

**Hong Kong Red Cross  
Recommendations for the Review of the PCSSA Scheme**

**1. Recipients' Profile**

- 1.1 The participants of the Scheme are the relatively “old-old”; they are potentially high risk and dependent because of their old age and precarious health status.
- 1.2 Most of the respondents claimed that the availability of family support and care in the mainland was the reason for them to migrate to Guangdong
- 1.3 According to the survey findings that conducted by Dr. Joe C.B. Leung of the Hong Kong Red Cross, the PCSSA Scheme is appreciated by and benefiting its users. However, if more of the PCSSA recipients are returning back to Hong Kong for their remaining years, because of unbearable medical costs and inadequate care, the scheme will be a failure and a disaster for the elderly psychologically and physically.

**2. Recipients' Needs and Recommendations**

We do see that for the Scheme to be truly successful, it should not be just giving a choice to these elderly but a “SUPPORTED CHOICE”. There are two dimensions that the government can consider supporting recipients' choice to join the PCSSA scheme.

**2.1 Pre-migration Preparation**

- 2.2.1 **In order to enable PCSSA recipients to have a better preparation for the migration, pre-migration interview is essential.** The interview can help them to appraise their needs, the reliability of family support and the availability for social service support in the mainland.
- 2.2.2 **Assistance should be rendered to ensure effective remittance of benefits.** The critical concern of the recipients is whether they can receive the monthly allowance on time. To avoid mistakes and confusions concerning remittance, the Social Welfare Department could liaise with the banks to arrange for remittance instructions directly, so that the allowance could be remitted to the recipients without delay.
- 2.2.3 **Physical condition of PCSSA recipients should be assessed before their migration.** Some of the very old elderly that have returned to China under the Scheme may be eligible for higher standard rates for 100% disabled or constant attendance. For other recipients, medical assessments may expire after they settled in Guangdong. To avoid confusion and the trouble for the elderly to return to Hong Kong for medical assessment, it is suggested that medical assessment can be arranged for all recipients

before they return to Guangdong. Government of the Special Administrative Region should also consider arranging recognized medical assessment in Guangdong.

- 2.2.4 Moving allowance should be granted to all recipients and Subsidized escort service should be introduced for the needy.** To the elderly joining the PCSSA Scheme means packing out and giving up their residence in Hong Kong. Moreover, these recipients are old and very often require walking aid. Such assistance would definitely help them move with less trouble.
- 2.2.5 Procedures to apply for a guarantee of getting back a unit from the Housing Authority should be improved.**

## **2.2 Facilitating Settlement**

- 2.2.1 The elderly prefer living with family members in their hometowns to collective settlement.** Their preference should be respected.
- 2.2.2 Follow-up visits should be conducted to ensure the adaptation of the PCSSA recipients to the new living environment and the sustainability of family support to the elderly.** Follow-up visits should be paid within the first year to ensure that these elderly are settled in the new living environment and receiving their social security payments. Furthermore, the success of this scheme hinges on the availability of adequate care for the elderly from their families. More visits should be paid for the relatively high-risk elderly to understand their needs and work with their families to find available supporting caring service for the elderly to relief the family's burden, if necessary.
- 2.2.3 The high medical expense in Guangdong is one of the major concerns of the PCSSA recipients and their families.** To ensure the success of this Scheme, issues of medical assistance must be solved. Medical allowance paid in a monthly lump sum is one of the possible solutions. The Social Welfare Department could also discuss with the Guangdong government to explore possible health schemes with standardized charges in hospitals; medical expenses incurred in these hospitals could then be reimbursed.
- 2.2.4 Burial subsidies should be introduced to lessen PCSSA recipients' worries and avoid fraud cases.** The Social Welfare Department could consider reimbursing the burial expenses, with an upper limit set as the recipients of the CSSA Scheme in Hong Kong are entitled to.

To conclude, the scheme will be a **real** choice for the elderly to improve their quality of life and an effective one if the government can provide more support to it.

**Hong Kong Red Cross**  
**Rough Estimation of Administration Cost for the PCSSA Scheme**

To realize our recommendations on follow-up visits and expansion of case management program:

Year 1

|   |   |   |   |   |   |                |
|---|---|---|---|---|---|----------------|
| \$1,500,000.00 <sup>A</sup>                                 | + | \$510,000.00 <sup>B</sup>   | + | \$1,320,000.00 <sup>C</sup>                           | = | \$3,330,000.00 |
| (Existing cost per year. Maximum cases to be handled: 1500) |   | (Salaries and expenses for 3 additional staff to visit all existing 1142 cases) |   | (Salaries and expenses for additional 700 new cases.) |   |                |

<sup>A</sup> Cost per existing case: \$1000.00

<sup>B</sup> 1500 cases - 19% cases visited = 1142 existing cases never visited before.

