

**Legislative Council
Bills Committee on Residential Care Homes (Persons with Disabilities) Bill**

**Administration's Response to Issues Raised by Members
at the Bills Committee Meeting held on 3 December 2010**

Purpose

As requested by Members of the Bills Committee on Residential Care Homes (Persons with Disabilities) Bill (the Bill) at the meeting held on 3 December 2010, this paper sets out the classification mechanism of residential care homes for persons with disabilities (RCHDs) under the 2008 Code of Practice (CoP) for RCHDs.

Classification of Residential Care Homes for Persons with Disabilities

2. In line with the existing practice of private residential care homes for the elderly, every applicant for RCHDs should have a medical examination conducted by a registered medical practitioner before admission. The medical examination primarily serves to facilitate a RCHD to formulate an individual care plan for the resident in light of his/her health condition. Under the CoP, the Social Welfare Department (SWD) may request RCHDs to submit the medical examination reports of their residents to facilitate classification of the RCHDs. SWD will classify the RCHDs into three categories according to the levels of care and assistance required by their residents, namely high-care-level RCHDs, medium-care-level RCHDs and low-care-level RCHDs. SWD will take into consideration the profile of the residents admitted to the private RCHD concerned at the time of submission of application for issuance / renewal of licence in determining the category of the RCHDs.

3. In practice, RCHDs may concurrently admit residents requiring different levels of care services. Under the circumstances, according to the 2008 CoP, if an RCHD admits a mixture of persons with disabilities who need low, medium and / or high levels of care, the low-care-level residential places for persons with disabilities will be disregarded, regardless of their number or percentage, and the RCHD concerned can only be classified as either a high-care-level RCHD or a medium-care-level RCHD depending on the proportion of these two types of residents. If an RCHD admits residents who need care services of medium and high levels, the classification will be made

according to majority rule. In other words, the RCHD will be classified as a high-care-level home if more residents are receiving care services of a high level, and vice versa. If the numbers of residents receiving care services of high and medium levels are the same, the RCHD shall be classified as a high-care-level home. The above principles can ensure that the interest of residents who need care services of a higher level will be protected. A table listing the classifications under different scenarios is set out at Annex for Members' reference. All small group homes for persons with disabilities will be classified as low-care-level homes as the number of their residents is limited to eight.

4. After determining the category of a RCHD, SWD will specify clearly the level of care services provided by the RCHD on its licence for identification purposes. Although private RCHDs may decide on their own the admission of different types of persons with disabilities, SWD will conduct regular inspections to ensure the residents' interests are protected. If any home is found to have violated the CoP's principles for classification of RCHDs, which has in turn affected its quality of service, the Director of Social Welfare may, according to the relevant provision (proposed to be Clause 18) under the Bill, give any directions to any RCHDs by notice in writing to ensure that the residential care home is operated and managed satisfactorily and the welfare of the residents is promoted in a proper manner, etc..

Labour and Welfare Bureau
Social Welfare Department
December 2010

**Classification of RCHDs according to
the proportion of residential places providing different levels of care**

Residential places providing different levels of care (proportion)	Classification of RCHDs
High-care-level and medium-care-level residential places (with more high-care-level residential places)	High-care level
High-care-level and medium-care-level residential places (with more medium-care-level residential places)	Medium-care level
High-care-level and medium-care-level residential places (with the same proportion of residential places)	High-care level
High-care-level and low-care-level residential places (with more high-care-level residential places)	High-care level
High-care-level and low-care-level residential places (with more low-care-level residential places)	High-care level
High-care-level and low-care-level residential places (with the same proportion of residential places)	High-care level
Medium-care-level and low-care-level residential places (with more medium-care-level residential places)	Medium-care level
Medium-care-level and low-care-level residential places (with more low-care-level residential places)	Medium-care level
* High, medium and low-care-level residential places (with more high-care-level residential places)	High-care level
* High, medium and low-care-level residential places (with more medium-care-level residential places)	Medium-care level
* High, medium and low-care-level residential places (with more low-care-level residential places)	By comparing the proportion of high-care-level and medium-care-level residential places. If the number of high-care-level places is higher, it will be classified as a high-care-level RCHD; if that of medium-care-level places is higher, it will be classified as a medium-care-level RCHD.
* High, medium and low-care-level residential places (with the same proportion of high-care-level and medium-care-level residential places)	High-care level

* The number of low-care-level residential places will be disregarded.