

**Hong Kong Rehabilitation Programme Plan – Formulation of
Recommendations Stage
Seminar Information Pack for Participants**

Issues on Ageing of Persons with Disabilities

Foreword

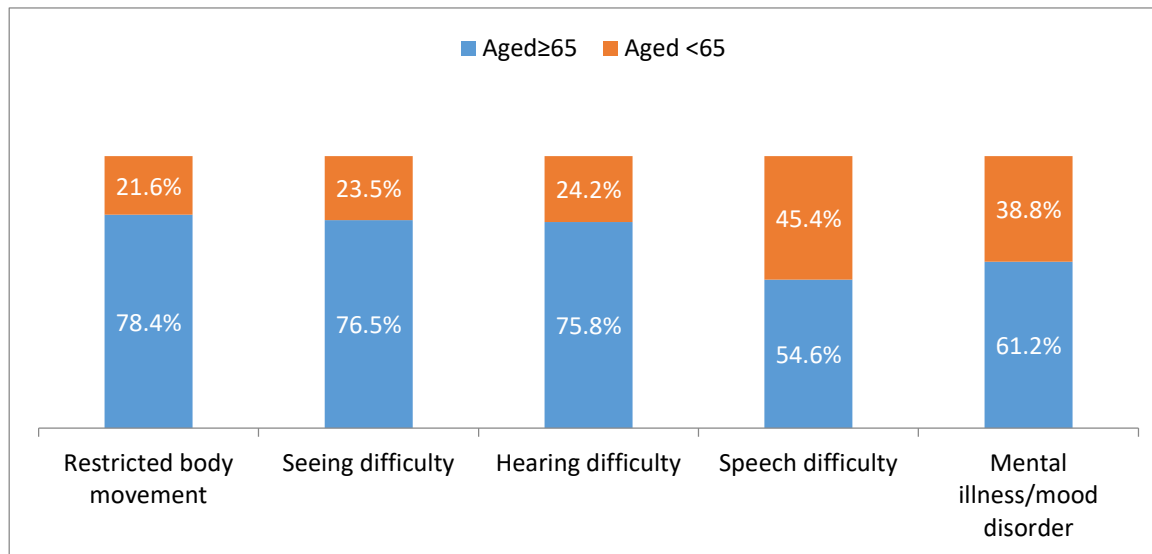
To keep the rehabilitation services abreast with the times, the Government has asked the Rehabilitation Advisory Committee (RAC) to commence work in formulating the new Hong Kong Rehabilitation Programme Plan (RPP). RAC set up a dedicated working group to take forward the task and commissioned the Hong Kong Polytechnic University Consulting Team (Consulting Team) to provide consultancy service and launch public engagement exercise.

2. With the assistance of the Consulting Team, RAC collected comments on the scope of the new RPP from the stakeholders and completed the first stage of public engagement exercise (Scoping Stage) in June 2018.
3. In response to views collected in the public engagement exercise for the Scoping Stage, the focus of this seminar is on issues on ageing of persons with disabilities.

