

# 立法會 *Legislative Council*

LC Paper No. CB(2)773/2024

Ref.: CB2/PS/2/22

## **Panel on Welfare Services**

### **Report of the Subcommittee on Issues Relating to Policy on Monitoring Child Protection Agencies**

#### **Purpose**

This paper reports on the deliberations of the Subcommittee on Issues Relating to Policy on Monitoring Child Protection Agencies (“the Subcommittee”) under the Panel on Welfare Services (“the Panel”).

#### **Background**

##### Residential child care services

2. The subvented and subsidized residential child care and related services in Hong Kong have all along been operated by non-governmental organizations (“NGOs”) with resources provided by the Government. The Social Welfare Department (“SWD”) adopts a “child-centred, family-focused and community-based” approach in the provision of child welfare services. To support children and young persons under the age of 21 who cannot be adequately cared for by their families because of various reasons (e.g. behavioural, emotional or relationship problems, or family crises arising from illness, death and desertion), SWD has been subsidizing NGOs under the Lump Sum Grant Subvention System to provide various types of **24-hour residential child care services** (“RCCS”) for the abovementioned able-bodied children and children with disabilities. Residential care services for able-bodied children and residential care and rehabilitation services for children with disabilities are categorized into two main types, namely institutional services and non-institutional services.

**Institutional services** include residential child care centres (“RCCCs”) <sup>1</sup>, residential special child care centres (“RSCCCs”), children’s homes, children’s reception centres, boys’/girls’ homes and boys’/girls’ hostels. **Non-institutional services** include foster care service, small group homes (“SGHs”) and SGHs for mildly mentally handicapped children/integrated SGHs.

### Service review

3. The Task Force for Review on Enhancement of Lump Sum Grant Subvention System released the Review Report on Enhancement of Lump Sum Grant Subvention System in July 2021, putting forth a number of recommendations to enhance the system under five domains, one of which is enhancement of service quality. To this end, SWD has prioritized the review of residential child care and related services and set up **the Committee on Review of Residential Child Care and Related Services** (“the Review Committee”) in April 2022 under the chair of the Director of Social Welfare (“DSW”). The Review Committee completed the review on (a) **service quality**, (b) **service regulation and monitoring**, and (c) **service planning and provision** in two phases in August 2022 and March 2023 respectively. **The First Phase Review** covered RCCCs and RSCCCs for children under aged 6, while **the Second Phase Review** covered other types of residential child care and related services.<sup>2</sup>

### **The Subcommittee**

4. At its policy briefing-cum-meeting held on 14 February 2022, the Panel agreed to appoint a subcommittee under the Panel to study issues related to monitoring child protection agencies. As soon as a vacant slot for subcommittees on policy issues had arisen, the Subcommittee commenced its work in May 2023. The terms of reference and membership list of the Subcommittee are set out in **Appendices 1 and 2** respectively.

5. Chaired by Hon Judy CHAN, the Subcommittee held a total of four meetings. At one of the meetings, the Subcommittee received representations from 13 deputations/individuals on “Current situation and challenges of the residential child care and related services”. A list of

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<sup>1</sup> RCCCs serving children from birth to under three years old are also known as residential crèches; and RCCCs serving children aged three to under six are also known as residential nurseries.

<sup>2</sup> The two-phases review reports are accessible at SWD’s website at: [https://www.swd.gov.hk/en/pubsvc/family/fcw\\_info/fcwdocument/rcccrs/](https://www.swd.gov.hk/en/pubsvc/family/fcw_info/fcwdocument/rcccrs/).

deputations and individuals which/who have given views to the Subcommittee is in **Appendix 3**.

### **Deliberations of the Subcommittee**

6. The Subcommittee commends the Review Committee for completing the review in two phases within one year in a professional and highly efficient manner, and for putting forward 31 and 39 recommendations for improvement in the reports of the First Phase Review and the Second Phase Review respectively, with a view to enhancing the overall quality of RCCS and ensuring that the children concerned are properly cared for and protected. The Subcommittee's discussion mainly focuses on how the Administration would implement the recommendations of the Review Committee. In this connection, members have requested the Administration to provide information on the concrete timetable for the implementation of each of the recommendations. While the Administration has not provided detailed information in respect of each of the recommendations, the Subcommittee is assured that it would implement all the recommendations in a progressive manner and would continue to maintain close communication with the sector. The major deliberations of the Subcommittee are set out in the ensuing paragraphs.

