

**25<sup>th</sup> Meeting of the Elderly Commission**  
**Summary for Press Briefing**

The Elderly Commission (EC) held its 25<sup>th</sup> meeting today (20 September 2001) with the following three items on the agenda:

**(1) Public Consultation on the Draft Urban Renewal Strategy**

- EC was briefed by the representatives of the Planning and Lands Bureau on the draft urban renewal strategy. The strategy will provide policy guidelines to the Urban Renewal Authority (URA) for the implementation of a 20-year urban renewal programme, which consists of 200 new projects and 25 uncompleted projects of the Land Development Corporation (LDC).
- The Government intends that urban renewal should be a win-win-win proposition, i.e. the Government will ensure that –
  - (a) owners whose properties are acquired/resumed for the implementation of redevelopment projects are offered fair and reasonable compensation;
  - (b) tenants affected by redevelopment projects are provided with proper rehousing; and
  - (c) the community at large will benefit from urban renewal.
- According to the experience of the LDC (now dissolved), about 20% of the residents in the urban renewal project areas are people over the age of 60.
- Elderly persons and people with special needs are two vulnerable groups who would require particular assistance during the urban renewal process. Some of the measures proposed by the draft urban renewal strategy would go some way towards addressing their needs.
- As part of the project approval process, a social impact assessment (SIA) would be carried out. Amongst other things, the SIA would collect information on the special needs of the elderly and the disabled, including their rehousing needs and how their social networks could be preserved as far as possible. Where circumstances permit, the URA would provide purpose-built housing for groups with special needs, including the elderly.
- Urban renewal social service teams would be set up in the urban renewal target areas. The social workers of these social service teams would help older persons to better understand their rights (e.g. compensation and rehousing arrangements). The social workers would also help older persons to adapt to their new environment and to renew and rebuild their social networks.

## (2) Long Term Care for the Frail Elders

- It is the priority of the Government to provide quality long term care to frail elders in Hong Kong. Building on the policy of “ageing in place”, the Government will continue to provide the appropriate home and community care services to support frail elders to live at home for as long as possible. For those elders who can no longer be supported at home, the Government will continue to provide quality residential care services under a mixed mode of service provision.
- Against the above broad policy direction, the Government would pursue the following initiatives in developing an integrated and comprehensive long term care system for elders in Hong Kong:
  - (a) *Implementation of Care Need Assessment Mechanism*

The Government will continue to apply the standardized care need assessment mechanism to ensure provision of appropriate services to elders with care needs. The assessment results also provide the basis for care planning;
  - (b) *Emphasis on Home and Community Care Services*

The Government will continue to strengthen and re-engineer home and community care services for frail elders living at home. The Government will further expand the enhanced home and community care services to benefit more elders;
  - (c) *Development of Comprehensive and Integrated Care Infrastructure*

The Social Welfare Department will commission some pilot projects in integrated mode this year. Flexibility and innovation in service planning and delivery would be encouraged. The objective is to develop over time a care infrastructure in the community which can facilitate provision of comprehensive and integrated long term care services;
  - (d) *Implementation of concept of ‘Continuum of Care’*

The Government aims to progressively apply the ‘Continuum of Care’ concept in residential care homes and home and community care services so that elders do not need to leave their familiar environment even when their health conditions deteriorate;
  - (e) *Development of Quality Assurance Measures*

The Government will consider quality assurance measures to further upgrade the standards of long term care services, in particular in the residential setting with all private residential care homes achieving licensing standards by March 2001;
  - (f) *Strengthening of Support and Training for Family Carers*

The Government will continue to strengthen various support services, such as

training and respite service, to enable families to continue to take care of their frail elders effectively;

(g) *Better Interface between Medical/Health System and Long Term Care System*

The Government will continue to pursue measures to ensure adequate medical, nursing, allied health and psychosocial support is provided to the long term care system; and

(h) *Enhancement of Manpower Training*

In the social service sector, the aim is to strengthen training for social workers and non-professional staff through a multi-disciplinary approach. In the medical and health sectors, the Government will enhance the training of primary health care practitioners and nurses in meeting the psychosocial needs of long term care clients. The Government will work together with the sectors concerned to improve and develop the training programmes.

**(3) Interface between the Medical and Health Sectors and the Social Service Sector in Provision of Long Term Care Services for the Frail Elders**

- It is the Government's objective to provide long term care services to those elders with care needs in a comprehensive, client-centered and integrated manner, with adequate nursing, allied health, medical and psychosocial support.
- To achieve this objective, the Government will focus its efforts in the following two aspects to achieve better interface between the medical and health sectors and the social service sector:
  - (a) to achieve a better client flow and continuity of care between the medical and long term care systems; and
  - (b) within the long term care system, to develop a shared vision on the roles and functions of the different professionals across the medical, health and social service sectors, and to adopt a more structured approach in collaboration between these sectors in providing holistic care to clients.
- An example of interface is how to strengthen discharge planning in the medical sector for patients requiring long term care, and to ensure provision of timely community support as the elders transit from the medical sector to the social service sector.
- Drawing reference to overseas experiences of interface, the Government has identified a number of key areas for further deliberation.

- An inter-departmental steering committee comprising representatives from Health and Welfare Bureau, Hospital Authority, Department of Health and Social Welfare Department will be formed to take the matter forward. Working groups with representatives from relevant and interested bodies, including non-government organisations and allied health professionals, can be formed as and when necessary at a later stage to work out implementation plans when the inter-departmental steering committee has come up with some concrete proposals to improve interface between the sectors. The steering committee will report progress to the Elderly Commission in due course.

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