Background

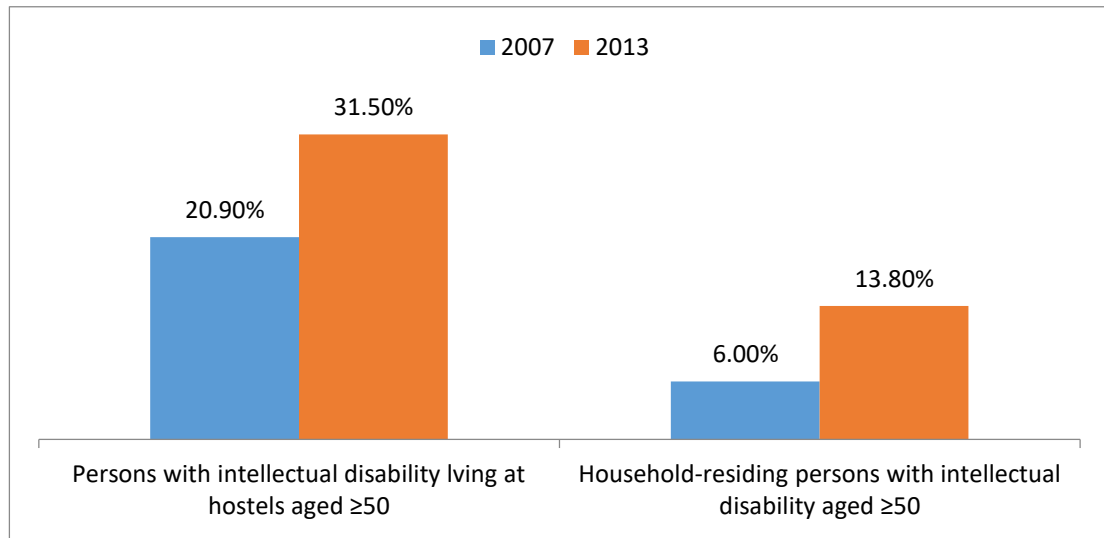
According to “Social data Collected via the General Household Survey: Special Topics Report – Report No. 62”, of those persons with the selected eight categories of disability (including people with restriction in body movement, seeing difficulty, hearing difficulty, speech difficulty, mental illness/mood disorder, autism, specific learning difficulties and/or attention deficit/hyperactivity disorder), the majority (over 60%) aged 65 or above. Among the eight categories of disability, there are five categories (including people with restriction in body movement, seeing difficulty, hearing difficulty, speech difficulty, mental illness/mood disorder) mainly consisting of persons aged 65 or above (See Table 1).

Table 1: Categories of disability with majority of persons with disabilities aged 65 and above.



2. While persons with intellectual disability are generally younger than those of other types of persons with disabilities, by comparing the results in Report No. 48 and No. 62, the number of persons with intellectual disability aged 50 or above has increased over the years (See Table 2). Of all persons with intellectual disability living in hostels, 31.5% of them aged 50 or above in 2013, as compared to 20.9% in 2007; of all household-residing persons with intellectual disability, 13.8% of them aged 50 or above in 2013, as compared to 6% in 2007.

Table 2: Ageing of persons with intellectual disability



3. Certain persons with disabilities may suffer from frailty or decline in body functions earlier than ordinary people. In 2014, the Labour and Welfare Bureau (LWB) commissioned the Hong Kong Polytechnic University to conduct a study on the ageing trend of persons with intellectual disability. According to this study¹, persons with intellectual disability suffer from various chronic diseases and the related functional impairments earlier than ordinary people of the same age group. Hypertension, diabetes, and cataract are the more common medical conditions found in all age groups of the study subjects. There is a tendency for the average number of medical conditions of persons with intellectual disability to rise with increasing age, starting from the age of 30 to 39. Persons with Down Syndrome have more co-morbid disabilities and medical conditions when compared with those without Down Syndrome, and they have significantly more medical conditions starting from the age of 30 to 39. As for persons with cerebral palsy, they have significantly more medical conditions starting from the age of 50 to 59.

1. Special services to be provided in Residential Care Homes

4. Owing to advancement in medical technology and ongoing improvement in socio-economic conditions, the average life expectancy of persons with disabilities

¹ Report of Survey Study on the Ageing Trend of Persons with Intellectual Disabilities (2016, Hong Kong Polytechnic University).

is getting longer. The Government has been mindful of the needs of ageing users of rehabilitation services. To enhance the support for the ageing users of rehabilitation services, the Government has introduced various enhanced measures in Residential Care Homes for Persons with Disabilities (RCHDs):

- (a) Extended Care Programme
- (b) Work Extension Programme
- (c) Visiting Medical Practitioner Scheme
- (d) Support to enhance residential care services
- (e) Provide transportation service for the ageing service users
- (f) Provide speech therapy service

Details of the above enhanced measures are in the Annex.