#### Regulation and monitoring of services

##### *Internal audit of service performance*

7. Similar to other subvented services operated by NGOs, the performance of residential child care and related services are monitored by SWD through the Service Performance Monitoring System ("SPMS"). Under SPMS, subvented service operators are obliged to comply with the Essential Service Requirements (e.g. the essential staffing), Output Standards (e.g. the number of cases served), Outcome Standards (e.g. the rate of satisfaction by service users and/or their family members), and 16 Service Quality Standards set out in the Funding and Service Agreements ("FSAs"). Under the principle of encouraging service operators to take greater accountability for the performance of their service units, service operators are required to submit statistical reports periodically and annual self-assessment reports on whether their service units meet the above requirements and standards. Regarding the Review Committee's recommendation that operators should put in place an effective internal monitoring mechanism and strengthen their daily management, the Subcommittee is informed that SWD has requested all organizations operating subvented welfare services (including residential child care and related services) to enhance their internal monitoring mechanism by

designating service supervisors or above, or internal audit units or teams to conduct internal service audit for their service units.

### *Visits and inspections*

8. Under SPMS, the Subventions Section of SWD conducts external assessments through performance assessment visits. One form is scheduled or surprise review visit (i.e. with at least one service unit of each operator being visited in each three-year monitoring cycle), whereas the other form is risk-based visit<sup>3</sup>. In addition, to ensure that RCCCs and RSCCCs regulated under the Child Care Services Ordinance (Cap. 243) and the Child Care Services Regulations (Cap. 243A)<sup>4</sup> comply with the statutory requirements on aspects such as staffing, space and design, safety measures, quality of care, etc., as well as the requirements set out in the Operation Manual for Pre-primary Institutions, the Child Care Centre Advisory Inspectorate (“CCCAI”) under the Licensing and Regulation Branch of SWD would conduct inspections and take enforcement action. The Subcommittee notes that, in addition to the existing social work inspectors, health inspectors served by nurses have been incorporated in CCCAI in order to observe the conditions of children more comprehensively. Furthermore, the frequency of inspections for such centres has been increased from three times in 15 months to six times in 12 months since February 2022 and will be increased based on risk assessments. If any child care centre is found not complying with the requirements, CCCAI will issue written advice, warnings or directions depending on the nature and severity of the non-compliance. If the child care centre concerned persistently fails to comply with the requirements, DSW may consider initiating prosecution or cancelling its registration.

9. The Subcommittee also notes that SWD has, as recommended in the Report of the First Phase Review, set up service quality groups (members include district leaders, Justices of the Peace and professionals from different sectors such as medical, allied health, education and social welfare, etc.) in October 2022 to conduct unannounced visits to RCCCs and RSCCCs and advise on the services provided. On the Review Committee’s recommendation that service operators should establish a mechanism to monitor the staff turnover on an ongoing basis, members are concerned about

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<sup>3</sup> According to the Administration, risk-based visits include visits to RCCS units which fail to meet the Essential Services Requirements and Service Quality Standards set out in the FSAs, or where there is a need to follow up on service performance.

<sup>4</sup> RCCCs and RSCCCs, which fall within the definition of “child care centre” in the Child Care Services Ordinance (Cap. 243), are subject to the regulatory regime of the Ordinance and the Child Care Services Regulations (Cap. 243A). Section 6 of the Regulations provides for the minimum staff requirements that child care centres should comply with.

whether **SWD has collected relevant information on a regular basis to assess the turnover rate of frontline staff**, as the sector has repeatedly relayed the difficulties in retaining frontline staff. The Administration has advised that the inspections conducted by SWD and the service quality groups reveal that various service units of the service operators are in compliance with the staffing requirements of FSAs and the statutory staffing requirements for child care services, where applicable.

*Coordination and resources of the various service branches of the Social Welfare Department*

10. Another recommendation of the Review Committee on strengthening monitoring and regulation is to enhance coordination among service branches of SWD for the conduction of joint operations and in-depth investigations on complaints or unusual situations. For non-compliant operators, the Review Committee recommends setting a surveillance period. In addition, if DSW considers that a supervisor or child care worker is no longer fit for the relevant work, he/she may be deregistered. As the monitoring of RCCS involves the following five service branches under SWD: (a) the Licensing and Regulation Branch; (b) the Subventions Branch; (c) the Family and Child Welfare Branch; (d) the Rehabilitation and Medical Social Services Branch; and (e) the Youth and Corrections Branch,<sup>5</sup> members are concerned about **the work of enhancing communication and coordination among the various service branches to better safeguard the service users and handle critical incidents**. The Subcommittee is advised that SWD has set up the Committee on the Service Quality of Residential Child Care and Related Services led by the Deputy Director. CCCAI, the Subventions Section of the Subventions Branch and the relevant service branches will hold a joint meeting every six months to review the performance of each RCCC or RSCCC in a more focused manner, conduct timely risk assessments, discuss investigation strategies, report assessment results, jointly formulate follow-up plans (e.g. conduct joint operations and in-depth investigations), and review the inspection results of the service quality groups.

