# 立法會 Legislative Council

LC Paper No. CB(2)1027/06-07 (These minutes have been seen by the Administration)

Ref: CB2/PL/WS

### **Panel on Welfare Services**

## Minutes of meeting held on Monday, 8 January 2007, at 10:45 am in Conference Room A of the Legislative Council Building

**Members**: Hon CHAN Yuen-han, JP (Chairman)

**present** Dr Hon Fernando CHEUNG Chiu-hung (Deputy Chairman)

Hon Albert HO Chun-yan Hon Bernard CHAN, GBS, JP

Hon Mrs Sophie LEUNG LAU Yau-fun, SBS, JP

Dr Hon YEUNG Sum

Hon TAM Yiu-chung, GBS, JP Hon LI Fung-ying, BBS, JP

Hon Tommy CHEUNG Yu-yan, JP Hon Frederick FUNG Kin-kee, SBS, JP

Hon Alan LEONG Kah-kit, SC Hon LEUNG Kwok-hung Dr Hon KWOK Ka-ki

**Member** : Hon LEE Cheuk-yan absent

**Members** : Hon Margaret NG

attending Hon Mrs Selina CHOW LIANG Shuk-yee, GBS, JP

Hon WONG Kwok-hing, MH Hon Ronny TONG Ka-wah, SC

**Public Officers**: Agenda item IV attending

Dr York Y N CHOW, SBS, JP

Secretary for Health, Welfare and Food

Miss Hinny LAM

Principal Assistant Secretary for Health, Welfare and Food (Women)

Mr Paul TANG, JP Director of Social Welfare

Mrs MAK CHOW Suk-har, Anna Assistant Director of Social Welfare (Family and Child Welfare)

### Agenda items IV and V

Miss Eliza LEE Deputy Secretary for Health, Welfare and Food (Family and Women)

### Agenda item V

Mr Freely CHENG

Principal Assistant Secretary for Health, Welfare and Food (Family)

Ms Wendy CHEUNG

Assistant Secretary for Health, Welfare and Food (Family) 3

Mr SIT Tung

Assistant Director of Social Welfare (Rehabilitation and Medical Social Services)

Mr CHAN Chau-sang Social Work Officer (Rehabilitation and Medical Social Services) 11 Social Welfare Department

Dr CHEUNG Wai-lun Director (Cluster Services) Hospital Authority

Mr CHU Ming Executive Manager (Allied Health) Hospital Authority **Clerk in** : Miss Betty MA

attendance Chief Council Secretary (2) 4

**Staff in** : Mr LEE Yu-sung

**attendance** Senior Assistant Legal Adviser 1

Mr Chris LAI

Senior Council Secretary (2) 7

Miss Maggie CHIU

Legislative Assistant (2) 4

Action

### I. Confirmation of minutes

[LC Paper No. CB(2)722/06-07]

The minutes of the meeting held on 11 December 2006 were confirmed.

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

2. <u>Members</u> noted that no information paper had been issued since the last meeting.

### III. Items for discussion at the next meeting

[LC Paper Nos. CB(2)723/06-07(01) and (02)]

- 3. <u>Members</u> agreed to discuss the following items at the next regular meeting scheduled for 12 February 2007 at 10:45 am
  - (a) Evaluation of the re-engineered community support services for elders; and
  - (b) Family education initiatives.
- 4. As there was wide public concern about the community support services for elders, the Chairman said that deputations should be invited to give views on item (a) above at the next meeting.

