# Elderly Commission Minutes of the 93rd Meeting

Conference Room 4, G/F, Central Government Offices, 2 Tim Mei Avenue, Tamar, Hong Kong 10:00 a.m., 1 December 2017 (Friday)

#### Present:

<u>Chairman</u> Dr LAM Ching-choi, BBS, JP

#### **Members**

Ms CHAN Mei-kit, Maggie, MH Ms CHAN Yee-ching, Tammy Mr CHEUNG Leong Mr CHUA Hoi-wai Mr LAM Hoi-cheung, Victor, JP Ms LI Fai, Grace Ms LO Dak-wai, Alexandra, JP Dr PANG Fei-chau Mrs SO CHAN Wai-hang, Susan, BBS Dr TSE Man-wah, Doris Mr WONG Kit-loong Mr WONG Tai-lun, Kenneth Dr YEUNG Ka-ching Ms CHANG King-yiu, JP

Ms TSE Man-yee, Elizabeth, JP

Ms Carol YIP, JP Mr TSOI Wai-tong, Martin

Dr LI Mun-pik, Teresa

Dr HA King-hang

#### In attendance:

Mr CHEN Yee, Donald, JP

Miss CHANG Lai-chu, Stella

Ms PANG Kit-ling

Permanent Secretary for Labour and Welfare Permanent Secretary for Food and Health (Health) Director of Social Welfare Assistant Director of Housing (Estate Management) (1) Assistant Director of Health (Family and Elderly Health Services) Senior Manager (Elderly and Palliative Care), Hospital Authority

Deputy Secretary for Labour and Welfare Principal Assistant Secretary for Labour and Welfare Assistant Director of Social Welfare (Elderly)

Ms FUNG Shuk-man, Wendy	Chief Social Work Officer, Social Welfare Department
Ms HO Yuen-ming, Agnes	Chief Social Work Officer, Social Welfare Department
Ms WOO Mei-hing, Patricia	Chief Social Work Officer, Social Welfare Department
Mr CHOW Cheung-pong	Senior Social Work Officer, Social Welfare Department
Ms HO Suk-fun	Senior Social Work Officer, Social Welfare Department
Ms YU Siu-ngan, Tammy	Senior Social Work Officer, Social
Mr TO Yick-ting, Justin	Welfare Department Assistant Secretary for Labour and Welfare
Mr LEUNG Sing-lung, Edric	Assistant Secretary for Labour and Welfare
Ms YU Sin-ting, Cindy	Assistant Secretary for Labour and Welfare
Ms LEE Ngan-chau, Martina	Chief Executive Officer, Labour and Welfare Bureau
Miss LEUNG Pui-yin, Sam	Executive Officer, Labour and Welfare Bureau

#### Absent with apologies:

Ms CHUNG Wai-yee, Diana Prof LEE Tze-fan, Diana, JP Dr LOU Wei-qun, Vivian

#### **Secretary**

Mr CHONG Kwok-wing, Gordon

Principal Assistant Secretary for Labour and Welfare

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<u>Dr LAM Ching-choi</u>, the Chairman, welcomed Members to the meeting. In particular, he extended his welcome to <u>Ms TSE Man-yee</u>, <u>Elizabeth</u>, Permanent Secretary for Food and Health (Health), who attended a meeting of the Commission for the first time.

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

#### Agenda item 1: Confirmation of the minutes of the 92nd meeting

3. As Members had not proposed any amendments to the Chinese (revised) and

English (revised) versions of the draft minutes issued by the Secretariat on 29 November 2017, the minutes were confirmed.

