

Hong Kong Rehabilitation Programme Plan Formulation of Recommendations Stage Public Forum

Information Pack for Participants

Background

Hong Kong Rehabilitation Programme Plan (RPP) sets out the strategic directions and measures to address various service needs of persons with disabilities. RPP currently covers 10 types of disabilities. RPP was last reviewed and updated in 2007. To keep our rehabilitation services abreast with the times, the Chief Executive announced in the 2017 Policy Address that the Government had asked the Rehabilitation Advisory Committee (RAC) to commence work in formulating a new RPP.

2. The RAC set up a Review Working Group and five Task Forces to take forward the task, and commissioned the Hong Kong Polytechnic University (Consulting Team) to provide consultancy service to the Review Working Group and to launch public engagement exercise. The Consulting Team also assists the Review Working Group in consolidating the findings of the Task Forces on the specialised issues, with a view to mapping out the overall strategic directions.

Guiding Principles

3. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) has entered into force for Hong Kong since August 2008. The purpose of UNCRPD is to promote, protect and ensure the full and equal enjoyment of rights and freedoms by persons with disabilities, and to promote respect for their inherent dignity. The RAC will abide by the core values of “diverse needs of persons with disabilities”, “individual autonomy and independence” and “barrier-free environment, transport and information” enshrined in UNCRPD. In this connection, in the formulation of the new RPP, the RAC adopted the following guiding principles –

- (a) adopting a life span approach in examining the needs of persons with disabilities in different aspects in different stages of their lives;
- (b) exploring cross-sectoral collaboration in providing services for persons with disabilities; and

(c) conducting in-depth and extensive consultation and research work.

4. Considering the core values of UNCRPD, the RAC has also asked the Consulting Team to prioritise its study on measures to strengthen community support services for persons with disabilities and their carers, such that persons with disabilities can choose to continue to live in the community, hence postponing the need for admission to residential homes.

Public Engagement

5. There are three stages of public engagement exercise for the formulation of the new RPP, namely Scoping Stage, Formulation of Recommendations Stage and Consensus Building Stage:

- (a) Scoping Stage: to define the scope of the new RPP and identify the key issues that need to be addressed, to commence discussion with various sectors of the community and to collate their views;
- (b) Formulation of Recommendations Stage: to analyse the key issues identified and examine the overall direction and possible options for consideration to address these issues; and
- (c) Consensus Building Stage: to discuss with various sectors of the community on the final recommendations of the new RPP and build up a consensus on these recommendations.

Scoping Stage Work

6. The public engagement exercise for the Scoping Stage began in March 2018 and was completed in June 2018. More than 1 000 persons participated in the public engagement exercise (including district fora, stakeholder meetings, focus group sessions) and 70 written submissions were received during the period. The Report on Scoping Stage prepared by the Consulting Team has been uploaded to its website (www.rs.polyu.edu.hk/rpp) for public viewing.

Priority Themes and Key Issues under the Formulation of Recommendations Stage

7. In view of the opinions collected at the Scoping Stage, the Consulting Team recommends that priority should be accorded to the following 36 key issues under 10 themes for the Formulation of Recommendations Stage of public engagement exercise:

Themes	
A. Macro Issues	
Theme 1	Definition of persons with disabilities
	1. Need for new categories of disabilities
	2. Need for a breakdown of more specific disability categories from existing categories or updating the description of certain disability categories
	3. Study of the experience of other countries/economies in introducing the World Health Organisation's "International Classification of Functioning, Disability and Health" for disability classification and assessment
Theme 2	Service planning for community support services and residential care services and interface between the two
	4. Service capacity of existing community support service centres (e.g. District Support Centres for Persons with Disabilities, Day Care Service for Persons with Severe Disabilities, Day Care Services for the Disabled, Social and Recreation Centre for the Disabled, Day Activity Centres, Parents/Relatives Resources Centre, etc.) and the appropriate mode of interface among these centres/services
	5. Need for setting up specialised service centres for specific types of disabilities
	6. Service capacity and service targets of home-based support services
	7. Demand for residential care services after strengthening of community support services