11. In view of the Review Committee's recommendation to revise FSAs to specify in the Essential Service Requirements that children in all types of

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<sup>5</sup> According to the Administration, the relevant functions of these branches are (a) the Licensing and Regulation Branch conducts inspections at RCCCs and RSCCCs through CCCAI to ensure their compliance with the requirements of the Child Care Services Ordinance and the Child Care Services Regulations; (b) the Subventions Branch monitors subvented service units to ensure their compliance with the requirements of FSAs; (c) the Family and Child Welfare Branch is responsible for foster care service, SGHs and children's homes; (d) the Rehabilitation and Medical Social Services Branch is responsible for RSCCCs; and (e) the Youth and Corrections Branch is responsible for boys'/girls' homes and boys'/girls' hostels.

RCCS are free from abuse, and the future implementation of **the proposed** mandatory reporting regime for child abuse cases, members consider it necessary for the Administration to **provide adequate resources for the various service branches of SWD** to handle the possible increase in the monitoring work arising therefrom. The Administration has advised that to support the implementation of the proposed mandatory reporting regime for child abuse cases, an additional recurrent provision of \$24.2 million would be allocated from the 2024-2025 financial year onwards for creating 41 permanent posts (including posts created under SWD) to enhance its enforcement and support capacity.

*Use of technologies to strengthen internal monitoring*

12. The Subcommittee notes that at the request of SWD, all RCCCs and RSCCCs have installed closed-circuit television (“CCTV”) surveillance systems and put in place policies and mechanisms for monitoring and viewing CCTV footage to enhance the monitoring of their services and secure the well-being of the children in their care. Regarding the implementation of the Review Committee’s recommendation of introducing new technology into such CCTV surveillance systems in order to strengthen monitoring, the Administration is taking forward the work relating to the introduction of artificial intelligence technology into the CCTV surveillance systems of RCCCs and RSCCCs to strengthen internal monitoring. To this end, the Administration briefed the organizations operating these centres in December 2023 on the latest proof-of-concept results on the use of technology to detect inappropriate behaviour in child care, so as to enable their preparation for the introduction of such systems after taken into account their existing facilities and actual environment. Members urge the Administration to **continue taking forward the development of proven and validated artificial intelligence systems** to assist operators of RCCCs and RSCCCs in **monitoring their service quality** in a more effective and comprehensive manner, and to identify inappropriate behaviour of staff at an early stage. As recommended by the Review Committee, operators of other RCCS should also set up CCTV surveillance system at appropriate areas to monitor the daily operation of their services.

Manpower planning

*Implementation of recommendations on manpower planning*

13. According to the Reports of the First and Second Phase Review, the information provided by various types of RCCS units in 2022 indicates that

service users assessed as having special needs<sup>6</sup> in terms of education, care, mental health conditions, etc. in these units accounted for about 40% to 60% of the total service places, while the proportion of service users suspected of having special needs (to be assessed) was between 3% and 9%. The relevant percentage breakdown by service unit is as follows:

	Service users having been diagnosed/assessed with special needs	Service users suspected to have special needs
RCCC	42.9%	9.0%
Children's Home	45.9%	4.1%
SGH	49.7%	6.6%
SGH for Mildly Mentally Handicapped Children	63.5%	0.0%
Boys'/Girls' Home	42.8%	3.0%
Boys'/Girls' Hostel	35.8%	7.4%

Members have expressed grave concern over the above situation. They note that the Administration has allocated \$56.7 million in the 2023-2024 financial year and an additional annual funding of approximately \$80 million from the 2024-2025 financial year onwards to implement the recommendations put forth in the Report of the First Phase Review on improving the manning ratio of child care workers, providing additional frontline supporting staff and introducing professional support, etc. in light of the continuous increase in the proportion of service users with special needs. The additional subventions mentioned have been disbursed to **RCCCs** and **RSCCCs** from October 2023 onwards. Members have requested the Administration to follow up on the **implementation** of relevant recommendations in these centres and urged the Administration to **draw up a concrete timetable** for implementation of the recommendations on strengthening manpower planning for other types of RCCS as **put forth in the Report of the Second Phase Review**.

14. The Administration has advised that since RCCCs and RSCCCs have been provided with additional subventions starting from October 2023 onwards, one registered nurse, two enrolled nurses, one clinical psychologist, two social work assistants, one child care supervisor, two senior child care workers, 11 child care workers/special child care workers and 10 child care aides (a new post created to share some of the daily duties of child care workers) have been added to the staff of each 100-place RCCC. The

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<sup>6</sup> Type of special needs include attention deficit/hyperactivity disorder, specific learning difficulties, speech and language impairment, limited intelligence, autism spectrum disorders, oppositional defiant disorder, depression, development delay, obsessive compulsive disorder, adjustment disorder, violent behaviour, self-harm behaviour and others (e.g. spasm, anxiety).

manning ratios of day-time and night-time child care workers of such centres have been increased from 1:6.2 and 1:12 to 1:5 and 1:8 respectively. As regards RSCCCs, seven special child care workers, two health workers and 0.5 clinical/education psychologists have been added for every 30 service places of RSCCCs. The manning ratios of day-time and night-time child care workers of such centres have been increased from 1:4.5 and 1:7.5 to 1:3.5 and 1:5 respectively. In addition, the Administration has begun to follow up on recommendations that do not involve additional resources as put forth by the Second Phase Review Report, including reviewing human resource requirements etc. For other recommendations involving additional resources allocation, including strengthening manpower deployment and professional support etc., the Administration will seek additional resources under the established mechanism to implement relevant improvement measures.