#### Agenda item 2: Matters arising

4. There were no matters arising from the minutes of the 92nd meeting.

# Agenda item 3: Briefing on the relevant initiatives in the Chief Executive's 2017 Policy Address

5. Ms TSE Man-yee, Elizabeth, Permanent Secretary for Food and Health (Health) briefed Members on the health policy initiatives for the elderly in the Chief Executive's 2017 Policy Address through a PowerPoint presentation. Ms TSE said that in the face of an ageing population and rising demand for healthcare services, the Government would work in a focused manner to actively promote primary healthcare, improve public healthcare services and facilities, optimise public health regulation, promote advancements in medical technology and actively support the development of Chinese medicine in order to ensure the long-term sustainable development of our healthcare system and safeguard the health of citizens. To improve the primary healthcare system and enhance overall public health, the Government had set up the Steering Committee on Primary Healthcare Development to comprehensively review the existing planning of primary healthcare services and draw up a development blueprint. The Government also had plans to set up the first district health centre to be run in a brand new operation mode in Kwai Tsing District within two years to strengthen district-level primary healthcare services. Drawing on the experience from the pilot scheme, the Government would set up district health centres in other districts progressively. On the improvement of healthcare services and facilities, the Government would implement a series of measures, including further providing free/subsidised seasonal influenza vaccination, providing pneumococcal vaccination for the elderly, introducing a new funding arrangement for enhancing the capacity of the Hospital Authority (HA) in addressing the increasing staffing and service demands, implementing the recommendations made in the Strategic Review on Healthcare Manpower Planning and Professional Development to ensure sufficient manpower in the healthcare system to meet service demand, further enhancing healthcare services for the elderly, considering making amendments to the relevant legislation so that patients could have the choice of "dying in place", regularising the Dementia Community Support Scheme and expanding it to all 41 district elderly community centres in the territory,

expediting delivery of the Ten-year Public Hospital Development Plan, and kick-starting the next round of public hospital development planning in the coming five years. The Government would also optimise public health regulation by improving the operation of the Medical Council of Hong Kong and enhancing the regulation of private healthcare facilities through legislation. Furthermore, in order to promote the development of Chinese medicine, the Government would set up a dedicated unit under the Food and Health Bureau (FHB) to co-ordinate and implement the strategies and measures for promoting the development of Chinese medicine in Hong Kong, review the remuneration packages and promotion opportunities of staff at all levels in the Chinese Medicine Centre for Training and Research in the 18 districts, and include Chinese medicine information in the sharable scope in Stage 2 Development of the Electronic Health Record Sharing System.

6. Having listened to the briefing by the FHB, the Chairman and Members raised the following suggestions, views and questions on the initiatives:

#### Primary healthcare

- (a) The Commission suggested that the Government should, in planning for the services to be provided by district health centres, consider introducing mental health services with a view to improving both the physical and mental health of the elderly. In addition, the Government could make effective use of the elderly's personal health data collected by these centres by merging the data with the Electronic Health Record Sharing System in order to further enhance case management and service interface.
- (b) Apart from setting up district health centres, the Government could consider providing more exercise and sitting-out facilities adopting "universal design" in outdoor areas to encourage people of all ages to participate in physical activities and to promote healthy lifestyles.
- (c) A Member wished to know the reason for selecting Kwai Tsing District as the pilot district for setting up a district health centre.

## Improving healthcare services and facilities

(d) A Member suggested that the HA should enhance the services provided by the Community Geriatric Assessment Teams by phases in order to support more frail elderly patients residing at residential care homes for the elderly (RCHEs) who are in need of such services.

(e) A Member enquired about the manpower training for nurses and other allied health professionals.

## Supporting the development of Chinese medicine

- (f) Noticing that there were still some doctors who were rather resistant to treating patients who had been treated by Chinese medicine practitioners and that nurses working in RCHEs had difficulties in preparing Chinese medicines for elderly persons, the Commission proposed that the Government should facilitate communication and collaboration between Western medical practitioners and their Chinese medicine counterparts (including private practitioners) and enhance the training on Chinese medicine treatments for nurses and allied health professionals working in RCHEs.
- (g) Given the emphasis placed on a holistic approach to medical treatment, disease prevention and recuperation in Chinese medicine, the Commission considered that Chinese medicine might play an important role in primary healthcare in the future, thereby promoting the mainstreaming development of Chinese medicine. Rehabilitation treatment through the combined use of Chinese and Western medicines would be another direction for development.
- (h) The Commission suggested that the Government might promote exchange and learning between Western medical practitioners and their Chinese medicine counterparts through the provision of training programmes and opportunities for internship in the Mainland.
- (i) The Commission was of the view that the professional training on pharmacy in Chinese medicine could be strengthened and the professional development of Chinese medicine pharmacists could be promoted, so as to enhance the safety and quality control of Chinese medicines.
- (j) The Commission suggested that the Government should review and enhance the remuneration packages of staff at all levels in the Chinese Medicine Centre for Training and Research in the 18 districts in order to boost the attractiveness of the trade and retain talent.