### IV. Review of Domestic Violence Ordinance

[LC Paper Nos. CB(2)723/06-07(03) to (04) and CB(2)809/06-07(01)]

Secretary for Health, Welfare and Food (SHWF) briefed members on the 5. Administration's proposal to amend the Domestic Violence Ordinance (DVO) (Cap. 189) to render better protection for victims of domestic violence. SHWF said that extensive consultation with stakeholders had been carried out, and parties consulted were generally in support of the legislative proposals. further said that the Administration had considered carefully whether the scope of the DVO should be extended beyond spousal/co-habitation relationships. The Administration did not propose to expand the scope of the DVO to cover other familial relationships, or relationships between people in the same households in the light of the considerations detailed in its paper. SHWF added that the Administration was preparing the amendment bill and aimed to introduce the bill into the Legislative Council (LegCo) in the current legislative session. SHWF stressed that legislation was only one of the means to address domestic violence andthe Administration would continue to strengthen the services and support for victims of domestic violence.

### Scope of DVO

Elder abuse cases

- 6. <u>Dr KWOK Ka-ki, Dr YEUNG Sum and Dr Fernando CHEUNG</u> welcomed the legislative proposals, but considered that the scope of DVO should be expanded to cover elderly family members in view of the rising number of elder abuse cases. <u>Dr KWOK Ka-ki</u> said that elders were usually the subject of domestic violence as they were physically vulnerable and relied heavily on their adult children for support. He was disappointed at the exclusion of elder abuse from DVO. <u>Dr YEUNG Sum</u> held the view that elderly parents should be protected under DVO, as they were also members of a family.
- 7. Mr TAM Yiu-chung said that while Members belonging to the Democratic Alliance for Betterment of Hong Kong were generally supportive of the legislative proposals, they considered that the proposals would be more comprehensive if the scope of DVO would be expanded to cover elderly family members.
- 8. <u>SHWF</u> responded that according to the statistics collected by the Social Welfare Department (SWD) and the Police, the majority of reported elder abuse cases involved spousal relationship which was already covered by the DVO. There was no indication of an increase in cases concerning parents/adult children.

- 9. SHWF said that there were divergent views on the proposal of expanding the scope of DVO to cover parent-adult son/daughter and parent-adult son/daughter-in-law relationships. The Working Group on Elder Abuse convened by the SWD considered that amending the DVO would not be an effective means to address elder abuse and might bring about adverse effect on family relations. The Elderly Commission noted with concern the prospect of adult children making use of the legislation against their elderly relatives. It also pointed out that enabling the elderly to seek an injunction against their offspring might aggravate the problem and cause an irreparable breakdown in family relationships. As most elderly in Hong Kong wished to stay with their families, they did not want to make known their plight of being abused by their SHWF said that having regard to the above considerations, the adult children. Administration did not propose to expand the scope of DVO to cover parent-adult son/daughter relationships. SHWF added that the Administration would tackle elder abuse problem by enhancing the services and support for vulnerable elders in need and strengthening publicity and public education to promote a culture of caring for the elderly.
- 10. <u>Dr YEUNG Sum, Dr Fernando CHEUNG and Mr LEUNG Kwok-hung</u> said that the number of reported elder abuse cases was only the tip of the iceberg as there was under-reporting by the elders. They disagreed that the statistics provided justifications for not extending the protection under DVO to elderly family members. <u>Dr YEUNG Sum</u> pointed out that most elderly victims of domestic violence were resistant to washing their dirty linen in the public. <u>Dr Fernando CHEUNG</u> added that according to a recent study conducted by the University of Hong Kong, one disclosed case represented 99 unreported cases of domestic violence. <u>Mr LEUNG Kwok-hung</u> considered that the small number of reported elder abuse cases could partly be attributed to the lack of definition of "elder abuse" in the existing legislation.
- 11. <u>Ms LI Fung-ying</u> held the view that a consensus had been reached among members present at the meeting on the proposal to include elder abuse in DVO. It would be a waste of time for the bills committee to be formed to study the amendment bill to revisit the issue. <u>Ms LI</u> said that a low reporting rate for non-spousal elder abuse was not an excuse for not protecting them against abuse. She strongly urged the Administration to extend the scope of DVO to cover elder abuse even though it was to prevent the occurrence of one single tragedy. Mr Ronny TONG expressed similar views.
- 12. <u>Mr Ronny TONG and Ms Margaret NG</u> said that DVO provided mainly for a civil remedy for victims of domestic violence to seek injunction from the court. They did not see any reasons why such protection should not be extended to the elderly family members.

