

Minutes of the  
Social Welfare Advisory Committee (SWAC) Meeting  
Held on 28 October 2003 (Tuesday)

**Present**

Mr Wilfred Wong Ying-wai (Chairman)

Mr Darwin Chen

Mr Stephen Chow Chun-kay

Ms Christine Fang Meng-sang

Mr Wilfred Lee Chee-wah

Dr Leung Cho-bun

Mrs Mary Leung Ling Tien-wei

Prof Diana Mak Ping-see

Mr Poon Huen-wai

Mr Aaron Wan Chi-keung

Miss Deborah Wan Lai-yau

Ms Marina Wong Yu-pok

Mr Stephen Yau How-boa

Miss Jessie Yu Sau-chu

Ms Wendy Cheung (Secretary)

In Attendance

**Health, Welfare and Food Bureau (HWFB)**

Miss Susie Ho Deputy Secretary for Health, Welfare & Food (Welfare)

Miss Diane Wong Principal Assistant Secretary for Health, Welfare & Food (Welfare)

Mr Kenneth Chan Assistant Secretary for Health, Welfare & Food (Welfare) 1 (for item 1 only)

Miss Phidias Tam Assistant Secretary for Health, Welfare & Food (Welfare) 2 (for item 2 only)



## Social Welfare Department (SWD)

Mrs Carrie Lam	Director of Social Welfare
Miss Ophelia Chan	Assistant Director, Rehabilitation and Medical Social Services (for item 3 only)
Mr Fung Pak-yan	Assistant Director, Family and Child Welfare (for item 1 only)
Miss Cecilla Li	Senior Social Work Officer (Family)(for item 1 only)
Miss Ada Leung	Principal Executive Officer (Resource Management) (for item 2 only)

## Hospital Authority (HA)

Dr Daisy Dai	Senior Executive Manager (Medical Services Development) (for item 3 only)
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### (1) **Interim Report on the Implementation of the Review of Family Services [SWAC Paper No. 11/03]**

The paper reported on the progress of Social Welfare Department's (SWD's) consultation with a group of un-identified workers, Hong Kong Social Workers' Association (HKSWA) and Hong Kong Council of Social Service (HKCSS) about the Department's proposals on integration of family service. In response to the views of those three groups, the Working Group on the Implementation of the Review of Family Services (the Working Group) had made some recommendations. While the group of unidentified workers and HKSWA still had some reservations, the HKCSS supported all the recommendations of the Working Group. In order to fill the service gap, SWD would start preparation for converting the Department's Family Service Centres into Integrated Family Service Centres (IFSCs). The NGO sector might defer their plans for a while based on their practical and operational considerations.

### 2. Members made the following comments :

- (a) the interests of the service recipients should come first. While there were views that IFSCs should not be implemented till the completion of the evaluative study, it was generally agreed that the new model should be introduced as early as possible for service improvements. The NGOs should also consider implementing IFSCs in pace with the SWD;

- (b) it was suggested that the final report of the evaluative study should make objective recommendations on the mode of collaboration among agencies and SWD for implementing family services in future. A mechanism should also be put in place to monitor the ongoing development of service needs;
- (c) feedback received from the consultation appeared contradictory, as on the one hand integration of services was required, but on the other hand pooling of resources beyond family services was considered by some to be inappropriate; and
- (d) to address staff's concern over their job security following the pooling of resources, it was considered that the management of NGOs should have more communication with their frontline workers and provide more training/sharing opportunities to help them understand the new IFSC model better and change their mindset in the light of the changing environment.

3. The Government's response included:

- (a) SWD would start preparation for the re-engineering of family services early to cope with the rising social and family problems. The Department targeted to have a blue-print of the re-engineering in place by 1 April 2004; and
- (b) SWD had all along no intention to pool the resources of community centres into IFSCs. It would be up to individual NGOs to propose whether to pool such resources. Before making such proposals, the concerned NGOs should conduct thorough staff consultations, solicit adequate buy-in of stakeholders and obtain necessary policy clearance from the Home Affairs Bureau.

4. The meeting considered that after intensive discussions over the last few months, consensus had been reached between SWD and the sector on the direction of re-engineering of family services. It would be more desirable and efficient for the NGOs to start in parallel with SWD. On the remaining issue of staff concern over job security, the Committee concluded that the management of NGOs should provide more communication and

training opportunities for the frontline workers to understand the new model better. The Working Group's recommendations on the family service re-engineering exercise were endorsed.

