private home operators can learn from foreign experience, look into the special needs of Hong Kong, and learn from other homes for the elderly set up by other welfare organisations, I am sure they can provide better quality services for the old people under the guidance of the Social Welfare Department.

DR. CHIU (in Cantonese): Sir, Hong Kong needs a comprehensive policy on elderly services and a long-term plan so as to adapt to the demands of different times.

Social welfare services basically are for those who are the least able to help themselves. The least able to help themselves are the old people who are lonely, sick, poor and do not have sufficient to eat and to wear. Can our social welfare services fully satisfy the needs of these people?

Every winter when there is a sudden drop in temperature, a few elderly destitutes may succumb to the dreary weather. Two months ago, when there was an epidemic of cholera, people only discovered the body of a lonely old cholera patient several days after her death.

These examples reflect that behind our stability and prosperity, in the dark corners and inside moist squatter huts, there are many lonely or sick old people waiting for our help. They are uneducated and are ignorant to social welfare services information printed in the newspaper or magazines; they do not have television and radio sets; they do not know the availability of typhoon emergency shelters, hot meals and blankets. These people are most in need of social welfare services but the society has forgotten and ignored them.

The Government had formulated a programme plan on elderly services in 1977. The objective was to provide home care, financial assistance, housing, community supportive services and medical services for the elderly and their family members, to enable the aged to continue staying at home and to maintain their roles in the families and community. Unless there is an absolute need, old people would not be encouraged to leave their families and receive institutional care. The programme plan for elderly has been implemented for 10 years. Are the services provided under the concept of home care adequate? Has the objective of home care been met?

Living environment

When we promote the home care schemes, does the plan tie in with other related policies and needs? We call upon the people to take care and to provide for the old people, but have we realised that the facilities and application procedure for public housing and home ownership flats must be in line with this aim? Our policy is to encourage and provide for the nucleus family. Does this policy run counter to the concept of having old people at home? If our elderly have been ignored in our living design, no matter how hard we encourage a home care concept, our effort will be futile. In recent years, the Housing Department gives priority to households with old people. This is a good example of active promotion of home care.

Financial support

The existing social welfare security scheme is non-contributive and is fully financed by public funds. Thus public assistance recipients do not get much financial support. In times of inflation, their money is far from adequate. Even the elderly living in old aged hostels wish to be transferred to old people hostels where meals are provided.

Old people who cannot depend on family members can only afford the rent for a bed space. This is a cause for 'caged old people'. Many elderly who can still work will try to earn their own living for they do not want to accept public assistance. Therefore, even though their employer offers them very low wages, they still accept the job in order to earn a living.

To help old people to remain in the community, we should provide vocational counselling, increase job opportunities and set up sheltered workshops for them.

Medical services

Due to deteriorating health, old people need more medical care. The present supply of care and attention homes and day care centres fail to meet their demand. Besides, these centres do not have sufficient numbers of physiotherapists and occupational therapists. Day care service centres for the aged should also be strengthened. For old people who do not need constant medical attention, there is the community nursing scheme. However, due to limited resources, transport arrangements are not made for community nurses who have to travel from place to place, thus wasting a lot of time.

Some old people require constant medical check-ups. But charges for home visit from doctors are very high, and family members can only take turns to bring them, by public transport, to see the doctor. And if these family members are working adults, they must take leave for this purpose. Therefore they prefer to leave the elderly in the hospital for a long time. Some family members do not even wish to take back the elderly and give false addresses and contact telephone numbers.

I know that the Medical and Health Department and Social Welfare Department are presently conducting a survey on the issue of old people occupying hospital beds and the findings will be published in the near future. I hope that the findings will show that the problem is less serious than we imagine.

Long-term planning and policies towards the elderly

The OMELCO Health Panel has reviewed the problem of old people occupying hospital beds and finds that the problem is not difficult to solve. We can trace the whereabouts of the family members and forcibly return the aged to their care. However, our concern should be the fate of an old person who is returned to his family which originally deserted him. What kind of life will he face? How will his family member treat him?

The problem of old people occupying hospital beds for long periods is the consequence of the underlying problem for the elderly. If we cannot solve the elderly problem, the problem of their occupying hospital beds will continue to exist.

Old people have various needs. They require services from different professions and different government departments. Therefore, the Social Welfare Department, the Medical and Health Department, the Housing Department, the Transport Department and the voluntary agencies must work together and deploy senior staff who are enthusiastic about community affairs to work out a comprehensive policy on elderly services and a long-term development plan with a view to building up a caring society. This must be carried out promptly.

The programme plan on elderly services has been implemented for 10 years. It is now time for a review and the authorities should seriously consider my proposals so that the elderly problem can be solved.

If our elderly services can merely prolong the life of our old people without giving them the dignity and meaning of living, such provisions serve no constructive purpose.

Sir, having said that I conclude my remarks.

MR. LEE YU-TAI (in Cantonese): Sir, when the sun sets, it creates a beautiful scene; but when an old man is left to live his final years in misery, it will be a tragic one. Stability and prosperity serve as a propellant to economic development while giving rise to many social problems as well, for example indulgence in material comforts, the alienation of human relations, deterioration in morals and the emergence of heretic cults. As a result of an overall increase in the affluence of society and the improvement in medical services, the life expectancy of the people has been prolonged and the problem of old people emerges. If certain families are unwilling to take care of their elders and social resources could hardly afford to do so, then aged people are being confronted with social indifference and rejection, and would have to live their final years in misery.

As a matter of fact, certain government policies really do not encourage care for the elderly, for example the dependent parent allowance, which only allows one offspring to apply for the maximum amount, or else the entitlement has to be split among all offsprings. This seems to encourage the care of parents by one single offspring while others need not bother, or each offspring needs only give some form of symbolic care, with no one undertaking major responsibility. Recently, the commitment of suicide by, and the maltreatment of aged people has aroused much concern. Maltreatment generally includes being beaten by family members, prohibited from eating and refused money for expenses and so on. Old people therefore, deeply feel that they are being abandoned by their family and society; subsequently, they also feel tired of themselves, with a sense of 'not being allowed to stay on earth when they are grey-haired'. Plentiful

blessings, longevity and a lot of sons have been the traditional wishes of Chinese society and looked upon as signs of happiness. But nowadays, long-lived old people often become unwelcomed persons among their various sons, being thrown from one son to another. Since none of the children is willing to accept them, they often become a rolling 'human ball'. Longevity and a lot of sons have now become a tragedy rather than happiness.

