

Elderly Commission
Minutes of the 79th Meeting

Conference Room 3, G/F, Central Government Offices,
2 Tim Mei Avenue, Tamar, Hong Kong
9:30 a.m., 4 March 2014 (Tuesday)

Present:

Chairman

Prof CHAN Cheung-ming, Alfred, BBS, JP

Vice-chairman

Dr LAM Ching-choi, BBS, JP

Members

Dr CHAN Hon-wai, Felix, JP

Ms CHAN Man-ki, Maggie, MH

Miss CHAN Man-yee, Grace

Dr CHEUNG Moon-wah

Dr CHONG Ming-lin, Alice, MH

Prof FUNG Yuk-kuen, Sylvia, BBS

Mr MA Ching-hang, Patrick, BBS, JP

Mr MA Kam-wah, Timothy, JP

Mr SHIE Wai-hung, Henry

Mr WONG Fan-foung, Jackson, MH

Mrs WONG WONG Yu-sum, Doris

Miss TAM Kam-lan, Annie, JP

Mr YUEN Ming-fai, Richard, JP

Ms Carol YIP, JP

Mr HSU Kam-lung, Virgil

Dr LEUNG Sze-lee, Shirley

Dr Daisy DAI

Permanent Secretary for Labour and Welfare

Permanent Secretary for Food and Health
(Health)

Director of Social Welfare

Chief Housing Manager/Management,
Housing Department

Assistant Director of Health

Chief Manager (Primary and Community
Services), Hospital Authority

In attendance:

Mr CHEN Yee, Donald

Mrs CHAN NG Ting-ting, Elina

Deputy Secretary for Labour and Welfare

Principal Assistant Secretary for Labour and
Welfare

Miss LI Yuen-wah, Cecilla	Assistant Director of Social Welfare
Ms CHEUNG Jick-man, Lillian	Chief Social Work Officer, Social Welfare Department
Mr WONG Yuk-tong	Chief Social Work Officer, Social Welfare Department
Ms CHU Wing-yin, Diana	Senior Social Work Officer, Social Welfare Department
Dr MAW Kit-chee, Christina	Senior Executive Manager (Elderly and Community Care), Hospital Authority
Mr LIT Hoo-yin, Horace	Assistant Secretary for Labour and Welfare
Mr TO Yick-ting, Justin	Assistant Secretary for Labour and Welfare
Miss WONG Kwan-yee, Jenny	Assistant Secretary for Labour and Welfare
Miss TSANG Tik-yee, Florence	Assistant Secretary for Labour and Welfare
Miss MOK Tik-shan, Elizabeth	Chief Executive Officer, Labour and Welfare Bureau
Miss HO Wing-wa, Vitinie	Executive Officer, Labour and Welfare Bureau □□

Absent with apologies:

Mrs CHAN LUI Ling-yee, Lilian
 Dr CHENG Kam-chung, JP, MH
 Dr TUNG Sau-ying
 Mr YAU How-boa, Stephen, SBS, BBS, JP, MH

Secretary

Mr CHONG Kwok-wing, Gordon	Principal Assistant Secretary for Labour and Welfare (Acting)
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Prof Alfred CHAN Cheung-ming, the Chairman, welcomed Members to the meeting.

2. The Chairman reminded Members to make a declaration when there was a potential conflict of interest between their own interests and the matters to be discussed.

Agenda item 1: Confirmation of the minutes of the 78th meeting

3. As Members had not proposed any amendments to the Chinese version of the draft minutes issued by the Secretariat on 24 February 2014, the minutes were confirmed. The English version would be issued in due course.

Agenda item 2: Matters arising

Paragraph 5 of the minutes of the 78th meeting

4. This Commission was tasked by the Chief Executive to formulate an Elderly Services Programme Plan (Programme Plan) and explore the feasibility of introducing a voucher scheme on residential care services for the elderly (RCS Voucher Scheme). The matters concerned would be discussed in Agenda item 4.

Agenda item 3: Briefing on the relevant initiatives in the 2014-15 Budget

5. Mr Donald CHEN Yee, Deputy Secretary for Labour and Welfare, briefed Members on the initiatives relating to elderly welfare in the 2014-15 Budget by way of a powerpoint presentation.