- 13. Mr Albert HO said that while he did not oppose the legislative proposals, he was disappointed at the Administration's proposal for not extending the scope of DVO to elderly family members. He considered the scope of the legislative proposals too narrow and the justifications for not including parent-adult children relationships in DVO unacceptable and outdated. Mr Frederick FUNG concurred with Mr HO and said that the Administration's concern about the adverse effect of the legislation on family relationships was in fact equally applicable to all sorts of familial relationships.
- 14. <u>SHWF</u> reiterated that statistics and experience of SWD and Police in handling domestic violence cases had revealed that majority of cases were related to spousal and co-habitation relationships and their children. The Administration had conducted a comprehensive review of DVO and considered that there did not appear to be a strong case for further extending the scope of DVO to cover other familial relationships. He stressed that the scope of DVO had, since its enactment in 1986, been confined to spouses, man/woman in co-habitation relationships and their children under the age of 18.
- 15. <u>The Chairman</u> expressed disagreement with SHWF. Referring to the long title of DVO, she pointed out that the Ordinance aimed to provide for the protection of persons from domestic violence and for matters ancillary thereto. Hence, the application of DVO should not be confined to spousal relationships. <u>Dr YEUNG Sum</u> said that if the Administration insisted not to extend DVO to cover elderly family members and introduced the amendment bill in its present form, Members belonging to the Democratic Party would consider proposing amendments to the bill.

### Same-sex relationships

16. In view of the decriminalisation of homosexuality, <u>Mr Albert HO</u> said that consideration should also be given to extending the scope of DVO to cover co-habitation relationships of the same sex. <u>Mr Margaret NG</u> shared a similar view and pointed out that failure to enable the same sex couples to apply for an injunction order under DVO would give rise to discrimination on the ground of sexual orientation.

### Definition of "molest" Vs "violence"

17. <u>Dr YEUNG Sum</u> said that the Administration should include physical abuse, sexual abuse and psychological abuse in the meaning of "domestic violence" for the purpose of rendering better protection to the victims of domestic violence. <u>Mr Ronny TONG</u> held the view that the term "molest" and "domestic violence" should be clearly defined under DVO so as to enhance public awareness of what constituted the conduct of domestic violence.

18. Deputy Secretary for Health, Welfare and Food (Family & Women) (DSHWF(F&W)) said that according to the Administration's legal advice, the term "molest" included physical, psychological and sexual abuse. Information gathered from the Judiciary also revealed that the court had granted injunction on application under DVO on the ground of psychological abuse. As the existing DVO already applied to physical, psychological and sexual abuse, the Administration did not consider it necessary to make further legislative amendments.

### Criminalising stalking in the domestic context

- 19. <u>Dr KWOK Ka-ki</u> said that although the Administration's review of the proposed anti-stalking legislation was underway, consideration should be given to criminalising domestic stalking as such behaviour was not uncommon in the context of domestic violence.
- 20. <u>Mrs Sophie LEUNG</u> said that legislation was not necessarily the most effective measure to tackle the problem of domestic violence. She recalled that the Women's Commission had published in 2006 a report entitled "Women's Safety in Hong Kong: Eliminating Domestic Violence". The report recommended, among others, a coordinated strategy to tackle domestic violence. <u>Mrs LEUNG</u> considered that the scope of DVO should be expanded by phases to facilitate enforcement and foster a wider acceptance by the public.
- 21. <u>SHWF</u> stressed that the Administration would take into account the areas of concern raised by members. He, however, disagreed that the scope of DVO was narrow, given that the proposals covered the majority of abuse cases in the domestic context. As he had pointed out earlier, some advisory groups and stakeholders consulted did not favour extending the scope of DVO to cover parent-adult son/daughter and parent-adult son/daughter-in-law relationships. To expedite the introduction of the amendment bill, the Administration would proceed with the preparation of the bill to take forward the proposals on which consensus had been reached in the community.