*Manpower deployment for provision of residential family care services*

15. The Subcommittee notes that each SGH should provide round-the-clock care for children with at least one staff member present at all times in accordance with the requirements of the relevant FSA. According to the staffing establishment of a SGH, there are 10 welfare workers and 1.2 social workers providing services to every 24 children (i.e. 3.3 welfare workers (including one welfare worker as the houseparent) and 0.4 social workers for every SGH with eight children). In other words, social worker-to-children and houseparent-to-children ratios in SGHs are 1.2:24 and 1:8 respectively. Members have pointed out that in general, while there are relatively more staff on duty during daytime, only houseparents and their partners stay overnight to attend to children's needs which are more likely to arise at night (e.g. illness), and that children with special needs may have various emotional/behavioural problems which need to be dealt with. In addition, social workers often find it difficult to concentrate on casework because of the heavy administrative work. Members call on the Administration to progressively **improve the manning ratios in SGHs by increasing the ratio of houseparents (especially those on overnight shifts) to children to 1:4 and the ratio of social workers to children to 1:12**, as well as draw up a **timetable** to this end.

16. Members are concerned that at present, houseparents of SGHs have to take on extra duties such as meal preparation, cleaning and general duties in the absence of Workman II. Members have proposed that the Administration should, in view of the nature of the residential family care services provided by **SGHs**, explore the feasibility of allowing SGHs to **employ foreign domestic helpers**, so as to strengthen general support (especially during overnight shifts) and allow houseparents to focus on their role as the caregiver of children. The Administration has advised that while SGHs



provide family-based residential care services, their service locations are still regarded as workplaces, which do not comply with the requirement that foreign domestic helpers can only perform domestic work at the employers' residence. Notwithstanding, the Labour and Welfare Bureau will examine the proposal with SWD and the Immigration Department, and explore other measures to improve the relevant manpower deployment so as to alleviate the care pressure on staff.

### *Professional support*

17. Children receiving residential child care need support from multi-disciplinary professionals including nurses and clinical/educational psychologists, in addition to appropriate care from frontline staff such as child care workers and welfare workers. Members note that the Administration will, as recommended by the Review Committee, enable children who have been waitlisted for pre-school rehabilitation services in RCCCs to receive on-site rehabilitation services at an early stage, and allocate additional subventions to the operators of RCCC to procure on-site medical services, with the aim to meet the training and medical needs of the children concerned respectively. Members are concerned that the cost per case served by RCCS units in recent years has increased as the conditions and family circumstances of service users have become more complicated than before. They suggest that the Administration should consider the views of the sector in **allocating additional resources based on the number of service users with special needs when conducting reviews on the Lump Sum Grant Subvention System** in the future in order to ensure that the operators have sufficient resources to address the needs and conditions of individual children.

18. Some members have considered that the Administration should draw reference from the **Three-Tier School-based Emergency Mechanism**<sup>7</sup> and establish a similar mechanism for RCCS to facilitate the early identification of children with special needs by residential care homes and to provide them with appropriate support as soon as possible. The Administration has advised that the function of the existing multidisciplinary teams of residential care homes for children is comparable to the first tier of the mechanism, with the personnel concerned working together to identify children with special

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<sup>7</sup> Under the Three-Tier School-based Emergency Mechanism, schools give priority to caring for and counselling students at higher risk of suicide with the school's multidisciplinary team in the first tier, and provide timely assistance and seek professional counselling or treatment services for them. If there is a shortage of manpower in schools, the Education Bureau will assist in referring cases to the off-campus support network team in the second tier, which is coordinated by SWD, for follow-up actions. The third tier provides the ultimate safeguard, offering healthcare services for students with severe mental health needs.

needs and provide timely and appropriate intervention. If the relevant manpower is insufficient to meet the needs of children, the Agency-based Enhancement of Professional Staff Support Services in Residential Care Homes (“ABPSS”), which has been implemented by the Administration since 2014, will play a similar role as the second tier of the mechanism, under which service operators can deploy the resources allocated to engage/employ social work services and clinical psychological services for children with special needs. As to how the Administration will implement the Review Committee’s recommendation to expand the scope of ABPSS, there are views that service operators should be allowed to deploy the additional resources as allocated to **introduce other non-healthcare professional support services such as art therapy, play therapy or music therapy in their service units**. The Administration has advised that it will look at ways of increasing the flexibility of service operators to deploy funding under ABPSS, enabling them to purchase appropriate services.