(2) **Social Work Manpower Planning System (SWMPS) Report**

**[SWAC Paper No. 12/03]**

5. The paper reported on the latest manpower projections for the period 2002/03 to 2006/07 as presented in the SWMPS Report. Since there had been concerns on the worthiness of the manpower planning exercise, the Advisory Committee of Social Work Training and Manpower Planning (ACSWTMP) would have a deliberation on the exercise.

6. Members made the following points:

- (a) it was considered that with the continuous surplus of social work personnel (SWP), there might be less need to devote further resources on the manpower projection exercise. As to the manpower statistics, snapshot data were still useful. However, it was not necessary to conduct surveys too frequently since the changes were insignificant; and
- (b) it was suggested that in reviewing the manpower planning exercise, the Joint Committee on Social Work Manpower Planning (JCSWMP) might draw reference from other sectors which also conducted similar exercises and make appropriate modifications. On the staff surplus issue, job opportunities of trained social workers in the market of the mainland China under the Closer Economic Partnership Arrangement should be further explored.

7. The Government's response included:

- (a) in view of the continuous surplus in the supply of social workers and the substantive administrative resources required for the manpower planning exercise, there was less need for the exercise;
- (b) as the manpower data kept by the Social Workers' Registration Board (SWRB) were quite similar to those established by the JCSWMP, the feasibility of SWRB to provide an alternate source of updated information on SWP was being considered.

8. The meeting concluded that as the original purpose for the manpower projections of social workers had faded out, the worthiness of keeping the manpower planning system became doubtful. While the manpower statistics was useful to a certain extent, it might not be necessary to continue the annual manpower planning exercise. The ACSWTMP should also explore whether another organization, instead of SWD, would be in a better position to provide the manpower statistics of SWP.

**(3) Support Measures for Severe Acute Respiratory Syndrome (SARS) Patients and their Families in the context of the Outbreak from March to June 2003 [SWAC Paper No. 10/03]**

9. The paper outlined the support measures provided for SARS patients and their family members by the Government/Hospital Authority. In particular, a Trust Fund for SARS was proposed for providing special ex-gratia relief payments to families with deceased SARS patients or special ex-gratia financial assistance to eligible recovered SARS patients. In response to Members' comments, the following clarifications were made by the Government :

- (a) financial assistance under the Trust Fund, which was special and ex-gratia in nature, would not have any effect of precluding applicants/recipients from taking legal action against the Government or others such as the Hospital Authority for the SARS cause;
- (b) the granting of financial assistance to the SARS patients and their families would not carry any legal implication that the Government acknowledged any legal liability on the part of the Government or HA vis-à-vis such patients and their families;

- (c) if recipients of the ex-gratia assistance succeeded in obtaining common law damages against any party subsequently, they would be required to make reimbursement to the proposed Trust Fund;
- (d) where an applicant applied for legal aid in the context of pursuing civil claims for the SARS cause, the Legal Aid Department would not take into account the ex-gratia assistance received by the applicant in assessing his/her means;
- (e) since the ex-gratia assistance came from public funds, this would have to be taken into account in determining the eligibility for the Comprehensive Social Security Assistance (CSSA) if the recipients wished to apply for CSSA;
- (f) Members' suggestion to set up a review mechanism to consider applications by applicants aggrieved by the decisions of the Trustee on the advice of the Committee on Trust Fund for SARS would be considered; and
- (g) as regards whether the earmarked sum for recovered patients was sufficient, the Administration was exploring whether it was possible to raise the earmarked sum further.

[Post-meeting note: After further discussions with the Legislative Council, the total commitment of the Trust Fund was increased from \$130 million to \$150 million, and the ambit of special ex-gratia financial assistance was extended to 'suspected' SARS patients treated with steroids as well.]

10. While the proposed Trust Fund was generally supported, some Members raised their concern over the appropriateness of creating a new commitment in the light of the Government's fiscal deficits. In addition, detailed eligibility criteria and procedures should be clearly formulated and the disbursement of funds should be closely monitored to ensure the fair and proper use of public money. The Government explained that the SARS outbreak from March to June 2003 was unique and unprecedented. The proposed Trust Fund was a unique measure to address an unprecedented distressful situation, which would not set a precedent for patients of other diseases and future SARS cases, if any. The meeting supported the proposed Trust Fund in the paper.

Health, Welfare and Food Bureau

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