7. In response to the suggestions, views and questions raised by Members, <u>Ms TSE</u> replied as follows:

#### Primary healthcare

(a) As the local network for medical-social collaboration in Kwai Tsing District was relatively well-established, which was favourable for the implementation of the pilot scheme, the Government decided to set up the first district health centre there to test the new operation mode for primary healthcare services. Drawing on the experience from the pilot scheme, the Government would set up district health centres in other districts progressively according to the needs and characteristics of the districts.

#### Improving healthcare services and facilities

(b) On healthcare manpower training, the Government had substantially increased the number of University Grants Committee (UGC)-funded degree places for healthcare disciplines by about 60% over the past decade. The Government would consider further increasing the number of UGC-funded healthcare training places for those disciplines (including doctors, dentists, nurses and relevant allied health professionals) which would still be facing manpower shortage in the medium to long term in the 2019-22 triennium. The Government would also count on the self-financing sector to provide training to help meet part of the increasing demand for healthcare professionals.

#### Supporting the development of Chinese medicine

- (c) A dedicated unit for developing Chinese medicine, to be set up under the FHB, would be responsible for maintaining close liaison with the Chinese medicine sector, as well as coordinating and implementing the strategies and measures for promoting the development of Chinese medicine in Hong Kong.
- (d) The Government was conducting a consultation on the planning of such aspects as the governance structure, business model, operation model, financial model and contract management model of the Chinese medicine hospital. It was expected that the positioning and the framework of development in major areas of the Chinese medicine hospital would be announced in the first half of 2018.

- (e) To foster the professional development of Chinese medicine practitioners as well as to provide the healthcare professionals required by the Chinese medicine hospital for the provision of integrated Chinese-Western medicine with Chinese medicine playing a predominant role, the Government would organise various training courses, such as diploma courses on Chinese medicine specialty for registered Chinese medicine practitioners and basic Western pharmacy training for Chinese medicine pharmacists. The Government would also provide relevant Chinese medicine training courses for medical practitioners, nurses and healthcare professionals.
- (f) To attract more talent to join the Chinese medicine sector, the Government would review the remuneration packages and promotion opportunities of staff at all levels in the Chinese Medicine Centre for Training and Research in the 18 districts to enhance their career prospects.

8. Mr CHEN Yee, Donald, Deputy Secretary for Labour and Welfare, then briefed Members on the policy initiatives relating to the elderly services under the purview of the Labour and Welfare Bureau (LWB) in the Chief Executive's 2017 Policy Address with a PowerPoint presentation. Mr CHEN said that one of the key strategic directions set out in the Elderly Services Programme Plan (ESPP) was to achieve "ageing in place" through significantly strengthening community care and support services. In addition to the Pilot Scheme on Support for Elderly Persons Discharged from Public Hospitals After Treatment, the Pilot Scheme on Home Care and Support for Elderly Persons with Mild Impairment and the Pilot Scheme on Training for Foreign Domestic Helpers on Elderly Care, all of which were in the pipeline, the Government was planning to provide an additional 1 000 vouchers under the Second Phase of the Pilot Scheme on Community Care Service Voucher for the Elderly, bringing the total to 6 000, to further strengthen community care and support services; to allocate more resources to enhance outreaching services for supporting needy carers; and to implement a series of new initiatives to strengthen the care and support for dementia at the community level. The Social Welfare Department (SWD) would also implement a range of measures to continuously strengthen the monitoring of RCHEs and residential care homes for persons with disabilities (RCHDs) and enhance their service On premises planning, the LWB and the SWD would discuss with the quality. Development Bureau (DEVB) and the Planning Department (PlanD) the implementation of the recommendations in the ESPP on reinstating the population-based planning ratios for elderly services in the Hong Kong Planning Standards and Guidelines. Meanwhile, the SWD would explore the feasibility of purchasing premises for the operation and provision of elderly and rehabilitation services. Furthermore, to actively promote gerontechnology, the Government would earmark \$1 billion for setting up a fund to subsidise elderly and

rehabilitation service units to try and procure technology products. The Government would also enhance the manpower planning for elderly services by improving the salaries of front-line care staff, and considering the possibility of allowing subsidised units of elderly and rehabilitation services greater flexibility in the importation of care workers under the Supplementary Labour Scheme. Recurrent expenditure on elderly services in the financial year of 2017-18 was estimated to be \$7.8 billion, an increase of about 44% as compared with that for the financial year of 2013-14. The Government would, using the ESPP as a blueprint, continue to plan for and deliver suitable elderly services through strengthening collaboration with the Commission.