<sup>C</sup> Average cost per new case: \$1890.00 (100% spot check & CM program)  
 Cost per CM/High-risk case: \$2620.00  
 Cost per non-CM case: \$1570.00

Year 2

|   |   |   |   |                |
|---|---|---|---|----------------|
| \$2,200,000.00  | + | \$1,320,000.00                                    | = | \$3,520,000.00 |
| (Existing cost per year. Maximum cases to be handled: 2200) |   | (Salaries and expenses for additional 700 cases.) |   |                |

Year 3

|   |   |   |   |                |
|---|---|---|---|----------------|
| \$2,900,000.00  | + | \$1,320,000.00                                    | = | \$4,220,000.00 |
| (Existing cost per year. Maximum cases to be handled: 2900) |   | (Salaries and expenses for additional 700 cases.) |   |                |

Note:

1. “Existing cases” are cases referred in previous years and have settled in Guangdong for at least one year. These cases will be randomly selected (10-15%) for spot checking every year.
2. “New cases” are cases referred in the current year. All of them will be visited to ensure their settlement.

## Hong Kong Red Cross

### Financial Implication on HKRC's Recommendations (excluded administration cost)

Assumption:

- 1) 700 new cases will be received every year
- 2) 6% of the total no. of cases will be closed every year, among these cases, 60% are closed because of death.

| <u>Year</u>      | <u>No. of cases<br/>b/f</u> | <u>No. of new<br/>cases<br/>received in<br/>this year</u> | <u>No. of cases<br/>delected in<br/>this year</u> | <u>Total No. of<br/>cases at the<br/>end of the<br/>year</u> | <u>Medical<br/>Allowance to be<br/>paid</u> | <u>Burial<br/>Subsidies to be<br/>paid</u> | <u>Migration<br/>Allowance to<br/>be paid</u> | <u>Total Amount:</u> |
|------------------|-----------------------------|---|---|--|---|--|---|----------------------|
|                  |                             |   | 6%/year   |  | \$600/ case/ month                          | max. \$11,730/<br>case                     | ave. \$510/ a<br>new case*                    |                      |
| <b>1999-2000</b> | 1147                        | 700   | 111   | 1736   | 12,500,496                                  | 779,951                                    | 357,000                                       | 13,637,447           |
| <b>2000-2001</b> | 1736                        | 700   | 146   | 2290   | 16,488,066                                  | 1,028,750                                  | 357,000                                       | 17,873,816           |
| <b>2001-2002</b> | 2290                        | 700   | 179   | 2811   | 20,236,382                                  | 1,262,621                                  | 357,000                                       | 21,856,003           |
| <b>2002-2003</b> | 2811                        | 700   | 211   | 3300   | 23,759,799                                  | 1,482,460                                  | 357,000                                       | 25,599,259           |

\* Migration allowance can be released according to different regions in which the PCSSA recipients will settle (e.g. \$400 for Zone 1; \$600 for Zone 2; \$800 for Zone 3).

Zone 1: 深圳，東莞，惠州，廣州，佛山，中山，珠海，about 57% of the recipients settle in this zone;

Zone 2: 陽江，江門，肇慶，清遠，汕尾，揭陽，河源，about 33% of the recipients settle in this zone;

Zone 3: 韶關，茂名，湛江，雲浮，潮州，汕頭，梅州，about 10% of the recipients settle in this zone.

## Hong Kong Red Cross

### Calculation of man-hour per case in the PCSSA Scheme

| Service                                   | <u>Service Requirement</u><br><i>Case range: 1-2500</i> |                                 | <u>Service Provided</u><br><i>Total no. of cases handled: 1322<br/>(as at 31 March 1999)</i> |                                 |
|---|---|---------------------------------|--|---------------------------------|
|   | % of cases received Service                             | Time allocation (Man-hour/case) | % of cases received Service  | Time allocation (Man-hour/case) |
| 1. Intake briefing                        | 100.0%  | 0.2                             | 78.6%  | 2.25                            |
| 2. Other pre-migration services           | -   | -                               | 75.0%  | 0.75                            |
| 3. Postal Review                          | 150.0%  | 0.3                             | 130.0%   | 0.2                             |
| 4. Non-response postal review cases       | 30.0%   | 0.5                             | 30.0%  | 0.5                             |
| 5. Spot checks                            | 5.0%  | 5                               | 17.0%  | 6.3                             |
| 6. Other service - special case visits    | 5.0%  | 5                               | 2.0%   | 5.3                             |
| 7. Report & record management             | 100.0%  | 0.3                             | 100.0%   | 0.3                             |
| 8. Other services - logistics & reporting | 5.0%  | 2                               | 8.5%   | 2                               |
|   |   |                                 |  |                                 |
| <i>Average man-hour per case:</i>         |   | <i>1.7</i>                      |  | <i>4.4</i>                      |

#### **Other extra services provided:**

1. Case management program
  - network building with local resources (social services, volunteers)
  - education on caring skills for carers (dementia and other old age illnesses)
  - crisis intervention (escort arrangements, maltreated and mentally unfit cases)
  - develop caring plans (returning to Hong Kong, entering elderly homes)
2. Pre-migration services such as assistance in remittance arrangement and housing issues
3. Services for short-term and long-term returnees
4. Introduction of the scheme and HKRC's service: production of information kit, holding briefing sessions for other agencies.
5. Arrange volunteers for escort and other services.