#### *Manpower supply*

19. Pointing out that the sector has relayed the difficulties in recruiting and retaining staff of RCCS units, members are concerned that with the implementation of the various recommendations of the Review Committee to strengthen the monitoring of RCCS, the work pressure on frontline staff may increase, which may further aggravate the already high vacancy and wastage rates. Members have requested that the Administration to **conduct a review of the manpower structure of RCCS and the functions of care workers at different ranks**, and formulate a **long-term plan** for manpower supply. A suggestion is to introduce a “Hire and Train” Scheme for those positions requiring the possession of relevant qualifications to encourage the latent labour force to pursue a career in RCCS, thereby alleviating the current manpower shortage. The Administration has informed the Subcommittee that in line with the Review Committee’s recommendation on nurturing social workers to pursue a career in RCCS, it has, through the Residential Child Care Services Development Committee, explored the strategies to promote the positive benefits of RCCS with the sector and to deepen the understanding of the services among students enrolled in social work programmes, with a view to attracting them to work for RCCS service units after graduation.

#### *Strengthening awareness of caring and protecting children*

20. Members have expressed concern about the implementation of the work to **strengthen awareness of child protection in the sector**. The Subcommittee has been advised that SWD has requested service operators to enhance the professional knowledge and skills of staff at different ranks in protecting and caring children, and to implement the Registration Scheme

of Superintendents in RCCCs, RSCCCs, children's homes and boys'/girls' homes and boys'/girls' hostels in December 2023, as recommended by the Review Committee. Under the Scheme, superintendents must complete designated training programmes on child protection before registration and receive continuous training, so that they can identify children with suspected abuse or neglect condition at an early stage. In addition, following the future implementation of the proposed mandatory reporting regime for child abuse cases, superintendents will also be required to bear the responsibility of making reports on known suspected child abuse cases. Members are of the view that **superintendents** should also **understand the developmental needs of children at various stages** and strive to build a **caring culture** in residential care homes.

### Service planning and provision

#### *Review of service needs*

21. In terms of service provision, one of the Review Committee's recommendations is that SWD should review the demand for various types of RCCS for long-term service planning, including closely monitoring the demand for and utilization of various types of RCCS, and increasing service provision as appropriate. Members have requested the Administration to review the number of waitlistees for, the waiting times for, the occupancy rates and the average length of stay of various types of RCCS in order to **assess service demand**. They have also expressed concern that with the potential increase in reported cases of suspected child abuse upon implementation of the **proposed mandatory reporting regime for child abuse** in the future, the **demand for emergency RCCS** is expected to increase.

#### *Service provision of family-based residential care services*

22. The Subcommittee has noted that the Administration will accord priority to developing non-institutional residential care services (i.e. SGHs and foster care service), as children under a family-based care environment are more likely to be able to receive appropriate care and have better physical and emotional growth and development in general. The number of service places, the average monthly number of waitlistees and the average monthly waiting time for the services concerned are set out below:

	SGH <sup>8</sup>	SGH for mildly mentally handicapped children	Foster care service
Number of services places (As of 31 December 2023)	978	104	1 190 <sup>9</sup>
Average monthly number of waitlistees (2022-2023 financial year)	388	110	22 <sup>10</sup>
Average waiting time (month) <sup>11</sup> (2022-2023 financial year)	4.7	17.5	1.8

The Administration has informed the Subcommittee that in the 2023-2024 financial year, three SGHs with a total of 30 service places will be set up in the Eastern District and an additional 100 foster care service places will be provided. For emergency/short-term care in SGH, there were a total of 49 places available as of 31 December 2023. According to the current service plan, in the long term, the total numbers of service places for SGHs, emergency/short-term care in SGHs and SGHs for mildly mentally handicapped children are expected to increase to 1 692, 112, and 216 respectively by the 2035-2036 financial year. For foster care service, the total number of service places is expected to increase to 1 310 by the 2035-2036 financial year, of which 155 will be foster care emergency care service places.

23. Members are concerned about the increase in the number of withdrawals of foster families in recent years. They are pleased to note that

<sup>8</sup> Among them, 24 SGHs provide a total of 24 service places to accommodate mildly mentally handicapped children.

<sup>9</sup> Including ordinary and emergency foster care service places.

<sup>10</sup> Figures shown are the number of waitlistees for ordinary foster care service but do not include difficult cases in matching and cases waitlisting for emergency foster care service.