9. After the briefing by the LWB, the Chairman and Members raised the following suggestions, views and questions on the initiatives:

#### Supporting "ageing in place" for the elderly

- (a) To achieve "ageing in place", the Government should, apart from implementing the policy initiatives on elderly care, also ensure suitable place for living of elderly persons. The Commission proposed that the Government should consider setting out guidelines requiring the adoption of "universal design" for new buildings or allowing flexibility in housing design, for example, to use removable partition walls for rooms and toilets to allow residents of different ages to easily alter the internal layout of their flats according to their actual needs, so as to create suitable living environments for themselves.
- (b) The Commission suggested that the Government should extend the service being provided by the Housing Department on altering in-flat facilities for elderly tenants of public rental housing (PRH) in need free of charge upon receipt of professional referrals from relevant physiotherapists/occupational therapists to cover the low-income elderly tenants living in private housing, so that more elderly persons could benefit. Such service could also tie in with the services provided by the district health centres to be set up in the future. For elderly PRH tenants who had been identified by district health centres as those having special needs, the Housing Department could follow up on the corresponding alterations to their flats to meet their needs in daily living.
- (c) Apart from achieving "ageing in place" for the elderly persons through implementing various measures ranging from community planning to housing design, the Government might also explore ways to achieve "dying in place".

- (d) Under the policy of "ageing in place", an increasing demand for emergency ambulance service from elderly persons living in the community would be expected. The Government should allocate additional resources accordingly to cope with the increasing service demand.
- (e) The Commission suggested that the Government should conduct a comprehensive study on how policy making, resource allocation and service delivery could be co-ordinated in order to support elderly persons to age in place in a systematic manner.
- (f) Elderly housing and the demand for long-term care services arising from the elderly housing problem were both major issues. The Commission expected that the Government would conduct further deliberations and research on elderly housing and related facilities for "ageing in place" in the future.
- (g) The Commission suggested that the Government should set up a hotline for supporting carers of elderly persons to provide them with enquiry services on caring for the elderly. The Government should also consider arranging for professionals to provide home-based support services for elderly persons and their carers and offer professional advice on the care of elderly persons according to their health conditions and living environments.
- (h) The Commission suggested that while the Government strived to enhance elderly services, the importance of community engagement should not be overlooked. The Government should continue to strengthen the roles played by various types of social capital such as families, neighbours and volunteers in caring for the elderly.

## Strengthening the monitoring of RCHEs and RCHDs and enhancing their service quality

- (i) The Commission was pleased to note that the SWD would launch a five-year scheme to provide full subsidies for home managers, health workers and care workers of all RCHEs and RCHDs in the territory to enrol in Qualifications Framework-based training courses so as to enhance the skills and professionalism of home managers and staff.
- (j) A Member asked whether those residential care homes which had participated in recognised service quality accreditation schemes at their own expenses and been accredited under the schemes could receive full reimbursement of the

expenses from the Government. Besides, the Commission also suggested that the Government should regulate the fees charged by recognised accreditation bodies.

# Premises planning

- (k) There were still rooms accommodating four or more persons in many contract RCHEs. As elderly persons had become more concerned about privacy and personal space, it was suggested that the Government should take this factor into account in planning for RCHEs in the future so as to provide a better living environment for elderly persons.
- (1) Regarding the recommendation in the ESPP on reinstating the population-based planning ratios for elderly services in the Hong Kong Planning Standards and Guidelines, a Member asked if the Government would draw up a timetable for implementing the recommendation, and hoped that the Government would consider first implementing those recommendations in the ESPP on the planning for elderly services which were more specific, such as the provision of neighbourhood elderly centres/district elderly community centres in newly-built or redeveloped PRH estates and in new residential areas.

## Manpower planning

(m) To alleviate the problem of manpower shortage in the elderly service sector, the Government should actively encourage young persons to join the elderly long-term care service sector.

## **Others**

(n) Currently, the Government had different definitions for "elderly persons" in different policies. A Member asked if the Government would consider examining the definitions and co-ordinating efforts to standardise the definition of old age in the light of international definitions for "elderly persons" for the sake of consistency.