Themes	
	8. Future planning parameters and basis for community support facilities (including the application of technology)
	9. Future planning parameters and basis for residential care facilities (including the application of technology)
	10. Carers' support (including direct support for carers themselves and indirect support through services such as respite service and emergency placement service for the persons of disabilities under their care)
	11. Consolidation of various cash subsidy schemes under existing Community Care Fund pilot schemes ¹ and feasibility of introducing care service voucher
	12. Support for self-help organisations (including funding, premises and manpower)
Theme 3	Supply of manpower for rehabilitation and care services
	13. Projection of overall manpower requirements, including allied health professionals (e.g. nurses, occupational therapists, physiotherapists, speech therapists, clinical/educational psychologists, etc.) and frontline staff (e.g. personal care workers, health workers, special child care workers, etc.)
	14. Measures to increase manpower supply
	15. Measures to increase the flexibility of service units to employ and mobilise professionals/care staff
Theme 4	Ageing of persons with disabilities
	16. Measures to promote health awareness in residential care homes and community to handle and alleviate early onset of ageing and other health-related problems

¹ These schemes include "Pilot Scheme on Living Allowance for Low-income Carers of Persons with Disabilities", "Special Care Subsidy for the Severely Disabled" and "Pilot scheme on providing subsidy for Higher Disability allowance recipients in paid employment to hire carers".

Themes	
	17. Types of special services to be provided in residential care homes (e.g. professional services for handling swallowing problems, outreaching medical and rehabilitation services, etc.)
	18. Optimisation of vocational rehabilitation pathway, including a review on the training and care needs of ageing service users of Sheltered Workshop
Theme 5	Prevention, identification and medical rehabilitation
	19. Strengthening early identification and assessment of children with special needs
	20. Measures to allow persons with mental health needs to obtain early and appropriate information and services
	21. Reasonable accommodation measures for persons with disabilities to obtain medical services (including dental services and supporting arrangements for hospitalisation)
Theme 6	Accessibility
	22. Accessibility of community/living environment through improvement of environment/facilities and application of innovative technology and use of assistive devices
	23. Accessibility of transportation, including the positioning of and interface between barrier-free public transport system and Rehabus service, as well as application of technology to enhance efficiency and service quality
	24. Access to information (e.g. Web accessibility) and services (e.g. banking service) and application of technology to enhance access
Theme 7	Employment Support
	25. Review of existing employment support measures (including future development of social enterprises) and formulation of new employment support measures (having regard to an increasing number of persons with disabilities)

Themes	
	acquiring higher education and advancement in technology)
	26. How to establish “Disability Inclusive Culture” among enterprises (instead of “Corporate Social Responsibility”) and to promote “reasonable accommodation” measures in the workplace
	27. Analysis of the pros and cons and implications of new policies advocated by some stakeholders (e.g. employment quota for persons with disabilities and wage subsidy)
Theme 8	Mental Wellness
	28. Measures to enhance service capacity and quality of services to cope with common mental disorder (particularly depression) through collaboration among medical, social welfare and education sectors
	29. Measures to facilitate recovery and social integration of mentally ill patients
	30. Review of service positioning, service targets, service delivery model of the Integrated Community Centre for Mental Wellness and their collaboration with other sectors and service units
Theme 9	Special Needs
	31. Supporting models for pre-school rehabilitation services and bridging services for children with special needs from kindergarten to Primary One
	32. Supporting models for students with special education needs in primary and secondary schools
	33. Support for graduates with special education needs (including continuous education needs and career planning)

Themes	
Theme 10	Disability Inclusive Culture
	34. Measures to enhance public education (including the further promotion of UNCRPD, mental health and guide dog services)
	35. Measures to promote the participation of persons with disabilities in arts and sports
	36. Accessible entertainment and information, including the promotion of sign language, audio description and easy read format

Your Views

8. If you have further views or suggestions on the RPP, you may send them to the Consultant Team of the Hong Kong Polytechnic University (the Consultant Team) through the following means:

- Visit the RPP website www.rs.polyu.edu.hk/rpp and fill out the opinion form; or
- Send your written views by email or post to:

Email: rs.rpp@polyu.edu.hk

Address: Room ST 109, 1/F, Core S, Hong Kong
Polytechnic University, Hung Hom, Hong Kong.
(Attention: Consultant Team, Hong Kong
Rehabilitation Programme Plan)

9. Please note that submissions received on or before 4 April 2019 will be considered together with other views gathered in the Formulation of Recommendations Stage, whereas those received afterwards will be accounted for in subsequent public engagement stage. In addition, the Consultant Team has the right to use your opinion (in extracted or original form) as part of the consultancy report. You may request in your submission of keeping your personal/organization's identity confidential. Decisions on whether the submissions will be quoted are left to the discretion of the Consultant Team.

Hong Kong Polytechnic University Consultant Team