<sup>11</sup> The longest and shortest waiting times for these services in the financial year 2022-2023 are set out below:

	SGH	SGH for mildly mentally handicapped children	Foster care service
The longest waiting time (Month)	27.8	36.6	3
The shortest waiting time (Month)	0.1	1.6	0.6

the Chief Executive has announced in his 2023 Policy Address that to encourage supportive individuals to become foster families, the incentive payment for foster families would be substantially increased starting from April 2024 from some \$5,000 to some \$11,000 per month for foster care service, and from some \$6,600 to some \$13,000 per month for emergency foster care service, and that additional support would also be provided to foster families taking care of children with special learning or care needs, including arranging early assessment and appropriate professional rehabilitation therapy and training. They have enquired about the other measures put in place by the Administration to **attract more families to join the foster care service**. Members have requested the Administration to provide foster families with **occasional child care services for the foster children** in order to relieve the pressure on foster parents, especially those taking care of foster children with special needs. The Administration has advised that SWD will launch “one-plus-one” recruitment programme for persons interested in joining foster care service to pair up with their relatives and friends to care for foster children together and serve as substitute parents for each other, thus providing breaks for foster parents. Meanwhile, the Central Foster Care Unit and foster care agencies have devised the promotional plan for foster care service, with a view to attracting more families to become foster parents.

*Provision of institutional residential care services for young children*

24. Members have noted the number of service places, the average monthly number of waitlistees and the average monthly waiting time for RCCCs taking care of children from birth to under three years old and children aged three to under six<sup>12</sup> are as follows:

	RCCC (aged 0 to under 3)	RCCC (aged 3 to under 6)
Number of services places (As of 31 December 2023)	159	53
Average monthly number of waitlistees (2022-2023 financial year)	33	17

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<sup>12</sup> Including two residential crèches for children aged 0 to under 3 and one residential nursery for children aged 3 to under 6.

	RCCC (aged 0 to under 3)	RCCC (aged 3 to under 6)
Average waiting time (month) <sup>13</sup> (2022-2023 financial year)	6.5	17.3

Members have expressed concern about the developmental needs of babies who remain in hospitals awaiting residential care service because of being abandoned or not being able to receive appropriate care due to various reasons. The Administration has informed the Subcommittee that SWD has already embarked on increasing the relevant service places, including setting up a RCCC in Tuen Mun District with 48 places for emergency residential service in the 2024-2025 financial year, and providing an additional 48 places for emergency residential service in RCCCs in Kowloon District in the 2025-2026 financial year. In other words, there will be a total of 96 additional services places each year, providing emergency residential service for 384 children in need<sup>14</sup>. According to the current service plan, in the long term, the numbers of service places for RCCCs taking care of children from birth to under three years old and children aged three to under six are expected to increase to 551 and 432 respectively by the 2035-2036 financial year.

25. Some members have suggested that to prevent babies who remain in hospitals awaiting residential care service from becoming children with special needs in the future as a result of their developmental needs not being fully attended to, SWD should **arrange for social workers to visit hospitals** to expedite the provision of **personalized support services** to these babies in accordance with their developmental needs, and to **enhance medical-social collaboration**. The Administration has advised that it will explore the additional support services required by these babies.

<sup>13</sup> The longest and shortest waiting times for these services in the financial year 2022-2023 are set out below:

	RCCC (aged 0 to under 3)	RCCC (aged 3 to under 6)
The longest waiting time (Month)	22.6	38.7
The shortest waiting time (Month)	0	1.8

<sup>14</sup> Since children residing with family members or relatives will not normally stay in an emergency place for a prolonged period, it is envisaged that each RCCC place can take care of an average of four children in a year.

*Service mode and overall service planning*

26. According to the Administration, SWD will also take into account factors such as the availability of suitable land or premises in different districts, the location of relevant RCCS units in the districts, and the number of waitlistees for the relevant services when planning for RCCS, in order to provide corresponding facilitation. As announced in the Chief Executive's 2020 Policy Address, the Development Bureau, together with the Hong Kong Housing Authority and the Hong Kong Housing Society, will explore reserving about 5% of the total domestic gross floor area in future suitable public housing development projects exclusively for welfare uses, on the premise that the public housing supply and other ancillary facilities will not be affected. The effectiveness of this initiative will be reflected in the projects to be completed in 2026-2027 and beyond.

27. To ensure that the scale and provision of the residential child care facilities provided under the above initiative keep abreast of time, members have urged the Administration to conduct a comprehensive review of service demand and utilization of various types of RCCS and, while **devising long-term planning for various types of RCCS**, to concurrently **examine whether the existing service mode can meet or match with the service demand**. One of the suggestions members have made is to make reference to the Review Committee's recommendation on setting up small-scale RCCCs to offer family-based care and provide additional mega-sized residential care homes which offer family-based residential care services under the projects of the above initiative. The Administration has indicated that it will report to the Panel on the progress of implementing the initiative as and when appropriate.

*Service referral mechanism*

28. All applications for RCCS have to be referred by social workers upon confirmation of service needs or as ordered by the court. Under two guiding principles, namely that children's best interests are of paramount importance and that children should be raised by their birth families or relatives as far as possible, case social workers assess children who cannot be cared for by their parents or relatives for various reasons and need to temporarily leave their birth families, and arrange them to receive residential care placements. Relevant social workers in the service units will meet with the children concerned to understand their needs before they receive the services. At present, all welfare units use a common set of assessment criteria for referring children to suitable RCCS. SWD has set up two information systems, the Central Referral System for Residential Child Care Services and the Central Referral System for Rehabilitation Services, to process applications for relevant services (including matching applicants with

suitable services). The Administration has informed the Subcommittee that, in light of the Review Committee's recommendation to review the existing service need assessment mechanism, SWD has set up a task group in October 2023 to review with the sector on the existing referral mechanism and guidelines for RCCS.