10. In response to the suggestions, views and questions raised by Members, <u>Mr CHEN</u>, <u>Ms Carol YIP</u>, Director of Social Welfare, and <u>Ms PANG Kit-ling</u>, Assistant Director of Social Welfare (Elderly), replied as follows:

# Supporting "ageing in place" for the elderly

(a) The Government had implemented a series of new initiatives and pilot schemes in support of "ageing in place" for elderly persons in recent years. By taking forward the schemes on a pilot basis, the Government could explore in what ways and under what arrangements elderly services would be provided most efficiently and cost-effectively. After evaluating the effectiveness of the pilot schemes, the Government would make comprehensive long-term planning for the services concerned in the light of the evaluation findings, including regularising or consolidating various schemes, with a view to providing support services for "ageing in place" in a systematic manner.

## Strengthening the monitoring of RCHEs and RCHDs and enhancing their service quality

(b) The SWD proposed to provide full subsidies for all private RCHEs to join accreditation schemes with the aim to encourage them to enhance their management and service quality so that elderly persons residing in private RCHEs could receive residential care services of better quality. Operational details of the schemes, including whether arrangements with retrospective effect would be made, had yet to be examined and worked out.

## Premises planning

- (c) The LWB and the SWD, when discussing with the DEVB and the PlanD on the amendment of the Hong Kong Planning Standards and Guidelines, would take into account Members' views that those recommendations in the ESPP on the planning for elderly services which were more specific should be implemented first.
- (d) The SWD had worked closely with the relevant departments to proactively identify premises and sites for the provision of elderly services.
- (e) The Government was undertaking a strategic study entitled "Hong Kong 2030+: Towards a Planning Vision and Strategy Transcending 2030" (Hong Kong 2030+), which aimed to update the territorial development strategy in the light of the dynamics and challenges ahead, which includes addressing the needs arising from an ageing community. The PlanD launched a six-month public engagement exercise to gauge public views on updating the territorial development strategy on 27 October 2016. Results of the public engagement

exercise were being analysed at this stage, and discussions would be held with the relevant bureaux and departments on the recommendations of Hong Kong 2030+ and the follow-up actions in due course.

## Manpower planning

(f) The Government rolled out the Navigation Scheme for Young Persons in Care Services in 2015, providing a total of 1 000 training places in several years starting from 2015-16 to encourage young persons to join the elderly and rehabilitation care services. Under the scheme, employment and training would be arranged for young persons wishing to pursue a career in care services in the welfare sector. The five non-governmental operating agencies selected by the SWD started recruitment of trainees in July 2015 or April 2016 respectively and proactively publicised the scheme. As at the end of October 2017, there were 99 graduates and 486 trainees.

## Others

(g) Age was not the sole consideration when the Government decided the service targets for its policy initiatives. In view of the wide range of elderly services, it would be necessary to maintain flexibility in the mechanism to ensure that elderly persons with different needs were able to receive appropriate services according to their practical circumstances.

## Agenda item 4: Setting up of a \$1 billion fund to promote gerontechnology

11. The <u>Chairman</u> invited <u>Ms PANG Kit-ling</u>, Assistant Director of Social Welfare (Elderly), to present to the Commission the Government's new initiative to set up a \$1 billion fund to promote gerontechnology. <u>Mr WONG Kit-loong</u> (a Member) declared that the organisation to which he belonged might apply for the fund.

12. <u>Ms PANG</u> made a PowerPoint presentation. She said that, as stated in the Chief Executive's 2017 Policy Address, the Government would earmark \$1 billion for setting up a fund to subsidise elderly and rehabilitation service units to try and procure technology products, so as to improve the quality of life of service users, and reduce the burden and pressure on carers of persons with disabilities and elderly persons as well as care staff.

The objective of establishing this fund was to provide financial support for applicant organisations to procure/rent or try technology products. A secretariat would be set up under the SWD to co-ordinate operational matters for the fund. An assessment panel would also be set up to vet applications and recommend the amounts of grants based on the following assessment criteria: the feasibility, sustainability and cost-effectiveness of the products; the benefits brought by the products to service users; and whether the applicant organisations have the experience, ability and professional knowledge to try the products. Non-governmental organisations and private organisations currently receiving subsidies from the SWD and providing residential care services or community care and support services, or day rehabilitation and community support services for the elderly or persons with disabilities were eligible applicants. Organisations might apply in the capacity of individual service units, or make joint applications on the basis of cross service units within the same district for shared procurement/rental or trial use of technology products. The fund would accept applications under two categories. The first category would be the procurement/rental of products on the reference list of "Recognised Technology Products". If the products were not on the reference list, the assessment panel would decide whether to approve the applications for procurement/rental. The second category would be the trial use of technology products designed specifically for the caring, nursing and rehabilitation needs of elderly persons or persons with disabilities. For applications under the first category, the SWD would set a ceiling for the amount of grant according to the types of services provided by the applicant organisations and their service capacity. For applications under the second category, there would be no ceiling for the grant so as to encourage applicant organisations to proactively identify and try out technology products that would be suitable for their target beneficiaries. The principles for granting a subsidy were that the technology products sought for procurement/rental or trial use should be able to benefit elderly persons and persons with disabilities, and their use would not impose extra financial burden on service users; where trial use of technology products was involved in an application, the applicant would be required to explain how the products would benefit the target beneficiaries, complete testing of the products within a specific timeframe after the items were approved and continue to use the products for at least two years; and, upon request of the assessment panel, an applicant granted with the subsidy would be required to open its service unit to members of the sector to visit the service units and see the operation of the technology products procured/rented or for trial use subsidised by the fund.