6. The Chairman was pleased to note that the Budget of this year had made long-term planning for elderly care services. Apart from increasing the recurrent funding for enhancing community support and care services for the elderly, the Government would also allocate considerable resources for increasing the provision of subsidised residential care places and upgrading the service and quality of the existing subvented places. He hoped that the quality of service of private residential care homes for the elderly (RCHEs) would also be improved at the same time.

7. Mr Richard YUEN Ming-fai, Permanent Secretary for Food and Health, pointed out that given the challenge posed by an ageing population, the Government had invested heavily in the enhancement and upgrading of elderly services as stated in the recent Policy Addresses and Budgets. To the elderly, residential care and medical services were of utmost importance. Therefore, the two had to be well co-ordinated in order to provide the best and effective services to the elderly. Taking this as the primary consideration, the Labour and Welfare Bureau (LWB) should maintain close contact with the Hospital Authority (HA) when devising plans for the elderly care services. For example, LWB could seek advice of HA's geriatric units on training matters when implementing Carer Training programmes so as to ensure that the training provided would meet the healthcare needs of the elderly. In addition, LWB could also discuss with the HA on the future provision of healthcare manpower and supporting facilities when taking forward construction projects of large-sized RCHEs.

8. Members generally welcomed the various initiatives for improving elderly care services as mentioned in the Budget. They raised the following questions and views:

Elderly care

Manpower resources and training

- (a) This Commission was pleased to note that apart from allocating additional resources for enhancing residential care services, the Government would also invest in manpower training for the elderly care service sector such as providing funding for the “Navigation Scheme for Young Persons in Care Services”. It was hoped that the Government would continue to facilitate the development of career opportunities for those who wish to join the sector.
- (b) The elderly care service sector had been suffering from shortage of nurses because the current nurse training programmes in Hong Kong focused mainly on training nurses for hospital settings. At present, these programmes did not offer placement sessions in RCHEs, as neither mentor nor clinical supervisor was available in RCHEs. As a result, nursing students had little understanding of RCHE settings and most of them would not opt to work in RCHEs after graduation. Moreover, as RCHEs were not accredited training bodies, they could not provide the continuous training for the nurses thereat to attain higher qualifications. This, coupled with a lack of promotion prospects, provided no incentive for the majority of nurses to stay in the sector for a long period of time, resulting in a shortage of experienced nurses in RCHEs.
- (c) As for the enhancement of elderly care services, medical-welfare collaboration was of particular importance. It was suggested that the Administration should review the current nurse training programmes to incorporate multi-disciplinary healthcare and social work training in these programmes as well as to offer placement opportunities in RCHEs for student nurses in order to enhance their understanding of RCHE settings and skills for elderly care. Furthermore, measures which promote better career prospect and allow flexible working hours for nurses working in RCHEs were recommended to help attract more newcomers.
- (d) Consideration could be given to allow nursing students to join HA’s Community Geriatric Assessment Team (CGAT) and undergo practical training in RCHEs, and members of the CGAT could serve as their mentors and clinical supervisors.
- (e) The Government should consider providing RCHEs with funding support for training healthcare staff. This would encourage more RCHEs to offer on-the-job training opportunities for healthcare trainees, and thus help address the long-standing problem

of manpower shortage in the elderly care service sector.

- (f) Social workers serving elderly service units were in frequent contacts with elderly persons suffering from illness. However, healthcare subjects were not included in the current social worker training programmes. It should be brought to the attention of the Social Workers Registration Board that the said subjects should be included in social worker training programmes to meet the practical needs.
- (g) In view of the shortage of doctors in hospitals, the HA could explore the feasibility of extending retirement age of doctors.