### Timetable for introducing the amendment bill

22. <u>Dr KWOK Ka-ki</u> said that in view of the recent tragic cases of domestic violence, the Administration should expedite the introduction of the amendment bill into LegCo. Echoing Dr KWOK's view, <u>Dr Fernando CHEUNG</u> said that the Subcommittee on Strategy and Measures to Tackle Family Violence had been consulted on the preliminary proposals in May 2006. As no substantial change had been made in the current legislative proposals, he queried why it had taken more than six months for the Administration to revert to the Panel on the proposals. <u>Dr CHEUNG</u> urged the Administration to provide a concrete legislative timetable and to introduce the amendment bill expeditiously. He was

worried that if the bill was to be introduced until July 2007, it could not be passed by LegCo within the current term.

- 23. <u>SHWF</u> said that the Administration aimed to introduce the amendment bill in the current legislative session in June or July 2007. After consulting the Panel on the legislative proposals, the Administration would proceed with the preparation of the amendment bill. <u>SHWF</u> hoped that if the Bills Committee, once formed, did not take too long to scrutinise the amendment bill, the law would possibly be enacted within the current LegCo term.
- 24. Mr Albert HO, Ms LI Fung-ying, Ms Margaret NG, Mr Frederick FUNG and Mr LEUNG Kwok-hung considered it unacceptable if the amendment bill was to be introduced in as late as June/July 2007. Dr YEUNG Sum added that the Democratic Party held a similar view. These members said that as the legislative proposals were not complicated, the Administration should not have taken such an unduly long time for its preparation. They also expressed concern that members would have to scrutinise the amendment bill hastily if it was only introduced by the end of the current session. Ms Margaret NG added that the Administration could introduce the bill in as early as February 2007, if it drew reference from the recommendations, which included the drafting of the relevant provisions, made by the Law Society of Hong Kong.
- 25. <u>SHWF</u> responded that apart from working on the drafting of the provisions, the Administration had to examine carefully the feasibility in implementing and enforcing the legislative proposals. Hence, it would take some time for the Administration to prepare the legislative proposals. He assured members that the Administration aimed to introduce the amendment bill within the current legislative session.
- 26. Mr Tommy CHEUNG said that Members belonging to the Liberal Party were supportive of the legislative proposals. He agreed that the amendment bill should not be introduced to the LegCo in haste. Otherwise, the relevant bills committee would require significant efforts to study the bill, and this would in turn delay the enactment of the amendments to DVO.

### Batterer Intervention Programme (BIP)

27. <u>Dr KWOK Ka-ki</u> noted that only 11 counselling groups with the participation of 88 batterers had been conducted under the pilot BIP organised by SWD. As the participation rate was on the low side, <u>Dr KWOK</u> questioned the effectiveness of BIP in preventing domestic violence and asked whether efforts would be stepped up to promote the service and enhance participation in the programme.

- 28. In order to enhance the deterrence effect, <u>Dr YEUNG Sum</u> suggested making it mandatory for batterers committing serious offences and repeated offenders to undergo counselling programme as practised in some overseas places.
- 29. <u>SHWF</u> responded that as BIP was a two-year pilot programme, SWD would conduct a review to evaluate the pilot programme with a view to identifying effective treatment modalities for batterers of varying backgrounds. The experience drawn from the pilot project would provide useful reference for defining the goals, content and standards of BIP. As regards Dr YEUNG Sum's suggestion of making it mandatory for batterers to undergo counselling programme, the Administration would need to consider carefully before deciding on whether and, if so, how it should be introduced.
- 30. On the effectiveness of counselling service for batterers, <u>Director of Social Welfare</u> (DSW) said that from overseas experience the effectiveness of mandatory counselling for batterers in deterring them from committing the same act again had not been firmly established. As such, SWD would review the format and content of BIP and study whether participation in the programme would be an effective alternative to imprisonment for batterers. <u>DSW</u> stressed that in considering the introduction of court-ordered BIP, the Administration should consider carefully whether court-ordered BIP should be a substitute for imprisonment penalty; and if so, what types of cases might be suitable for such BIP and format of such programme. <u>Dr YEUNG Sum</u> expressed reservations about DSW's concern as serving imprisonment term and receiving treatment under BIP were not mutually exclusive.
- 31. Mrs Sophie LEUNG said that as shown from the Californian experience, legislation on domestic violence could not combat the problem. She considered that the Administration should step up its efforts to make BIP more accessible by providing more training for social workers to identify the problem and make appropriate referrals of batterers to attend counselling programme.