13. <u>Ms PANG</u> said that the SWD would invite other organisations to become collaborative partners to help promote advanced technology products to the sector. The SWD would also commission the Hong Kong Council of Social Service to promote to the

sector the application of innovative technology in long-term care services. The secretariat to be set up for the fund under the SWD would collaborate with or commission the Hong Kong Council of Social Service to set up a multi-disciplinary expert group for giving professional advice on the feasibility, sustainability and usage penetration of various items under application. The SWD would also put in place various measures to enhance the monitoring of the application items, and would conduct timely evaluation of the effectiveness of the fund and make adjustments to its mode of operation where necessary. The Government would brief the Legislative Council Panel on Welfare Services on the implementation plan of the fund in January 2018 and proposed to launch the fund in the fourth quarter of 2018.

14. After the briefing, the Chairman and Members raised the following suggestions, views and questions:

- (a) The Commission suggested that the Government should, in developing the mode of operation for the fund, avoid setting over-stringent eligibility criteria and complicated procedures for application in order to attract elderly service units to apply for subsidies for the procurement/rental or trial use of technology products, thereby promoting the application of gerontechnology to benefit more elderly persons.
- (b) A Member suggested that, apart from providing service units with subsidies for the procurement/rental or trial use of technology products, consideration should also be given to subsidising the research on related information technology so as to promote the development of gerontechnology.
- (c) A Member wished to know more about applicant organisations' responsibilities after receiving subsidies for trial use of technology products.
- (d) The Government should collect views systematically from service units which had received subsidies following their use of the technology products concerned. Information obtained through collating and analysing the observations would be useful for promoting the strategic development of gerontechnology.
- (e) A Member enquired how to set the ceiling for the amount of grant for the procurement/rental of technology products, and about the kinds of technology products expected to be procured with the grants.

- (f) It was hoped that the Government might consider expanding the scope of target beneficiaries of the fund to all private residential care homes.
- (g) The Commission suggested that the Government could consider accepting joint applications for subsidies by organisations intended to procure the same technology products. This would not only enable the Government to expedite the vetting procedures, but also allow the organisations concerned to make bulk purchase of the products at better prices.
- (h) The Commission suggested that welfare organisations within the same district should be allowed to make joint applications for subsidies to procure/rent technology products for use by elderly persons living in the same district.
- (i) Members considered that it was a good idea to permit the use of the fund to rent technology products, particularly for subscribing mobile applications and software.
- (j) The rental of technology equipment or hardware would involve issues such as cleanliness and hygiene of the products during the rental period, which had to be dealt with carefully during the vetting process. Consideration should also be given to whether a time limit should be set for the rental period and whether there should be a different ceiling for the amount of grant for rental of technology products.
- (k) It was suggested that in drawing up the reference list of "Recognised Technology Products", the Government could provide applicant organisations with practical information categorised by the function of product for their reference.
- 15. <u>Ms Carol YIP</u>, Director of Social Welfare, and <u>Ms PANG</u> replied as follows:
  - (a) As the application of technology by elderly service units was still at an early stage, the aim of setting up the fund would be to promote "the application of" instead of "the research on" gerontechnology, so as to improve the services provided for elderly persons. The Government had implemented other funding schemes to subsidise and encourage universities, local public research institutions and private enterprises to conduct research in various fields of technology, including projects involving gerontechnology.
  - (b) An applicant organisation for which a subsidy had been approved for the trial

use of a technology product had to complete testing of the product within a specified timeframe after the item was approved, report on the trial use of the product regularly and offer advice on product enhancement.

