



中華人民共和國香港特別行政區政府總部衛生福利及食物局  
Health, Welfare and Food Bureau  
Government Secretariat, Government of the Hong Kong Special Administrative Region  
The People's Republic of China

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15 June 2004

Ms Miranda HON  
Clerk, Public Accounts Committee  
Legislative Council  
Legislative Council Building  
8 Jackson Road  
Central, Hong Kong

Dear Ms HON,

**The Director of Audit's Report on the  
results of value for money audits (Report No. 42)**

**Chapter 9: Training, employment and  
residential services for people with disabilities**

Your letter dated 13 May 2004 on the above subject refers.

The information requested in your letter is set out below:

- (a) at present, the average cost of treating an extended care patient in a HA hospital is about \$1,260 per day. The unit cost of a residential place in Long Stay Care Home (LSCH) receiving subvention from SWD is about \$304 per day. Based on these cost estimates, the difference is \$956 per day. It should be noted that the service needs of patients and residents of LSCH are very different and this is reflected in the different costs of providing extended care in the hospital and residential service in the LSCH settings;

- (b) as at 31 March 2004, there were 919 applicants on SWD's waiting list for a place in LSCH and 466 of them were receiving in-patient treatment in HA hospitals. It should be noted that the circumstances of these 466 applicants might have changed since they first came on the waiting list. At present, when a LSCH place becomes available, the first applicant on the list, if he/she happens to be receiving in-patient treatment in a hospital, would be reviewed to assess his/her suitability to be transferred to a LSCH and his/her personal and family preference for such transfer. Some applicants might decline the transfer. Hence it would be difficult to state whether all the 466 applicants are suitable and ready to be transferred. It should also be noted that as mental illness is a chronic illness, the beds vacated by chronic patients may eventually be filled by other mentally ill patients who require hospitalization and the 'savings' resulting from the transfer may not necessarily materialise.
- (c) hospitals and LSCH provide different and essential treatment and services for the rehabilitation of chronic mental patients characterized by relapses and remissions. There is a strong demand for their treatment and services. It is necessary to adopt a prudent and holistic approach in examining any proposal on transfer of resources. We would need to establish that the arrangement suggested in paragraph 3(c) of your letter (i.e. an arrangement whereby the admission of an applicant for long term residential care service who is in a hospital to a Long Stay Care Home will be accompanied by a corresponding budget transfer from HA to SWD) will not affect medical care for patients with chronic mental illness.

Yours sincerely,



( Susie Ho )

for Secretary for Health, Welfare and Food

c.c. Director of Social Welfare  
Chief Executive, Hospital Authority  
Director of Audit