### Support services for victims of domestic violence

- 32. <u>Mr TAM Yiu-chung</u> noted that the Administration would enhance the services and support for vulnerable elders in need and strengthen publicity and public education so as to promote a social climate of caring for the elderly. He enquired about the resources allocated for these initiatives in the coming year.
- 33. <u>Ms LI Fung-ying</u> said that victims of some family tragedies had turned to the relevant authorities or non-governmental organisations (NGOs) for assistance, but no intervention had been carried out prior to the outbreak of the incidents. She asked whether the Administration would allocate more resources for early identification and prevention of the potential cases of domestic violence.

- 34. <u>SHWF</u> responded that social workers made regular visits to families at risk. The Administration would step up its efforts to enhance the participation of the elderly in the community and help the elders understand their rights and the services available to them. Additional resources would also be allocated for public education and welfare services, focusing on early identification and prevention of domestic violence by mobilising community resources and encouraging mutual help at district level. The details of and resources allocated for these initiatives would be available after announcement of the Budget Speech in February 2007.
- 35. Mr TAM Yiu-chung pointed out that some incidents of domestic violence arose from family disputes relating to the tenancy of public rental housing. Considering that many family tragedies could be prevented if timely housing assistance were provided for victims of domestic violence, Mr TAM said that more flexibility should be exercised by SWD and the Housing Department (HD) in arranging compassionate rehousing for the potential victims.
- 36. <u>DSW</u> explained that on the recommendation of SWD, HD would arrange compassionate rehousing for public housing tenants facing domestic problems should they continue to stay in the same unit on condition that a divorce was being contemplated. However, there was very little social workers could do if both parties involved insisted to stay in the same unit in the meantime. The problem could be more complicated in the case of private housing, as the occupants might not wish to move out fearing that this could affect their property ownership.

### Setting up a specialised domestic violence court

- 37. <u>Dr YEUNG Sum</u> said that in view of the long duration and heavy costs of taking legal proceedings on domestic violence under the existing judicial system, the Democratic Party considered that a specialised domestic violence court should be set up to expedite cases relating to domestic violence. <u>Dr YEUNG</u> further said that the specialised domestic violence court could also provide family mediation service.
- 38. Mr Albert HO said that consideration should be given to exploring the feasibility of establishing a statutory mediation mechanism under the judicial system to handle family disputes. Mr HO said that mediation was increasingly accepted by the community as an alternative method of resolving family disputes. Successful mediation would also result in savings in legal costs.
- 39. <u>SHWF</u> responded that the Administration fully recognised the need to handle civil and criminal cases involving domestic violence expeditiously. The

Administration had discussed with the Judiciary Administration the feasibility of setting up a specialised domestic violence court in the local court system in the light of the experience gained from the United Kingdom and other jurisdictions. The Administration would revert to the Panel when it had concrete progress on the way forward.

40. In closing, the Chairman said that while members were generally supportive of the legislative proposals to amend DVO, they considered that the amendment bill should be introduced into LegCo expeditiously. The Chairman strongly urged the Administration to take heed of members' views for the scope of DVO to be further expanded to include non-spousal elderly abuse.