2. Optimisation of vocational rehabilitation pathway for the ageing persons with disabilities

5. At present, the Sheltered Workshop/Integrated Vocational Rehabilitation Service (SW/IVRSC) does not set an age limit for withdrawal from the service. With the ageing of service users, the existing service model and supporting facilities may not be suitable for them. Data from the Social Welfare Department (SWD) shows that more than 10% of the persons with disabilities receiving services in Day Activity Centres cum Hostels for Severely Mentally Handicapped Persons (DAC cum HSMHs) or SW/IVRSCs cum Hostels for Moderately Mentally Handicapped Persons (HMMHs) are aged 60 or above. The organisations providing related services indicated that most of the ageing users of rehabilitation services are those with chronic diseases whose physical and mental function are significantly degraded so that they cannot continuously participate in or benefit from existing day training or vocational rehabilitation model. The Government also pays attention to the increasing numbers and time in waiting for related services mentioned above.

6. To provide more appropriate rehabilitation services to the ageing users, the Chief Executive announced in the 2018 Policy Address that the Government will review the training and care needs of the ageing service users of DAC cum HSMHs or SW/IVRSCs cum HMMHs, and explore the need and feasibility of developing a new service model. The SWD will review and explore the need and feasibility of developing a new service model, for example, to undergo a pilot

scheme that enables the ageing services users to receive one-stop day training or vocational rehabilitation and residential care services in their hostels, which enable SW/ IVRSCs use vacancies to receive new service users and reduce the waiting time for these services.

3. Measures to alleviate early onset of ageing

7. To alleviate the early onset of ageing and other health problems for persons with disabilities, LWB, in collaboration with the Department of Health, set up a task force and invited non-government organisations, parents' associations and persons with intellectual disability to participate in the production of an information kit on basic health and disease prevention to enhance the health education work (including good exercise and eating habits, oral and dental care, etc.), with a view to providing parents and carers of persons with intellectual disability with more healthcare training in respect of their children with intellectual disability and enhance their knowledge of disease prevention. The information kit was distributed to rehabilitation services organisations, parents' associations and self-help organisations in the fourth quarter of 2017, such that they could hold talks and promotional activities on the use of the information kit for frontline staff, persons with intellectual disability, and their parents or carers. On the other hand, SWD also encourages rehabilitation services organisations to provide their staff with on-the-job training about caring for persons with intellectual disability so that they can properly convey relevant information to persons with intellectual disability as well as their parents and carers.

8. The Government strives to work with rehabilitation services organisations in alleviating the early onset of ageing and other health problems for persons with intellectual disability. Under the coordination of the LWB, the Queen Elizabeth Foundation for the Mentally Handicapped allocated funding to six non-government organisations/medical groups in 2016-17, funding eight projects on the provision of check-up services (including optometric, hearing and dental screening) for service users with intellectual disability. These services will enable carers of persons with intellectual disability to detect at an early stage the symptoms of early onset of ageing, thus facilitating referrals and follow-up actions as appropriate. The Queen Elizabeth Foundation for the Mentally Handicapped also provided funding to four non-government organisations in 2017-18 to subsidize four body check services programmes (including orthopaedics, dentistry, and foot) for users of services for intellectual disability.

9. In addition, starting from 2018-19, the Rehabilitation Advisory Committee Sub-committee on Public Education on Rehabilitation (the Sub-committee) has included “Promoting Health Information for Persons with Intellectual Disabilities” as one of the promotional themes on the public education/publicity on rehabilitation funding guidelines, with a view to encouraging rehabilitation service organisations and special schools to apply for funding to organise district-based publicity activities on promoting health information for persons with intellectual disability. In 2018-19, the Sub-committee allocated \$998,495 to rehabilitation services organisations and special schools to subsidise 19 projects on "Promoting Health Information for Persons with Intellectual Disability".