29. Members have considered that as the sector has pointed out that from time to time there is a mismatch of services resulting in repeated transfers of children to other RCCS units, the Administration should improve the situation by formulating a standardized assessment tool for needs assessment to better assess children's residential service needs according to their age, special educational or care needs, traumatic experiences, mental health status, etc. and match them with suitable services. The Administration has advised that, given the complex and changing family circumstances and service needs of RCCS applicants, and the specificity of service targets of various types of RCCS, it may not be appropriate to develop a set of assessment tools that can be applied uniformly to children of different ages and conditions. Members do not subscribe to the Administration's explanation and strongly urge the Administration to **develop a standardized assessment tool for children's standardizable service needs**, drawing reference to the Standardized Care Need Assessment Mechanism for Elderly Services, which evaluates the long-term care needs of elderly persons based on their impairment in the functional performance of daily activities. Members also urge the Administration to give due consideration to the views of frontline staff that the **contents of referral forms under the Central Referral System should be enhanced**. The implementation of these measures will enable social workers concerned to make more effective and comprehensive assessments of children's service needs, thereby ascertaining the suitability of the proposed services for the children and avoiding service mismatches.

#### *Long-term care arrangements*

30. To ensure the well-being of children receiving RCCS, case social workers will formulate suitable long-term welfare plans for the children and hold regular case review meetings with the children, their families and the social workers of RCCS units to continuously assess the welfare needs of the children concerned. This includes the execution progress of the long-term welfare plans and the direction of case handling. Members are concerned that some birth parents or guardians are reluctant to relinquish custody of their children receiving RCCS despite failing to fulfil their parental responsibility, which will affect the implementation of long-term welfare plans for these children. Members have noted that the Adoption Ordinance (Cap. 290) provides that the court may dispense with any consent from the child's parents or guardians and arrange the child for adoption under specified conditions (including where the parent or guardian of the child has



abandoned, neglected or persistently ill-treated the child, the parent or guardian cannot be found, or is incapable of giving consent or unreasonably withheld his/her consent). Therefore, only when family reunion is impracticable or not in the best interests of the child will SWD apply to the court for an order declaring infant free for adoption and place the child for adoption, subject to the Department of Justice's assessment that the case has satisfied the conditions stipulated in the Adoption Ordinance and the requirements of the Court. The Administration has informed the Subcommittee that, in line with the Review Committee's recommendation to review the prevailing case management mechanism, another task group set up by SWD in October 2023 is exploring relevant enhancement measures with the sector.

31. While SWD does not take stock or maintain statistics regarding the time required for arranging a child for adoption, members have expressed concern that in more complicated cases, due to changes in parents' willingness and ability to assume custody of their children under different circumstances, it usually takes a longer time for SWD to determine whether the above principle of applying to the court for a relevant order has been met. Members have called on the aforesaid task group to **formulate measures to facilitate early placement for adoption of those children for whom family reunion is impracticable** (e.g. formulating criteria for assessing the conditions under which family reunion will be practicable). On the other hand, there is a need for the Administration to **step up its efforts to promote parental education** for the families concerned in order to enhance the childcare abilities of the parents, with a view to enabling more children receiving RCCS to be reunited with family members under feasible circumstances that cater to the best interests of the children.

#### *Service interfacing*

32. Members have urged the Administration to enhance the overall service interfacing for RCCS, particularly the provision of **extended services** in the areas of **finance, housing, further education and life planning** for those young people who must be discharged from institutional residential care service units due to reaching the age limit of the services and need to live independently as family reunion is impracticable. The Administration has advised that case social workers will collaborate with the social workers of RCCS units six to 12 months before the young people leave RCCS units (or even earlier) to facilitate their access to appropriate community services upon discharge from RCCS units by liaising with community support services units on their behalf. Members have considered that the existing **follow-up work of case social workers or social workers of RCCS units with the community support service units concerned**, which lasts for about six months to one year, should be **extended** to ensure that

children/young people discharged from institutional residential care services will be provided with appropriate extended services to facilitate a smooth transition and adaptation to life after discharge.