- (c) In setting the ceiling for the amount of grant, the SWD had taken the prices of technology products exhibited at the Gerontech and Innovation Expo cum Summit held in June 2017 as reference prices. The SWD considered that the grants would be adequate for elderly service units to procure/rent several technology products on the understanding that most of the popular technology products in the sector were generally priced under \$100,000. If the price of a technology product exceeded the grant ceiling, an organisation might make a joint application with other service units for a subsidy for shared procurement/rental and use of the technology product.
- (d) Private RCHEs participating in the Enhanced Bought Place Scheme, private RCHDs participating in the Bought Place Scheme, self-financing nursing homes participating in the Nursing Home Place Purchase Scheme and recognised service providers under the Pilot Scheme on Community Care Service Voucher for the Elderly or the Pilot Scheme on Residential Care Service Voucher for the Elderly were all eligible applicant organisations for the fund.

## Agenda Item 5: Progress Reports by Working Groups and Committee

## Working Group on Elderly Services Programme Plan

16. The <u>Chairman</u> said that the Working Group on Elderly Services Programme Plan had completed the formulation of the ESPP in June this year and meetings would be held on a regular basis to follow up and oversee the implementation of the recommendations in the ESPP. The next meeting was tentatively scheduled for January 2018.

17. In response to a suggestion raised at the last meeting of the Commission regarding the organisation of a forum for promoting medical-social collaboration, "Medical-social Collaboration" – Sharing Session on Best Practices was scheduled for 17 January 2018 at the Lady Trench Training Centre in Wan Chai for sharing and exchange of views among members of the healthcare sector and representatives of welfare organisations on various practical topics about medical-social collaboration. The Secretariat would invite all members of the Commission to join the sharing session.

## Working Group on Active Ageing

18. <u>Mr Gordon CHONG Kwok-wing</u>, Secretary to the Commission, said that the Islands District had been accredited by the World Health Organization as an age-friendly community. At present, a total of ten districts in Hong Kong, namely Tsuen Wan, Kwai Tsing, Sai Kung, the Southern District, Kwun Tong, Sha Tin, Tai Po, North District, Wan Chai and the Islands District, had been awarded this accreditation.

# Committee on Elder Academy Development Foundation

19. <u>Mr CHONG</u> reported that following the formation of the New Territories West Elder Academies (EAs) Cluster, the Hong Kong Island EAs Cluster and the Kowloon West EAs Cluster in 2011 and 2014, the New Territories East EAs Cluster and the Kowloon East EAs Cluster would also be established soon. When the two clusters were formed, the target of setting up five clusters covering EAs in all districts in Hong Kong would be achieved, and the interaction, collaboration and sharing of resources among EAs in the same district could be further promoted. The Vetting Sub-committee of the Elder Academy Development Foundation would hold a meeting on 5 December 2017 to consider the second round of funding applications for 2017-18.

# Agenda Item 6: Any other business

## Restructuring of working groups under the Elderly Commission

20. Mr CHONG said that there were currently three working groups under the Commission, namely the Working Group on Long Term Care Model, the Working Group on Active Ageing and the Working Group on Elderly Services Programme Plan. The former two working groups were both set up in 2005. Having reviewed the background of the establishment of the two working groups and their respective terms of reference, it was considered that their major issues of concern had already been covered by the ESPP and could be followed up by the Working Group on Elderly Services Programme Plan. As promoting "ageing in place" was one of the key strategic directions set out in the ESPP, the Secretariat suggested that the Commission could consider setting up a new working group dedicated to explore issues relating to "ageing in place", replacing the existing Working Group on Long Term Care Model and Working Group on Active Ageing. The new working group would make recommendations to the Commission on issues relating to "ageing in place", including those for promoting active ageing and enhancing community care services for the elderly.

21. The Chairman and Members unanimously agreed to set up the new Working Group on Ageing in Place to replace the existing Working Group on Long Term Care Model and Working Group on Active Ageing. The Secretariat would invite Members to join the new working group after the meeting and send them the proposed terms of reference of the new working group for information.

(Post-meeting note: The Working Group on Ageing in Place was set up on 1 January 2018.)

# Time of adjournment

22. The meeting was adjourned at 12:30 p.m.

# Date of next meeting

23. The next meeting was tentatively scheduled for 7 March 2018.(Post-meeting note: The next meeting was scheduled for 11 April 2018.)

January 2018