The second half of a restaurant's couplet reads like this: 'Most customers bring along their children to tea, few bring along their parents. Who has ever seen eaves-drops running upwards?' It is customary for parents to raise their children while the latter support their own offsprings. Young people and children certainly receive more family attention than old people. The Government has set up a Central Committee on Youth to co-ordinate policies on youths, but there is no co-ordinating body for elderly people. In foreign countries, elderly people usually enjoy half-fare in using public transport. The Hong Kong Government spends some \$200 million each year on subsidising the Student Travel Scheme. But except for some maxicabs, elderly people in Hong Kong enjoy no privileged treatment at all. Therefore I propose to set up a committee on elderly services to take charge of co-ordination and planning in this respect. In fact, elderly services involve the Housing Department, the Social Welfare Department and the Medical and Health Department. If employment counselling and elderly education are also included, then we must add the Labour Department and the Education Department. Co-ordination therefore, is indispensable.

The essential services for the elderly include hostel service, community support and medical service. Hostel service is of course, inadequate, and should be improved in proportion to the population as soon as possible. Support services are equally important, for example, home help and community nursing service should be enhanced, so that some families might be willing to accept old people under their roof. This is because they may not require old people to live in hostels, but they are only unable to attend to them regularly or give them medical treatment. If more home help or community nursing service could be provided to solve these problems, more families would be willing to live with their elders, and thus help to relieve the demand for hostels. Moreover, the construction costs for hostels are fairly expensive whereas support services are relatively cheaper.

Although a lot of old people are either sick or weak, the majority of them are healthy. Their only wish is to enjoy a meaningful and happy life. I propose that employment counselling should be reinforced, so that some retired people could still take up some work, for example, half-day, part-time jobs. The establishment of a central employment registry for elderly people could also be considered, with the responsibilities of liaising with employers and locating old people who are looking for part-time jobs. On the other hand, adult education for elderly people should also be developed. Many advanced countries have set up universities for the elderly. The four-year post-secondary course for the elderly

run by the Christian Nam Wah College is worthy of support and encouragement. The universities and polytechnics should also organise similar courses. The proposal to use the temporary premises of the City Polytechnic as a centre for continuing education should be accepted, together with considerations for including courses and activities for retired people. Most elderly people hope to continue their normal social life, so that they could still find satisfaction in their final years and enjoy their 'golden age', and not waiting solitarily and idly for the 'calling from above'.

MR. LI: Sir, I am privileged to serve as chairman of the St. James' Settlement, as a member of the Advisory Board of the Salvation Army, and as a member of the Board of the Community Chest of Hong Kong.

In over 16 years of voluntary service, I have seen a good deal of what I call 'creative accounting' as practised by voluntary agencies. It is not creativity by choice, but as a direct result of the Government's inflexible subvention policies. Therefore I welcome the recent call by the Secretary for Health and Welfare that the fundamental principles of these subvention policies should be reviewed.

It is high time the Government took a critical look at the shortcomings of its subvention policies, and dismantled its present system of subventions, which is the old 'see-saw' system rather more cleverly disguised. The present system has created a 'no win' situation for the voluntary agencies which are caught in the subvention cross fire between the Social Welfare Department and the Community Chest. The agencies are the victims of a continuous 'more or less' battle over subventions, a battle that benefits no one, least of all the elderly.

Agencies need fresh funds to pioneer new programmes and to provide an improving standard of service. Yet the present subvention system discourages all thoughts of progress and innovation in social services because our agencies simply cannot afford large deficits, given their already hand-to-mouth existence.

I question the wisdom of a subvention system whereby our voluntary agencies are allowed no room to grow, and have no certainty that subsidies will be guaranteed in the long term.

Now let me get down to basics.

Under the Social Welfare Department's category I classification, personal emoluments for day care and home help services for the elderly are entitled to full subvention. However, the subvention sum is calculated according to a model system, with the result that the agencies usually sustain a deficit. I urge the Government to be more realistic in the costing the model system, and to take varying salary scales and services into consideration.

At present, under category 2A, personal emoluments in regard to social centres for the elderly are entitled to only 70 per cent of the model subvention. Realistically, this level of subvention should be raised to at least 100 per cent to lessen the agencies' burden in paying staff salaries, and to eliminate the need for them to turn to the public and to the Community Chest for the balance in funds.

In running its five social centres and two multi-service centres, the Salvation Army incurred a deficit of HK\$636,000 for the 1985-86 financial year, and will continue to operate at a loss as long as these facilities and services receive second class treatment from the Social Welfare Department.

Currently, Social Welfare Department subventions for agencies' programmes and administrative expenses are reviewed annually. Last year, St. James' Settlement, for example, received a 2 per cent increase in funding, or less than Hong Kong's annual rate of inflation, which averaged 3.2 per cent in 1985. We need a much more realistic annual assessment by the Social Welfare Department so that agencies can receive increases at the very least on a par with the rate of inflation.

The previous practice of the Social Welfare Department was to pay out subvented sums on a quarterly basis, with bank interest on the unspent portion being retained by the agencies. The Government's decision that the bank interest should revert to the Social Welfare Department is not in itself objectionable. However, this decision increases the administrative and accounting workload of the agencies, in performing the services which are not subvented by the Social Welfare Department, and constitute a sheer waste of manpower.

Therefore, it would make more sense for the Social Welfare Department to pay out subventions on a prompt monthly basis rather than putting the agencies to a great deal of extra work for no extra returns. Alternatively, the department should provide funds to enable the agencies to carry out the administrative and accounting work involved in repayment of interest on subvention funds.

Voluntary agencies which do not practise creative accounting are being unfairly penalised by the present system of subventions. I call on the Government to urgently rethink and review its present subvention policies, and to place care and services for the elderly where they rightfully belong—at the top of our list of priorities in Hong Kong.

Sir, with these remarks, I support the motion.

MR. CHUNG (in Cantonese): Sir, according to statistics, of the 5.5 million people in Hong Kong, those aged 60 or over will increase from the present 10 per cent to 12 per cent in five year's time. In other words, some 650 000 old people will enter into retirement age.