## **Recommendations**

33. The Subcommittee recommends that the Administration should:

- (a) provide adequate resources for the various service branches of SWD involved in the monitoring of RCCS, and enhance the communication and coordination among these service branches in order to strengthen monitoring and enhance service quality, as well as to better safeguard the service users and handle crisis incidents;
- (b) continue taking forward the development of proven and validated artificial intelligence systems to assist operators of RCCCs and RSCCCs to introduce technology for more effective and comprehensive monitoring of their service quality;
- (c) draw up a concrete timetable for implementing each of the recommendations on strengthening manpower planning for other types of RCCS as put forth in the Report of the Second Phase Review;
- (d) progressively improve the manning ratios in SGHs by increasing the ratio of houseparents (especially those on overnight shifts) to children to 1:4 and the ratio of social workers to children to 1:12, as well as draw up a timetable to this end;
- (e) in view of the nature of the residential family care services provided by SGHs, explore the feasibility of allowing SGHs to employ foreign domestic helpers, so as to strengthen general support (especially during overnight shifts);
- (f) consider the views of the sector of allocating additional resources based on the number of service users with special needs when conducting reviews on the Lump Sum Grant Subvention System in the future, so as to ensure that the operators have sufficient resources to address the needs and conditions of individual children;

- (g) develop a mechanism similar to the Three-Tier School-based Emergency Mechanism for RCCS and allow operators to deploy additional resources allocated under ABPSS to introduce other non-healthcare professional services such as art therapy, play therapy, or music therapy in their service units;
- (h) conduct a review on the manpower structure and the functions of care workers at different ranks of various types of RCCS, including collecting information on the turnover of frontline staff in the service operators and formulating a long-term plan for manpower supply;
- (i) collaborate with the sector to enhance training to deepen the child protection awareness of frontline care staff and to build a positive and caring culture in residential care homes for children such that those receiving services can be properly cared for in terms of their physical and psychological development;
- (j) review the number of waitlistees for, the waiting times for, the occupancy rates and the average length of stay of various types of RCCS in order to assess service demand and devise long-term planning for various types of services, and at the same time examine whether the existing service mode can meet or match with the service demand;
- (k) introduce more measures to attract families to join the foster care service, such as providing foster families with occasional child care services for the foster children in order to relieve the pressure on foster parents (especially those taking care of foster children with special needs);
- (l) arrange for social workers to visit hospitals to expedite the provision of personalized support services to babies who remain in hospitals awaiting residential care service in accordance with their developmental needs, and to enhance medical-social collaboration;
- (m) develop a standardized assessment tool for children's standardizable services needs and give due consideration to the views of frontline staff that the contents of referral forms under the Central Referral System should be enhanced, so as to assess the residential service needs of children more accurately according to their conditions and match them with appropriate services;

- (n) in respect of children receiving residential care service, formulate measures to facilitate early placement for adoption of those children for whom family reunion is impracticable, and step up efforts to promote parental education for the families concerned in order to enhance the childcare abilities of the parents, with a view to enabling more children to be reunited with family members; and
- (o) enhance the overall service interfacing for RCCS, particularly the provision of extended services in the areas of finance, housing, further education and counselling for those young people who are discharged from institutional residential care service units and who need to live independently, and extend the follow-up work of case social workers or social workers of RCCS units with the community support service unit concerned.

### **Advice sought**

34. Members are invited to note the deliberations and recommendations of the Subcommittee.

Council Business Division 2  
Legislative Council Secretariat  
3 June 2024

**Panel on Welfare Services**

**Subcommittee on Issues Relating to Policy  
on Monitoring Child Protection Agencies**

**Terms of reference**

To monitor the actual situation and improvement targets of the service standards of child protection agencies, including the effectiveness of inspection and monitoring, recruitment thresholds, staff training, and other related issues such as support measures for emergency response, and to make timely recommendations on various aspects.

**Panel on Welfare Services**

**Subcommittee on Issues Relating to Policy  
on Monitoring Child Protection Agencies**

**Membership list**

**Chairman** Hon Judy CHAN Kapui, MH, JP

**Members** Hon Stanley LI Sai-wing, MH, JP  
Hon LAM So-wai  
Hon Lillian KWOK Ling-lai  
Revd Canon Hon Peter Douglas KOON Ho-  
ming, BBS, JP  
Dr Hon NGAN Man-yu

(Total : six members)

**Clerk** Ms Maisie LAM

**Legal Adviser** Ms Clara WONG

**Panel on Welfare Services**

**Subcommittee on Issues Relating to Policy  
on Monitoring Child Protection Agencies**

**List of organizations/individuals which/who have  
submitted views to the Subcommittee**

Organizations and individuals which/who have made oral representation to  
the Subcommittee

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1. Miss Candy WONG Ho-shan
2. Miss Christy TANG Wing-sum
3. Miss WONG Tsz-yan
4. Mother's Choice
5. Ms Daisy LAU Wing-Sze
6. Ms WAN Wing-yiu
7. Residential Child Care Service, Hong Kong Christian Service
8. Save the Children Hong Kong
9. Sheng Kung Hui St. Christopher's Home
10. The Boys' & Girls' Clubs Association of Hong Kong
11. The Hong Kong Council of Social Service
12. The Salvation Army
13. The Salvation Army - Residential Care Services for Children and Youth