# V. Trust Fund for Severe Acute Respiratory Syndrome

[LC Paper Nos. CB(2)723/06-07(05) and (06)]

41. <u>DSHWF(F&W)</u> briefed members on the Administration's proposal to provide, under the Trust Fund for Severe Acute Respiratory Syndrome (SARS) (the Trust Fund), continued ex-gratia financial assistance to recovered and "suspected" SARS patients upon their reaching the accumulative assistance ceiling of \$500,000. The Administration also proposed to relax the frequency of medical assessments of the Trust Fund beneficiaries and to review the situation of all Trust Fund beneficiaries and decide by the end of 2009 the need for a more permanent scheme outside the Comprehensive Social Security Assistance (CSSA) Scheme to cater for the needs of those who were assessed by the Hospital Authority (HA) to be suffering from permanent dysfunctions. The Administration planned to seek funding approval from the Finance Committee (FC) before the Lunar New Year to increase the commitment of the Trust Fund by \$50 million.

### Retrospective payments

- 42. Mr WONG Kwok-hing welcomed the Administration's proposals. Considering that some Trust Fund beneficiaries had already reached the accumulative assistance ceiling and ceased receiving financial assistance from the Trust Fund, Mr WONG said that the additional financial assistance should be disbursed to these beneficiaries as soon as practicable to alleviate their financial difficulties, particularly in meeting the additional festive expenses arising from the Lunar New Year.
- 43. <u>Dr YEUNG Sum</u> said that while recognising the need to provide timely financial assistance to the SARS patients in financial hardship, the Trust Fund payments should be disbursed only after obtaining FC's approval in accordance with the established procedures. <u>Dr YEUNG</u> said that the Administration should consider providing other forms of financial assistance to SARS patients

with genuine needs to help them tide over the difficulties pending the approval of FC.

- 44. <u>DSHWF(F&W)</u> responded that there were 13 Trust Fund beneficiaries who had reached the accumulative assistance ceiling of \$500,000. The Administration had reviewed their cases and found their current situation varied. <u>DSHWF(F&W)</u> said that the Administration proposed to backdate their Trust Fund payments and arrange to disburse the retrospective payments to these patients once FC's approval was obtained. In the meantime, those SARS patients who had reached the accumulative assistance ceiling and were facing undue financial hardship could apply for CSSA.
- 45. Mr WONG Kwok-hing considered it unreasonable to ask the Trust Fund beneficiaries with imminent economic needs to apply for CSSA, as the application procedures were complicated and the processing time was long. To facilitate the disbursement of the retrospective payments immediately after obtaining FC's approval, Mr WONG suggested that the Administration could arrange for the preliminary assessments of the medical and financial needs of beneficiaries and seek FC's approval concurrently.
- 46. <u>DSHWF(F&W)</u> envisaged that the processing of medical assessments and financial reviews should not take long as some information in respect of the 13 Trust Fund beneficiaries who had reached the assistance ceiling was readily available. Notwithstanding that, the Administration would further consider Mr WONG's suggestion.

### Timetable for seeking FC approval

- 47. <u>Dr Fernando CHEUNG</u> said that a motion on "Assistance to patients of SARS and their families" was passed at the LegCo meeting on 17 May 2006. He commented that the Administration was slow in putting forward the funding proposals to relieve the financial hardship faced by the SARS patients and their families. <u>Dr KWOK Ka-ki and Mr WONG Kwok-hing</u> shared the view of Dr CHEUNG. <u>Dr KWOK</u> said that while he supported the funding proposal, he criticised the Administration for submitting the proposals only until some Trust Fund beneficiaries were no longer entitled to receive financial assistance under the Trust Fund. It was irresponsible for the Administration to ask the Trust Fund beneficiaries to apply for CSSA if they had financial difficulties.
- 48. <u>DSHWF(F&W)</u> responded that the Administration was committed to providing tide-over assistance to SARS patients pending their recovery from the dysfunctions. The Administration had been endeavouring to provide continued assistance to the SARS patients and their families. <u>DSHWF(F&W)</u> explained that in addition to seeking the approval of FC to increase the commitment of the Trust Fund, the Administration had also adjusted the criteria for the Trust Fund

to address the needs of those who had reached or would reach the assistance ceiling under the Trust Fund, viz. the retrospective payments and the adjustment of the frequency of medical assessment and financial reviews. These were not covered by the motion passed by LegCo.