Retirement pension scheme is not popular in Hong Kong. Throughout the territory, only 20 per cent of the old people are enjoying the benefits of a pension scheme either from the Government or from some private organisations. Some of the remaining old people are badly in need of care and attention. Though the amount paid under the recently implemented long service payment scheme will increase in proportion to years of service, yet the amount is not sufficient for the elderly.

Owing to population and living environment problems, many big families give way to the growth of nucleus families. As a result many old people are left unattended when their children left them after marriage.

The budget allocated by the Government to subsidise the needs of the elderly is increasing. This proves Government's concern for the old people and a sign that Government is ready to make up for the inadequate service to the elderly in the past.

The Government has some protection schemes for people aged 60 and above. For those who reached 70 years of age, they can apply for \$255 old age allowance. If there is such need, they can also apply for \$510 public assistance and another \$405 as rental subsidy.

Under the government policy for the elderly, the Government has decided to choose a site, with medical facilities nearby, to implement sheltered housing for the elderly. The requirements for applying for these sheltered housing are similar to the requirements of the Housing Department's requirement for preferential accommodation to the elderly.

From a practical standard, \$200 to \$500 odd dollars are not enough. I feel that we should increase the dependent parent allowance and we should increase public assistance and allowances for the elderly. We should publicise the increase in dependent parent allowance so that both parents and children will be aware of the arrangement and can cultivate better relationship.

I feel that in future our service to the elderly should be a positive form of social rehabilitation policy instead of a passive policy just providing relief. The principle of the new policy is to help people 60 and above to feel confident to enjoy living independently, and to pursue their aspirations in life.

The first thing the Government should do is to improve and expand the provision of service in community nursing centre. A present, we have only 45 community nursing centres and the scope of service is inadequate. If we are to expand the number of centres and to increase the volume of service directly, we will be able to improve the health of the old people and when their health is good, the demand for beds in hospital will be reduced.

I suggest we should have a comprehensive health scheme for the elderly. Medical associations, community nurses, medical social workers and other voluntary agencies can participate and co-operate in order to provide assistance to the elderly under the scheme.

The second thing which we should do is to develop old people centres in proportion to the population. The centres can see to it that the elderly receive home and community health care. All elderly people joining the centre can return home at night time and enjoy the company of their relatives. Through Government's support, we can rent some units in private buildings as centres for

the elderly. These centres may have a canteen which can accommodate 100 people, a sitting room, a reading room and some rooms for cultural and sport activities. We can consider a reasonable entry fee and money subscription so that these old people will have a sense of belonging.

We should avoid using the word old people for these elderly centres. We can call them pine garden or cypress garden to allay the fear of the old people on the concept of getting old. These centres can build up friendship and confidence among old people. The Government is now planning an elderly centre for about 30 000 people. I think the easiest and quickest way to effect this plan is to have the centre set up in rented accommodation.

Thirdly, we should do something on the private homes for the aged. We should look into the staff, the care and security facilities of these private hostels. There are 109 privately operated hostels for the aged providing 3 400 space. It is true that the Government has a code of practice for privately run hostels yet whether these code of practice are followed depend solely on the self-discipline of the individual operators. If the operators do not follow the regulations, no legal action will be taken against them. This is mainly because privately run hostel for the aged are not required to register and staff of the Social Welfare Department can gain no access to these private hostels. The code of practice for private hostels for the aged only lists out the minimum standard in terms of living space, the body density and the ratio of health care personnel to the number of old people. These standards are far below the standard required for government subsidised hostels. Thus, those who can afford to live in private hostels are in fact getting a living environment and service which are far below the standard of a government subsidised hostel. I feel that a code of practice, without the backing of relevant law, may create a very unsatisfactory phenomenon. I suggest that, before the Government can provide more subvented hostels for the aged, we should provide more subsidy and allowance to old people living in private hostels as well as subsidy and encouragement to private hostels. For those private hostels which require improvement, we should give them assistance and guidance.

As a matter of fact, most people at 60 years of age and over are still energetic. They are just forced to retire and in most cases they retire but are not willing to stay idle. Through a positive form of help to these people, I am sure this old generation will give us their valuable experience and knowledge and be a valuable assets to our society. They can work with the younger generation and thus benefit the whole community.

Without the contribution of the older generation, the younger generation would not be able to flourish. I feel that a set of positive policy for the aged will definitely help to preserve our Chinese tradition of respecting the elderly and also help to maintain social stability and prolong our work force. We should have a new social policy so that old people in Hong Kong will become an invaluable asset.

My conclusion is we should provide the best form of service and protection to old people. In short our old generation should maintain a healthy life and their confidence should be restored so that they can spent their twilight years happily.

MR. HUI: Sir, the growing problem of the aged has aroused world-wide attention since the beginning of the 1980s. A recent United Nation's Economic and Social Commission for Asia and the Pacific generally known as (ESCAP) experts meeting, which I had the honour to take part, urged the participating countries to formulate global policies to tackle the emerging issues related to the ageing of the population. Sir, this must be seen as writings on the wall.

In Hong Kong, the elderly population aged 60 and over has increased from 150 000 or 4.8 per cent of the total population in 1961 to 653 200 or 11.48 per cent in 1986, and is expected to reach 12.6 per cent by 1991. Due to increasing nuclear families, widening generation gap and eroding families ties, Hong Kong has a disproportionately high percentage of lonely elderly. Industrialisation and urbanisation have also brought about diminished income and social role for the elderly, and many of Hong Kong's lonely aged are vulnerable to living in poverty. Furthermore, world demographic trends and population projections show that the aged dependency ratio, that is, the number of elderly who depend on working persons for livelihood, will rise so sharply that by the year 2 000, resources required to contend with it will be beyond our means. At a time when retiring persons are fast becoming a major group requiring our attention, there is yet no special consideration given to the design of relevant policies and programmes to meet the changing needs of our elderly population. What we have are piecemeal social welfare services that can hardly match the prolific growth of the problem of our aged.