Community support and care services

- (h) It was pleased to note that the Government would provide an additional funding of some \$22 million for 41 District Elderly Community Centres (DECCs) for employing more social workers to better support elderly persons with dementia and their carers. The DECCs should work more closely with the CGATs of their respective districts so that the CGATs could provide timely medical support for those DECC members with dementia and chronic diseases, thus reducing any chances of deterioration.
- (i) It was pleased to note that the Government would provide an additional recurrent subvention of \$82.5 million for upgrading 51 social centres for the elderly (SEs) to neighbourhood elderly centres (NECs) and employing more social workers to assist in service delivery. This initiative was also generally well received by the welfare sector. However, some SEs might have difficulties in enhancing or upgrading their services due to space constraints. The Social Welfare Department (SWD) should work closely with the welfare organisations concerned and assist them in identifying suitable premises for service expansion.
- (j) It was suggested that training and support for carers (including foreign domestic helpers) of demented elderly persons should be strengthened to increase their understanding of dementia. This would not only help reduce elderly abuse cases but also ensure that proper care would be provided for those elderly persons with dementia with a view to delaying their deterioration.
- (k) It was suggested that neighbours (home makers in particular) could be trained to serve as community carers for the elderly. These carers could spend their spare time on taking care of their elderly neighbours in need.

- (l) It was suggested that the Administration could strengthen community support for elderly persons. For example, additional resources could be allocated for stepping up promotion of health-related knowledge such as personal care, healthy lifestyle and disease prevention at district levels so as to help elderly persons (particularly those with chronic diseases), retirees and carers enhance their awareness and understanding of healthcare and disease prevention. This could achieve the objective of “preventive care” and reduce elderly persons’ need for institutionalisation.

Residential care services

- (m) It was hoped that the LWB and SWD would continue to liaise closely with the RCHE sector, with a view to giving them a clear picture of the policy direction of elderly services to facilitate their provision of suitable services.
- (n) It was suggested that respite service for elderly persons could be offered in large RCHEs and NECs to relieve the stress of carers. The Administration could also examine the feasibility of setting up medical units in these premises so that those elderly with mild illnesses could receive proper treatment in the community. This would help reduce their attendances at accident and emergency departments of hospitals.
- (o) It was suggested that the Administration could consider setting up multi-service centres in large RCHEs to provide one-stop medical and care services (such as Chinese medicine, acupuncture and manipulation etc) for the elderly.
- (p) Members shared the view that residential care services should continue to enhance elderly persons’ life quality. RCHEs of different types and scales had their own merits that could meet the particular needs of individual elderly persons. The Government should take into account such needs to maintain a balanced development of various types of RCHEs when planning for the provision of residential care services for the elderly.

Social security

- (q) As regards the Government’s proposal of setting aside \$2,700 million for providing recipients of Comprehensive Social Security Assistance, Old Age Allowance, Old Age Living Allowance and Disability Allowance with an extra allowance equal to one-month’s payment, some Members were of the view that it was more practicable to

spend the funding on enhancing and upgrading the existing elderly services and facilities. However, some other Members pointed out that many elderly people had no stable income and were eagerly awaiting such extra allowances, hence they supported the proposal as it showed the Government's care for the elderly. Besides, there were Members who suggested that the Government should give the elderly the choice of accepting the extra allowances or not.

Others

- (r) Many elderly persons who had mobility problems after suffering from a stroke or other illnesses were unable to age in the community as they lived in old buildings without elevators and thus had to be admitted to residential care homes. The Government should consider amending the relevant buildings legislation to require newly-built buildings to adopt universal design which would offer ready access for the elderly with limited mobility. Moreover, the physical environment and supporting facilities of old residential buildings should be improved to ensure that more elderly persons could age in the community.
- (s) It was suggested that the Government should in future take into account needs of the elderly when formulating policies and measures on housing, transport, community facilities and recreational sites.
- (t) Many elderly persons found the electricity charges subsidy helpful in alleviating their burden but the subsidy was removed from the Budget of this year. Therefore, it was hoped that such subsidy could be provided for the elderly in need through the Community Care Fund.

9. Regarding the views and suggestions made by Members, Mr YUEN and Ms Carol YIP, Director of Social Welfare, responded as follows:

Manpower resources and training

- (a) Extension of retirement age might have far reaching implications as it would adversely affect the promotion prospects of younger doctors. The Food and Health Bureau (FHB) and HA were exploring the feasibility of putting in place a flexible retirement arrangement under which retired doctors could be re-employed and continue their service in HA provided that the promotion prospects of other doctors would not be affected. However, technical matters such as salary and duration of employment

would have to be further considered.