- 49. <u>Dr YEUNG Sum</u> held the view that the Administration should seek FC's approval as soon as possible. Noting from paragraph 23 of the Administration's paper that it would seek FC's approval in late April 2007 if it was unable to put the item on the FC agenda before the Lunar New Year, <u>Dr YEUNG Sum</u> said that in view of the urgency of the funding proposal, an additional FC meeting could be convened to consider the proposal. <u>The Chairman</u> said that the Panel would express full support for the request.
- 50. In response to the Chairman, <u>DSHWF(F&W)</u> said that the Administration planned to submit the funding proposal to FC for approval at its meeting scheduled for 26 January 2007, if the Panel supported the proposal.

### Eligibility criteria for the Trust Fund

- 51. <u>Ms LI Fung-ying</u> expressed support for the funding proposals. Having regard to the contributions made by healthcare workers in the fight against SARS, <u>Ms LI</u> hoped that the Administration would relax the criteria for assessing the continued eligibility of SARS patients for assistance under the Trust Fund to ensure continued financial assistance for them.
- 52. <u>Dr KWOK Ka-ki</u> said that as the Trust Fund had been set up to provide special ex-gratia relief payments to patients of SARS and their families, the criteria for providing assistance under the Trust Fund should not be too stringent. He was disappointed that families of the deceased "suspected" SARS patients were still not covered by the Trust Fund as they also suffered loss of their family members as a result of SARS. <u>Dr Fernando CHEUNG and Mr Frederick FUNG</u> expressed similar views and urged the Administration to further expand the scope of the Trust Fund as proposed in the motion passed at the LegCo meeting on 17 May 2006.
- 53. <u>DSHWF(F&W)</u> said that SHWF had stated clearly in his response to the motion debate that the Administration was open-minded on the proposal of extending assistance to SARS patients in need. As many SARS patients had gradually recovered from their dysfunctions, the number of patients requiring support from the Trust Fund had decreased. SHWF had explained the reason for not extending the scope of the Trust Fund to cover families of the deceased "suspected" SARS patients and granting special ex-gratia relief payments to families with deceased elderly SARS patients irrespective of whether the affected families had been relying on the deceased for financial support. <u>DSHWF(F&W)</u> added that discretion had been exercised to waive the stipulated criteria in cases

involving deceased elderly SARS patients after taking into account the relevant circumstances of individual cases.

### Support and assistance for SARS patients

- 54. Mr WONG Kwok-hing and Dr KWOK Ka-ki asked about the employment assistance provided for SARS patients. DSHWF(F&W) responded that the Administration had provided a wide range of support services to the SARS patients, including medical, psychological counselling and employment support. As regards employment assistance, comprehensive and free rehabilitation training, employment training and retraining as well as job-seeking assistance were provided by the HA, SWD/NGOs and the Labour Department to recovered SARS patients.
- 55. <u>Dr KWOK Ka-ki</u> said that some SARS patients found the support and assistance provided by the Administration fell short of their needs. <u>Dr KWOK</u> requested the Administration to provide further information on the support services for the SARS patients. <u>Dr YEUNG Sum</u> said that SARS patients with permanent dysfunctions should be regarded as "severely disabled" and provided with long-term support services.
- 56. <u>DSHWF(F&W)</u> advised that in addition to SHWF's speech delivered at the motion debate at the Council meeting on 17 May 2006, detailed information on the support services provided for SARS patients suffering from dysfunctions was submitted to members for consideration at the joint meeting of the Panel on Health Services, the Panel on Welfare Services and the Panel on Manpower on 9 March 2006. She added that the Administration could re-circulate the paper for members' reference.