Community support services

In Hong Kong where cultural heritage has a strong hold, the family is still the sole provider of personal care for the elderly. However, with more and more women joining the work force, the family can no longer be relied upon as the primary care giver. Family planning trends, coupled with increasingly materialistic outlook of our young people nowadays, have made it unrealistic for old people to count on their children for total support. A survey conducted in 1984 shows that families that took care of their elderly members were supplying them with only bare means of living. Although the current social work trend is to enable the elderly to remain as long as possible as members of the community, there is inadequate formal support and assistance. All categories of community support services, like home help services, meals on wheels, day care services, visiting services are in urgent need for expansion. We are still short of 83 social centres and multi-purpose centres which could fill a very useful role in providing the much-needed leisure activities and recreational facilities for our senior citizens in all sectors of our community. Since caring for the aged involves high risks of financial, emotional and physical stress for the care givers, prolonged shortage of community support is imposing enormous strains on

both the elderly and their families. Gross inadequacy of support services leave families with no choice but to put the frail elderly into institutions, thus defeating the care in community concept which the Government claims to promote.

Formal support programmes can delay institutionalisation which is considered to be the last resort according to the modern concepts of care for the elderly. In order to fulfill the community care objective, it is therefore proposed that: firstly, a comprehensive support network linking up formal and informal support be established; secondly, gaps in service provisions be identified and steps taken to increase the number and range of service provisions; thirdly, Government gives support to innovative services for the elderly such as outreaching service and respite services for care givers; fourthly, staff and resources be allocated for voluntary agencies to provide more services to families; and lastly, apart from tax reductions, other incentives be provided to encourage families to care for the old.

Intensive medical care

Sir, while community support services will make life easier for those elderly who can lead an independent social life, they can in no way improve the lot of the chronically ill and bed-ridden elderly. In 1985, a shortfall of 1 590 infirmary places was recorded, together with unmet demand for intensive care for 4 698 applicants on the waiting list for our care and attention homes. That some 2 500 elderly patients are occupying acute hospital beds, jeopardising the already limited medical resources and wasting monthly millions of dollars of our general revenue, is a typical example of 'penny wise, pound foolish'. It also confirms that the shortage of infirmaries merits Government's immediate attention. At the same time, the plight of thousands of elderly who are on the waiting list of infirmaries and who have been compelled to put up with undesirable home environment and inadequate medical care also attest to the urgent need for more infirmary places.

Continued income maintenance

Sir, income maintenance for retired persons is another problem that will grow with the increasing aged population. In 1985, some 63 per cent of Hong Kong's public assistance recipients were over the age of 65, while 25 per cent of our total social welfare expenditure in 1985-86 was spent on the non-means tested old age allowance. While our social welfare net is covering those elderly who have difficulty in remaining financially independent after retirement, the bulk of our low income labour force has practically no income protection upon retirement. With more and more elderly getting little or no support from their families, to maintain a decent living standard without having to depend on public welfare requires a comprehensive social security programme in the form of a central provident fund. A central provident fund scheme, based on the principle of self-help, not only gives people human dignity but also ensures better productivity in the light of secured benefits upon retirement—the same

kind of benefits that our Civil Service now enjoys. When the policy of 'helping those who can least help themselves' is no longer sufficient to meet the changing needs of our population; when the low income group has no means to ensure financial independence for old age; and when laissez faire principles cannot guarantee the provision of continued income for the average wage-earner; then planning for income maintenance becomes a matter of responsibility for us all. For all that our older generation has done to make Hong Kong what it is today, it is our turn to put into practice the traditional Chinese virtue of 'care for the aged as one would care for one's parents that is as my colleagues have said many times, 老吾老以及人之老'. As long as the need for Government to provide for the aged is recognised, the administrative difficulties of the proposed central provident fund scheme could be ironed out. If central provident fund schemes have been introduced in countries less affluent than Hong Kong, why can't it be launched in this city where economic prosperity depends on a stable workforce?

Code of practice

Sir, services for the elderly in Hong Kong are not confined to serving only the poor. Private old age homes offer a choice of service to clients who are better off financially. Unfortunately, the newly produced Code of Practice for Private Homes contain only minimum standards, in particular standards for staffing and space requirements are quite low. Since the code is aimed at protecting clients from getting poor quality service, it is believed that the standards for private old people's homes ought to be raised to the same level as old age homes run by subvented welfare bodies. Admittedly, improving standards will incur higher operational cost; and the solution to this problem lies in speeding up the expansion programme for subvented homes to cater for those clients who cannot afford high fees charged by private homes. Since the code of practice is not armed with mandatory power, the Social Welfare Department should adopt more positive measures, such as the setting up of a registration machinery, to encourage the voluntary registration of private old age homes which meet the basic requirements of the code. At the same time, public education is needed to enable consumers to assess and monitor the quality of service, and to give the public more confidence in seeking residential services for their elderly.

Overall policy review

Sir, the foregoing paints a morbid picture of our social welfare programmes for the elderly which are lagging behind the growing social needs of our aged population. The situation could be attributed to the absence of regular reviews on the programme plan on services for the elderly which was regrettably abandoned in 1985. The lack of an open forum has prevented both voluntary agencies and government departments to examine difficulties encountered in implementing the programme plan, identify loop-holes and seek adjustments of the plan. There has been poor co-ordination and collaboration between government departments and voluntary agencies involved in providing different types of services to the elderly. Therefore, I wish to echo Dr. HO Kam-fai's

proposal to conduct a holistic review on the objectives and strategies of government policy on care for the aged, to be followed by regular programme plan reviews.

In the wake of rapid socio-economic changes that are taking place here in Hong Kong, the changing needs and changing profiles of our elderly population are likely to produce social problems, posing threats to Hong Kong's stability and prosperity. Sir, what we need is not lip service paid towards promoting the care in community concept, but the design of a wide range of service programmes designed to meet the heterogeneous needs of both the providers and receivers of services for the elderly. Indeed, the shortfalls in numerous areas of services which are still at their developing stage require the Government to stop procrastinating and to give top priority to rectifying the situation. In the final analysis, Sir, the sooner we can harness the foreseeable problems before they grow out of proportions, the better it will be for ourselves and our senior citizens.

MRS. TAM (in Cantonese): Sir, old people are easily forgotten by society. How many people will remember that in the days of their youth, old people made a lot of contribution to our society and today's society should repay them and look after them?