Community care services

- (b) In collaboration with the Department of Health and the Education Bureau, the Working Group on Primary Care under FHB was reviewing and updating school health education programmes. Apart from providing students of different age groups with the specific health knowledge they needed, consideration might be given to include knowledge on elderly health so as to enhance the younger generation's understanding of how elderly persons with illnesses should be taken care of.
- (c) To facilitate the upgrade from SEs to NECs, SWD would continue to liaise closely with the relevant welfare organisations and other government departments in order to provide them with the necessary support, e.g. assisting them in identifying suitable premises for setting up sub-bases.
- (d) To further enhance medical-welfare collaboration, FHB, LWB and SWD would work closely together to enhance elderly care services in a way that could best meet the medical and healthcare needs of elderly people as far as practicable. FHB would also explore the feasibility of setting up multi-service centres for the elderly with a view to providing one-stop multi-disciplinary medical and social services for the elderly at the community level.

Agenda item 4: Elderly Service Programme Plan and Residential Care Service Vouchers for the Elderly

(Information Paper No. EC/I/01-14)

10. Miss Annie TAM Kam-lan, Permanent Secretary for Labour and Welfare, briefed Members on the proposed modus operandi and timeframe for exploring the feasibility of introducing an RCS Voucher Scheme and formulating the Programme Plan with a powerpoint presentation. Miss TAM said that since both tasks would involve substantial work in the collection, compilation and detailed analysis of data, LWB would seek approval of the Legislative Council for creating a supernumerary post at the rank of Administrative Officer Staff Grade C for a period of two years to provide dedicated assistance to the Commission in carrying out the said tasks. It is hoped that the supernumerary post concerned could be created in mid-2014. Given that both tasks had to be carried out concurrently and completed within tight timeframes, this Commission might wish to consider drawing on past experience and setting up task forces under its purview to handle the work concerned in parallel. The work related to the

feasibility of introducing an RCS Voucher Scheme could be undertaken by the existing Working Group on Long-term Care Model. As for the formulation of the Programme Plan, a new dedicated working group could be set up to take forward the task. If considered necessary by this Commission, LWB could also engage consultants to assist in the tasks.

11. The Chairman and Members unanimously supported the proposed arrangements. They also thanked the Government for helping this Commission proceed with the tasks by providing additional manpower and assisting in engaging consultants. As both tasks would involve collection, compilation and analysis of stakeholders' opinions and the work had to be completed within tight timeframes, Members were of the unanimous view that the consultants to be engaged had to have an in-depth understanding of the subjects, including previous discussions and latest development. They recommended the Government to appoint directly the research team that had conducted the two past consultancy studies on elderly services for this Commission. The administrative procedures concerning the engagement of consultancy services would be followed up by the Secretariat.

Agenda item 5: Any other business

Work progress of the Committee on Elder Academy Development Foundation

12. Mr Gordon CHONG Kwok-wing, Acting Principal Assistant Secretary for Labour and Welfare, said that the Vetting Sub-committee under the Committee on Elder Academy Development Foundation (Foundation Committee) had scrutinised the five applications in the second round of funding applications for 2013-14 at its meeting held on 30 January 2014. Approval was given to four of the applications, including two for the provision of elder academy courses in tertiary institutions, and another two from the New Territories West Elder Academies Cluster for organising a high table dinner for the Elder Academies and for funding its 2013-14 work plans. The remaining application on provision of courses for the elderly and the establishment of a Kowloon Elder Academies Cluster was subject to further consideration upon the submission of supplementary information by the applicant institution.

13. Mr CHONG said in view of Government's injection of \$50 million into the Elder Academy Development Foundation, the Vetting Sub-committee had discussed the new funding arrangements and other enhancement measures at its meeting held on 21 February 2014. The Investment Sub-committee under the Foundation Committee would deliberate on the investment strategy for the newly injected capital at its meeting scheduled for 19 March 2014. The Sub-committee on Publicity and Development would also discuss at its meeting to be held on 27 March 2014 the publicity strategy and course development in respect of the Elder Academy

Scheme.

Date of next meeting

14. The next meeting was tentatively scheduled for 8 May 2014.
(Post-meeting note: The next meeting was rescheduled for 24 June 2014.)

Time of adjournment

15. The meeting was adjourned at 11:47 a.m.

March 2014