Admin

57. <u>Dr KWOK Ka-ki</u> asked for the number and situation of healthcare workers in private hospitals who were infected with SARS at work. He expressed concern about the support for these healthcare workers, particularly the provision of compassionate sick leave. <u>Director (Cluster Services), HA</u> responded that he had no such information at hand. <u>DSHWF(F&W)</u> said that the Administration would provide the requested information after the meeting.

Admin

58. Ms LI Fung-ying and the Chairman expressed concern about the current situation of HA staff suffering from SARS-related dysfunctions and asked about the assistance provided for them. Director (Cluster Services), HA said that of some 300 HA staff suffering from SARS-related dysfunctions, only six were still unable to resume work because of their health conditions. HA had launched an integrated rehabilitation program for these staff, and job rehabilitation would be carried out depending on the actual progress of the health conditions of staff concerned. HA had also arranged for the relevant staff to take up suitable jobs after taking into account their physical and psychosocial conditions.

- 59. In response to the Chairman, <u>Director (Cluster Services)</u>, <u>HA</u> said that of the 233 persons receiving assistance from the Trust Fund at present, 143 were suffering from limitations in daily living and activities, while the remaining 90 were having Avascular Necrosis, pulmonary problems or psychological dysfunction. The Administration would continue to provide assistance for them as necessary.
- 60. Mr LEUNG Kwok-hung considered the assistance provided for the SARS patients inadequate. As some SARS patients were healthcare workers who had demonstrated a high sense of selfless devotion and professionalism in fighting against SARS, he asked whether senior Government officials had met regularly with these SARS patients to understand their needs and problems.
- 61. <u>DSHWF(F&W)</u> responded that needy SARS patients were followed up by a social worker to address their welfare needs. In addition, Government funds were provided for the Hong Kong SARS Mutual Help Association to develop self-help and mutual help among SARS patients and their families. To her knowledge, senior Government officials had met with members of the Association.

### Longer term arrangement for the Trust Fund

- 62. Noting that the Administration would review the situation of all Trust Fund beneficiaries and decide by the end of 2009 the continued need for the Trust Fund, <u>Dr KWOK Ka-ki</u> said that SARS was a new disease and it remained uncertain whether the health conditions of the SARS patients would stabilise in the next three years. <u>Dr Fernando CHEUNG</u> raised a similar concern and enquired why the review of the need for a more permanent scheme outside CSSA to cater for the needs of the SARS patients would only be completed by the end of 2009.
- 63. <u>DSHWF(F&W)</u> responded that according to HA's advice, most of the complications arising from serious illness should surface within five to six years after the patients' discharge from the hospitals. As such, it was envisaged that the health conditions of the SARS patients should stabilise in another three years' time, towards end 2009. The Administration believed that it would have more reliable data then to decide if there should be longer term arrangements for SARS patients who suffered from permanent dysfunctions. A decision was expected to be made by the end of 2009. <u>DSHWF(F&W)</u> added that the Administration had not formed a view on the longer term arrangements at this stage.
- 64. <u>Ms LI Fung-ying</u> supported the proposal to conduct a review of the longer term arrangements for assistance to SARS patients. <u>Mr WONG Kwok-hing</u> hoped that the review could be advanced and completed by the end of the current

Admin

LegCo term so that members could follow up the matter. The Chairman and Dr YEUNG Sum expressed a similar concern. They requested and DSHWF(F&W) agreed to provide an interim report on latest situation of the SARS patients to the Panel before the end of the current LegCo term.

65. <u>The Chairman</u> concluded that the Panel supported the funding proposal. The Panel also urged the Administration to submit the funding proposal for the approval of FC as early as possible.

(*Post-meeting note*: The funding proposal would be considered by FC on 26 January 2007.)

### VI. Any other business

66. There being no other business, the meeting ended at 12:50 pm.

Council Business Division 2 <u>Legislative Council Secretariat</u> 8 February 2007