At present there are about 600 000 people aged 60 or over and they came to Hong Kong alone from China after the war and therefore in their old age, they are alone and with no one to depend on. According to a survey, out of four old persons, one would be living alone or only living with his old partner and does not have a family to look after them. The major difficulty faced by these old people are sources of income. In an industrialised society where education standards are on the high side, it is difficult even for old people who are healthy to find a job. At present, there are over 40 000 old people who have to depend on public assistance, and the \$510 that they get is barely enough to buy food. Other than having no money, these old people also have no one to look after them. And when they are very sick, they are really in a pitiful situation. They see no point in living and commit suicide. Some old people died at home and were found dead several days afterwards. The plight of the old people is indeed worthy of our concern.

The old people who are looked after by their family do not have any economic means either. Therefore they have to depend totally on their family. But for a lower middle income class family, the care and attention given to an old person, other than sons and daughters, would indeed pose a great burden. Under economic pressure, old people are being maltreated. The major problem therefore lies in the fact that old people are not financially independent. They cannot choose their way of living, they lack status in the family and society, and they are easily neglected and forgotten. Therefore to solve the financial situation of old people is indeed a pressing issue which should be dealt with as soon as possible.

In order to effectively deal with the old population in Hong Kong and in order to prevent old people from becoming the poorest people and a burden to the society, I think that we should not rely on assistance to old people to solve the old people's financial problem. Now is the suitable time to prepare and to set up a comprehensive provident fund system through a contributory system. Old people would be able to maintain some economic means after retirement and this will reduce their reliance on the society. A comprehensive provident fund system can be implemented through legislation and all companies should set up and manage their own provident fund. What is most important is that when the employees change jobs or change trades, they can retain their previous years of service and contribution.

In Hong Kong, there are no pension or provident fund system and old people's financial support would have to be totally dependent on public assistance, old age allowance and so on, offered by the Social Welfare Department. The maximum grant is \$1,000. In the short term, the review of the level of grant and the scope of public assistance is a feasible method of improving the livelihood of old people. The authorities must consider this very carefully. In the long term, assistance offered by Government alone is certainly not an ideal solution to the problem of financial difficulty faced by old people. This is because in the foreseeable future, the population of Hong Kong will be getting older and this is reflected in the recently announced bi-census. By the 21st century, there will be 0.72 million people aged 65 or over or about 10.2 per cent of the total population. By then, assistance for the old people would come to \$80 billion. This will certainly pose a great economic pressure on the society.

I believe that the provident fund system would not only help to solve the old people's financial problem but, with a population which is growing older, we can also encourage people to save money. This system would also increase Hong Kong's ability to deal with downturn in economy. We must set up a central provident fund system as soon as possible. I support the motion.

MR. CHEONG-LEEN: Sir, Hong Kong is progressively moving in the direction of an affluent and ageing society.

By the end of this century, we shall be having an average life-span of about 80 years, with the living standards of Hong Kong residents being among the highest in Asia, and the life-style being comfortable, enjoyable and generally self-fulfilling.

But in the light of technological advance and changing economic circumstances, I believe it is worthwhile for Government to invite a public review of its policies and provision of services for the elderly.

For example, as people are getting to live longer, more co-ordinated measures should be taken to encourage wider employment opportunities and participation in social activities by the elderly, as is now taking place for example, in North America.

Living would therefore not only be more self-fulfilling for our 'greying population' but their accumulated experience and wisdom will be put to productive use and will not be lost to society during their life time. I suggest this is a matter to which the Secretary for Education and Manpower should address attention.

This public review need not be by way of a Green Paper, but more in the nature of an interim review pending a future full scale review on the needs for the next decade. I suggest that the Administration prepare a general information paper on the subject and invite public response from all sectors of the community.

Many district board members, including those from Wan Chai District to which I belong, have urged that Government provide a monthly travel allowance to the elderly so that they could more conveniently attend functions at community centres or other places. Wan Chai District Board has gone as far as getting 14-seater mini buses operating through Wan Chai to co-operate by charging half-fare to elderly passengers. I urge the Administration to look into this suggestion.

Meantime, a matter of urgency which has caught the attention of various district boards is the provision of housing for elderly singletons who do not have any family to take care of them, or who are unable to stay with relatives. It is also a matter which was brought to the attention of the Government in this Council quite some time ago by Dr. HO Kam Fai.

I understand that in the Report of the Working Group on Bedspace Apartments (often referred to as 'cage-men's hostels'), it is estimated there are several hundred such apartments, accommodating 10 000-15 000 residents of whom, I believe, about 25 per cent or more are aged 60 or over.

Most of these 'cage-men's hostels' are potential death-traps if a fire occurs anywhere in the building where these hostel residents live in a terribly overcrowded condition. No doubt such a situation represents a veritable nightmare for the Fire Services Department.

The sad part about the report is that it was completed about six months ago, and is probably still doing the rounds in the bureaucratic machinery.

I would propose that urgent steps be taken to establish a notification system whereby the operators of all such bed-space apartments would be required to furnish particulars necessary for a simple assessment of the safety and health implications.

The responsibility for keeping the notification register could be that of the Fire Services Department. An interdepartmental committee, chaired by a representative of the Fire Services Department, should be set up with the Social Welfare Department and other directly concerned departments participating. The committee will meet as and when required, so that all concerned parties can

be informed of what action the Fire Services Department intend to take in connection with those bedspace apartments which represent the gravest fire hazards, and joint action may be taken accordingly.

If the Fire Services Department says it does not have sufficient powers under existing legislation to take action against fire risks caused by gross overcrowding in bedspace apartments in old tenement buildings, I do not think it is in the public interest for the Administration to twiddle its thumbs and sit back and allow the buck to be passed back from one department to another.

These bedspace apartments will be around for another five to 10 years before urban overcrowding in Hong Kong can show much improvement. Therefore I would urge that Government give urgent consideration to changing if required the Fire Services Ordinance to give the executive department whatever statutory authority that is required to tackle this serious problem in concert with other concerned departments.

Sir, before I yield the floor, may I say that I have heard certain criticisms that the Administration is not keen on paying out the old age allowance or other public assistance grants in connection with old age when the recipients live in mainland China for extended periods of time.

I would suggest that Government review the current payment procedures so as to make it as convenient as possible for elderly residents who wish to retire in China to continue receiving their allowances thus relieving to some extent the overcrowded living conditions in the urban areas.

Sir, I support the motion.