Discussion:

1. How does the ageing of persons with disabilities (especially persons with intellectual disability) affect the need for rehabilitation services?
2. What types of special service are required in residential homes for meeting the service needs of persons with disabilities (especially persons with intellectual disability)?
3. How should vocational rehabilitation services cope with the ageing of service users?
4. What are the needs and challenges brought by the early onset of ageing of persons with disabilities (especially persons with intellectual disability)? How should residential and community services cope with such issue?
5. How to promote health awareness in the community and residential homes to handle and alleviate the early onset of ageing and other health-related problems of persons with disabilities (especially persons with intellectual disability)?
6. What types of technology products (e.g. fall prevention products) could help the daily life of ageing persons with disabilities living in the community to slowing down ageing and preventing diseases?

SWD's Enhanced Measures for Ageing Service Users

Names of the Measure	Details of the Measure
Extended Care Programme	<ul style="list-style-type: none">• Provide appropriate services, including occupational therapy/physiotherapy services, for the service users in Day Activity Centres (DACs) who could no longer benefit from prolonged or intensive training due to ageing or deterioration of health condition.• 895 and 465 places have been increased in 2014-15 and 2018-19 respectively.• A total of 69 units providing 1,485 places as at January 2019.
Work Extension Programme	<ul style="list-style-type: none">• Provide appropriate services, including care/health care services for the ageing services users of Sheltered Workshops/ Integrated Vocational Rehabilitation Services Centres (SW/IVRSCs) who could no longer benefit from normal vocational training due to old age or deterioration in work abilities.• 645 and 290 places have been increased in 2014-15 and 2018-19 respectively.• A total of 50 units providing 1,130 places as at January 2019.
Visiting Medical Practitioner Scheme	<ul style="list-style-type: none">• Provide primary medical care and support for residents in subvented Residential Care Homes for Persons with Disabilities (RCHDs) to cope with their ageing and health deterioration.• In 2016-17, the annual recurrent provision for the scheme has increased by around \$9.5 million to about \$26 million, with the aim to strengthening the provision of primary medical care and support for residents with disabilities.
Support to enhance residential	<ul style="list-style-type: none">• In 2015-16, the annual recurrent provision has increased by \$25.9 million for strengthening the manpower provision of Long Stay Care Homes (LSCHs) and

Names of the Measure	Details of the Measure
care services	<p>enhancing the allied health services of Hostels for Moderately Mentally Handicapped Persons (HMMHs) to care and support the ageing service users.</p> <ul style="list-style-type: none"> • In 2018-19, health workers have been provided in Supported Hostels (SHOSs) for persons with intellectual disability, persons with physical disability and ex-mentally ill persons to enhance the health care services in the SHOSs. • In 2018-19, a four-year pilot scheme has been launched to establish a district-based professional team including social workers, physiotherapists and occupational therapists to provide outreach services for residents in private RCHDs and private residential care homes for the elderly to meet their social and rehabilitation needs.
Provide transportation service for the ageing services users	<ul style="list-style-type: none"> • In 2016-17, applied around \$68.32 million from the Lotteries Fund for procuring 73 centre vehicles for DAC cum HSMHs and the Community Rehabilitation Day Centres (CRDCs) to cope with the ageing services users' need of out-patient visits or other rehabilitation activities. • In 2016-17, a recurrent funding around \$19 million has been allocated to increase the number of drivers and enhance the bus services of 59 DAC cum HSMHs and four CRDCs to cater for the ageing rehabilitation services users' need for outpatient visits and activities.
Speech Therapy Services	<ul style="list-style-type: none"> • In 2018-19, resources have been allocated to NGOs for providing speech therapy services to users of HMMHs, HSMHs, Hostels for Severely Physically Handicapped Persons with Mental Handicap and Care and Attention Homes for Severely Disabled Persons, and to assist in the swallowing problem of the ageing services users. • The Chief Executive announced in the 2018 Policy Address that the Government would extend speech therapy services to Care and Attention Homes for the Aged Blind, LSCHs and HWHs.