MR. TAI: Sir, we are facing a changing age structure of our population with the elderly occupying an increasing proportion. Last year, the number of people aged 60 and over constituted about 11 per cent of our population and the percentage is expected to increase. It is important for us, at this point in time, to review our policy for the provision of services for the elderly and to have a more long-term plan for the development of such services.

Hong Kong has experienced a rapid process of industrialisation in the '60s and '70s. It has brought to us increased affluence, a changing socio-economic structure, and changing values. The traditional Chinese extended families are decreasing in number. The growth of nuclear families and its resultant changing household pattern point to the fact that more and more young people are not living with their parents after marriage. Though the Chinese tradition of respecting the old has not been eroded overnight, the previous assumption that children will always take care of their parents is losing its validity.

Among those aged 60 and over, the majority have received little education—less than 20 per cent have received education beyond primary school level. They are not well-informed of the kinds of welfare services they are entitled to and the various channels through which they may request for assistance. Many of

them—about 30 per cent—have to work for economic reasons. In fact, many of them have to rely on public assistance for their livelihood—about 60 per cent of the expenditure on public assistance every year goes to the aged population.

Old people living alone or with other old people encounter all sorts of problems. Those economically less well-off who cannot afford better living units and cannot find a place in one of the institutions for the aged are faced with substandard living conditions. Old people suffer from physical deterioration; some of them may have difficulties in performing household work, while others may require perennial health care. It may not be easy for them to find employment even if their financial position requires them to do so. They may also have difficulties coping with life after retirement.

It is important therefore that we provide the appropriate services for those who need them. I believe that the Government should begin to play a more active role in the provision of hostel accommodation and residential institutional facilities, and in allocating units to the elderly in public housing estates. The financial implications of such services can be substantial given the present low level of provision. I would suggest that more tax allowance should be granted for people who take care of their parents' lives financially.

On the other hand, the result of inadequate provision of infirmaries has been that many of our old people continue to occupy the already overcrowded acute hospital wards when they can be cared for in less expensive infirmaries. The building of more infirmaries for old people is therefore a more cost-effective way to deal with the present problem.

A further expansion of the community nursing programme to provide house care health services for the elderly should also be considered as another measure to ease the problem of shortage of places in hospitals and infirmaries.

Community programmes should also be provided for the elderly to integrate them into the community and help them to establish friendship among themselves. Better publicity should be made to inform the elderly of the services available to them.

Sir, I am not a preacher of a welfare state, but it is described that Hong Kong has prospered a lot over the past years from the late '40s to the '80s. The success one can fairly say is due to the contribution of our workforce which has in the past asked for very little in return. Now many of these people have reached the retirement age and rightfully they are entitled to enjoy a fair share of our success. The community as whole owes it to them. It is a type of welfare that I consider we should begin to expand. It is time that our community realistically estimated the specific needs of the elderly and took action accordingly. The need for appropriate action has long been, in my opinion, overdue.

SECRETARY FOR HEALTH AND WELFARE: Sir, I would like first of all to thank all the Members who have spoken in today's adjournment debate on care and services for the elderly. It is clear from the number of Members who have spoken that there is a great deal of concern both in this Council and in the community about the problems which face elderly people in Hong Kong and what we are doing about these problems. Hong Kong is of course not alone in this respect; all developed countries, and many developing countries, face similar problems. I propose first to say something about the basic government policy on care for the elderly, and then to describe, as succinctly as possible the various types of service which we provided; as I do so, I shall comment on points raised by Members during the course of the debate.

As several Members have pointed out, the number of elderly people in Hong Kong is increasing. According to this year bi-census, there are now about 620 000 people over 60 years old which represent about 11.5 per cent of Hong Kong's total population. Hong Kong people nowadays live longer than previously; on average men can expect to live to the age of 73 and women to 79. It is projected that the number of elderly people will grow to 800 000 in 10 years' time. The fact that people live much longer than they did 20 or 30 years ago says much for the improvement of living standards and health service in Hong Kong during this period but there is no doubt that aging brings with it many problems.

Basic policy

The basic government policy on the care of the elderly as set out in the 1979 White Paper: 'Social Welfare Into the 1980s' is to promote the well-being of senior citizens aged 60 and over 'by providing services that will enable them to retain their self-respect and remain in the community for as long as possible; and, where necessary, to provide residential care suited to the varying needs of this age group.'

To implement this policy we have adopted a two-pronged approach: *first*, to provide cash benefits and a range of community services that will encourage families to look after their elderly members or will enable old people to live independently and in dignity in the community for as long as possible; and *secondly*, to provide residential institutional facilities for those who for health and other reasons can no longer live with their family or on their own.

Dr. HO, Mr. HUI, Dr. CHIU, Dr. LAM and Mr. LIU have suggested that an overall review should be conducted of the objectives and strategies of Government's policy on care for the aged. As the present policy was laid down nearly 10 years ago, it may well be time to update the policy in the light of recent developments, and I will certainly give this proposal serious consideration. If such a review is undertaken the subvented sector would certainly be involved. The opportunity could well be taken to re-examine whether the various government policies are effective in encouraging families to look after their elderly members.

It has also been suggested that there should be better co-ordination between the various government departments and voluntary agencies which are involved in providing different types of services to the elderly. At present, the major elements of services for the elderly fall within the scope of my branch, and I am responsible for co-ordinating with the Social Welfare, Medical and Health, Housing and other relevant departments as well as the voluntary welfare agencies the implementation of this policy. I doubt whether there would be much to be gained by setting up a separate mechanism to do this job.

Financial assistance

At present, all residents in Hong Kong aged 70 or over are entitled to an old age allowance of \$255 per month. This allowance is not means-tested and at present about 234 000 old people receive it; this figure represents 86 per cent of those eligible. Government spending on this allowance in the last financial year amounted to \$632 million. This allowance is intended to help meet the extra expense which elderly people necessarily incur because of their age.

An elderly person who does not have any means of support may apply for public assistance. A single person with no other income will receive \$510 a month, under the scheme, plus a monthly rental allowance of up to \$276 and an old age supplement of \$255. In other words, he may receive up to a maximum of \$1,041 per month. If he is on public assistance for a period exceeding 12 months he will receive an annual supplement of \$645 to replace durable goods. Of the 62 000 public assistance cases, about 75 per cent are single people, and of these the majority are also elderly.

I can assure Dr. CHIU and Mr. CHUNG that rates for public assistance and old age allowance are revised periodically to preserve their real purchasing power.

Eligibility for both of our social security schemes is based on residence in Hong Kong and I foresee considerable practical difficulties in adopting Mr CHEONG-LEEN's suggestion that former residents living in China should be able to continue to receive these payments.

Mr. HUI, Mr. CHUNG Pui-lam and Mrs. TAM have all spoken in support of the proposed central provident fund scheme. As Members are aware, consultation on this proposal has just begun, and it would not be appropriate for me to pre-empt its outcome at this stage. The decision whether to establish a central provident fund will of course inevitably have implications for our policy on care of the elderly.

Community support services

To enable elderly people to remain in the community as long as possible, a range of support services is provided. These include social centres, home help, day care and multi-service centres for the elderly.

Social centres for the elderly are being established throughout the territory to provide social and recreational programmes. These centres are intended to provide a focal point where elderly people can get together and enjoy a variety of activities specially organised for them.

To encourage elderly people to continue to live on their own or with their own families home help services are provided by voluntary agencies with government subventions. Home helpers assist with the preparation of meals, personal care, laundry, and household management. Alternatively, elderly people may attend day care centres where nursing and personal care are provided during the day time when their families are out at work. A range of community support services are provided in multi-service centres; these include home help, counselling, canteen service, laundry, social activities and community education for the elderly.

At present there are 103 social centres, four day care centres, and 10 multi-service centres, while the home help service caters for 2 400 people. Mr. HUI, Mr. LEE Yu-tai, Mr. CHUNG Pui-lam, Mr. LIU, Dr. LAM and Dr. CHIU have commented on the inadequacy of services at present. Expansion programmes exist for all these services and the planned provision over the next six years includes 76 social centres, 14 day care centres and 10 multi-service centres. For home help services, the plan is to provide 10 additional teams each year. This expansion should be able to meet the estimated demand for the various services on the present planning ratios, but we shall need to re-examine these ratios from time to time to ensure that they are still appropriate

A number of proposals for new community support services have been put forward this afternoon by Members. Mr. HUI has suggested an outreaching service for the elderly and respite services for those who look after elderly people. Mr. LEE Yu-tai and Dr. CHIU have suggested the establishment of an employment service and sheltered workshops for the elderly, as well as pre-retirement and education programmes. These are interesting proposals which we shall consider further.

Housing

Many elderly people, especially those without families, are faced with housing problems. In many cases their need is simply for decent accommodation at a rent they can afford. Last year, the Housing Authority agreed to take on the responsibility of providing housing for elderly people who are capable of living independently. Hostel units, each with a capacity for 150 people, are to be provided in new public housing estates where residents will have easy access to the community support services provided in the vicinity. Initially, 1 650 places are planned to be provided over the next five years and the standard of provision will be kept under periodic review. Dr. HO has expressed concern about the first such hostel in Hang On Estate, and proposed that the provision

of community support services should be carefully synchronised with the moving in of the elderly residents. I entirely agree with this. In the case of Hang On Estate, I understand that a family service centre and home help service are available in the vicinity and that a social centre for the elderly will open in this estate towards the end of 1987.

Able-bodied elderly people may also apply for singleton housing units in public housing estates, although priority is given to those at present living in temporary housing areas and marks I and II estates.

To encourage elderly people to live with their families, it is the policy of the Housing Authority to give families with elderly members priority treatment in applications for public housing. Applicants with family members aged 60 and over are usually allocated public housing units one year ahead of other families. In addition 900 flats in public housing estates are reserved each year for compassionate rehousing on the recommendation of the Social Welfare Department. In this category 266 single people over 60 were referred under the scheme last year.

The Social Welfare Department operates a sheltered housing scheme in private residential buildings in Wan Chai and Sha Tin. The two projects accommodate a total of 595 elderly people.

Both Mr. CHEONG-LEEN and Dr. HO expressed concern about the need to improve the lot of elderly single people living in bedspace apartments. Mr. CHEONG-LEEN in particular is worried about fire safety in this type of accommodation. The Working Group on Bedspace Apartments, chaired by a member of my staff, recently carried out an in-depth study of the problems of these apartments and identified fire safety as being a major area of concern. The Security Branch is now engaged in a more detailed study of the problem; and I understand that they are very close to being able to institute some improvements. The question of fire safety in bedspace apartments is not an easy one; some undoubtedly pose serious hazard, but it would clearly not be desirable to impose conditions which would result in elderly people being made homeless.

Residential care service

For elderly people who need accommodation together with a limited amount of care which cannot be provided at home, several types of residential institutions are operated by subvented voluntary welfare agencies. There are at present 40 hostels and homes for the elderly providing 4 850 places. However, this is not adequate to meet the demand, and some 3 400 elderly people are on the waiting list. Another 3 700 places are planned for the next five years to satisfy this demand.

Care and attention homes exist to cater for elderly people who require a limited amount of nursing care. At present about 1 530 places are available in 13 care and attention homes. In October 1986, the waiting list for care and attention homes contained 4 800 names and the average waiting time for admission is as long as 35 months. There is therefore an urgent need to expand the provision of places in care and attention homes. To help to meet the shortfall, more homes of this type are now being planned in public housing estates and it is proposed to incorporate similar facilities in homes for the elderly. This approach is particularly useful in that it not only extends the capacity of the care and attention service, but also introduces a more integrated approach by providing a range of residential care services for elderly people under the same roof. The department has stepped up planning in this area and 2 845 care and attention places are expected to come on stream during the next five years.

Partly as a result of the shortfall in the provision of services by the Government and subvented welfare agencies, the commercial sector has responded to the needs of the elderly and the last few years have seen a rapid increase in the number of private homes for the elderly. At present, several Members have pointed out there are no controls over the operation of these homes, although as a result of their increasing number, there has been pressure on the Government to take action to ensure adequate standards. The Social Welfare Advisory Committee recently has advised that for the time being, there is no immediate need to enact legislation to control these private homes, although this might be necessary in the future. On the recommendation of the committee the Social Welfare Department has drawn up a code of practice for the guidance of the operators, and a review will be carried out in a year's time to examine the extent of compliance, and to consider whether any further action is required.

Mr. HUI, Mrs. Pauline NG and Mr. CHUNG have all expressed concern about the standard of operation of these homes. It has been suggested that in view of the shortage of subvented care and attention homes these private homes should be provided with subvention to raise their standards of service. This suggestion presents considerable difficulty in that we do not normally give subventions to profit-making organisation. It has also been suggested that a system of voluntary registration should be set up to register those homes which meet the basic requirements of the code. This suggestion is certainly worthy of consideration.

Medical facilities

I will now turn to medical facilities for the elderly. Dr. CHIU called for an increase in the number of day hospitals. On present plans the existing 120 places in day hospitals will be increased to 635 by 1991. The object of this increase is to enable elderly people who do not need full-time medical care to live at home rather than to occupy valuable hospital beds. In the community nursing service,

the solution to the problem of the time the nurses spend in travel seems to me to lie not so much in providing special transport facilities for them, but in setting up a comprehensive network of community nursing centres close to those who need the service. To this end, 15 centres are to be added to the existing 45 by 1991.

It has been pointed out that elderly persons should be given priority treatment in attending public outpatient clinics. I can assure Members that arrangements already exist in public outpatient clinics whereby patients whose clinical condition warrants early attention are given priority to see the doctors. As Dr. IP has said, elderly people who are in poor health usually fall into this category.

Mr. HUI Yin-fat, Mrs. Pauline NG and also Mr. TAI Chin-wah all expressed concern about elderly patients occupying acute hospital beds. The situation is not I think as critical as portrayed by Mr. HUI, but in order to ascertain more exactly the requirement for infirmary and care and attention home places, a survey is now being jointly conducted by the Social Welfare Department and the Medical and Health Services Department. The results of this survey will be available early next year. Quite apart from this, there are plans to increase the existing number of 1 015 infirmary beds to over 3 400 by 1993.

Dr. Conrad LAM and Mr. CHUNG suggested a special comprehensive medical scheme for the elderly. It is our general policy not to set up separate organisations for different categories of patients, with the exception of children, but I will discuss with the Director of Medical and Health Services whether there is a case for some special arrangements for the elderly.

The shortfalls in geriatric hospital beds quoted by Dr. Conrad LAM are figures used for planning purposes only. No elderly patient, in practice, is denied a hospital bed. While the Administration will be making efforts to increase the supply of geriatric beds, Dr. LAM has rightly pointed out that medical services for the elderly should include infirmaries, day hospitals and community nursing. As I said earlier, for all these services expansion plans are in hand.

Dr. IP made a number of suggestions on improving the dental health of the elderly. As I said in this Chamber in April this year in reply to a question from Dr. IP on the same subject, the aim of the dental therapist scheme is to provide a preventive dental conservation service for school children. The elderly, however, usually need curative dental treatment of a kind which dental therapists are not trained to provide. To ensure that elderly people with inadequate means can obtain the dental care they need, special grants are available under the public assistance scheme to meet the cost of dentures and fillings. At present, the Government has no plan to introduce free or subsidised dental services either for the public as a whole or for the elderly because this would be a very major undertaking with serious resource implications.

Special concessions for the elderly

Mr. LIU, Dr. IP, Mr. LEE and Mrs. NG have urged the introduction of concessionary rates for elderly people on public transport and for cultural activities. This question has been previously raised in this Council and the Director of Social Welfare is in touch with public transport operators and other organisations about the proposal; their responses are still awaited. Mrs. NG has reminded us that a number of such schemes are already in operation in the private sector, frequently co-ordinated by district boards.

Social welfare subventions

Mr. David LI has commented on some of the financial problems faced by subvented welfare agencies. The policy and administration of social welfare subventions is at present the subject of a review by a government working group, and the proposals for improvement made by Mr. LI will certainly be given due consideration. I would like, however, to point out that in calculating the subvention requirement, it is the practice of the Social Welfare Department to take into account salary scales, inflation and incremental increases in staff salaries. Moreover, the notorious see-saw system, to which he refers, disappeared unmourned, several years ago. If welfare agencies encounter any difficulties in their operation, the Director of Social Welfare is always willing to discuss these problems with them.

Conclusion

Sir, so many interesting suggestions have been made by Members in today's debate that I am conscious of not being able to do justice to them all. I would like to assure Members that we will study all their points carefully; at a later stage I think that it would be useful for my branch and the departments concerned to examine these proposals in more detail with the OMELCO Welfare Panel.

So far I have spoken mainly about what the Government, assisted by the voluntary agencies, is doing to help the elderly to cope with their problems. But it is very important, as Mr. LIU, Dr. IP and Mr. TAI have said, that the community as a whole should do everything it can to help elderly people to continue to live a full life in their later years. It is perhaps even more important that the members of the family unit should try to understand and sympathise with their elders' difficulties. There is as several Members have said, a very ancient and honourable tradition of respect for the elderly in the Chinese culture, and despite the problems posed by rapid urbanisation and the crowded conditions under which many of our people have to live, it is important that we maintain this.

Question put and agreed to.

Next sitting

HIS EXCELLENCY THE PRESIDENT: In accordance with Standing Orders I now adjourn the Council until 2.30 pm on Wednesday, 19 November 1986.

Adjourned accordingly at seventeen minutes past Six o'clock.

Note: The short titles of motion/bills listed in the Order Paper have been translated into Chinese for information and guidance only; they do not have authoritative effect in Chinese.

WRITTEN ANSWERS**Annex I****Written answer by the Secretary for Lands and Works to Mr. CHENG's supplementary question to Question 1.**

The funds spent by the Building Authority in the financial year 85-86 in removing 219 dangerous signs amounted to \$140,500. Recovery of costs incurred by Government from owners was negligible because they could not be traced. However, it is worth noting that the total number of signs for which notices were served in 85-86 was 546, of which the owners voluntarily removed 327. Thus well over half were removed by owners at their own expense.

Another point of interest on the cost of removing signs is that, because of the use of mobile hydraulic platforms compared with the traditional method of using scaffolding, the cost has reduced from over \$1,000 per sign to the present level of \$550.

Annex II**Written answer by the Secretary for Health and Welfare to Dr. CHIU's supplementary question to Question 4.**

The Director of Medical and Health Services informs me that the intention is that telephone appointments should be accepted from referring doctors or their nurses only, and not directly from patients. This avoids the specialist clinics having to verify the patients' need for specialist treatment; direct communication between professional staff also makes it possible for urgent appointments to be arranged for acute cases.