(Translation) **Elderly Commission** Minutes of the 111th Meeting

Date: 20 June 2023 (Tuesday) Time: 11:00 a.m. Venue: Conference Room 3, G/F, Central Government Offices, 2 Tim Mei Avenue, Tamar, Hong Kong

Present:

Chairman

Dr LI Kwok-tung, Donald, SBS, JP

Members (Members marked with an asterisk (*) attended virtually) Dr BAI Xue Dr CHAN Chi-kau, Johnnie Casire, SBS, JP Ms CHAN Mei-kit, Maggie, MH Ms CHAN Yee-ching, Tammy Mr CHUA Hoi-wai, JP Prof LAI Wing-leung, Daniel Prof LAM Chiu-wa, Linda* Mr LAU Tat-chuen Ms LI Fai, Grace, MH Mr MA Heng, Theodore Ms WONG Chor-kei, Macy, MH Ms YU Chui-yee, BBS, MH* Ms LAU Yim, Alice, JP Permanent Secretary for Labour and Welfare Dr LEE Ha-yun, Libby, JP Under Secretary for Health Director of Social Welfare Miss LEE Pui-sze, Charmaine, JP Dr HO Lei-ming, Raymond Ms AU Mo-ching, Katherine Dr CHING Wai-kuen

Assistant Director of Health (Elderly Health) Chief Manager/Management (Support Services Section 2), Housing Department Director (Strategy and Planning), Hospital Authority

In attendance: Ms KWOK Wai-ling, Polly, JP Deputy Secretary for Labour and Welfare (Welfare) 2 Mr LEE Lik-kong, Eddie Deputy Secretary for Health 2 Ms LAW Lai-tan, Linda Principal Assistant Secretary for Labour and Welfare (Welfare) 3 Ms YAN Lai-ming, Jenny Assistant Director of Social Welfare (Elderly) Ms KWAN Shuk-yee, Nancy Assistant Director of Social Welfare (Licensing and Regulation) Ms CHAN Sin-yee, Perin, Sindy Chief Social Work Officer (Elderly)3, Social Welfare Department Dr HO Yuen-ha, Sara Chief Manager (Patient Safety and Risk Management), Hospital Authority Dr LEUNG Lok-hang Deputising Chief Manager (Primary and Community Services), Hospital Authority

Mr LAU Shun-tak

Ms HO Koon-ling, Rosanna

Absent with apologies:

Mr LIT Hoo-yin, Horace Dr LUK Ka-hay, James Mr SIU King-wai, Kyrus

<u>Secretary</u>

Ms CHAN Ah-wing, Ivy

Principal Assistant Secretary for Labour and Welfare (Welfare) 4

Chief Executive Officer (Welfare) 4, Labour and

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Welfare Bureau

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<u>Dr LI Kwok-tung, Donald</u>, the <u>Chairman</u>, welcomed all Members to the meeting, in particular those who were attending for the first time, including <u>Dr LEE Ha-yun, Libby</u>, Under Secretary for Health, <u>Dr HO Lei-ming, Raymond</u>, Assistant Director of Health (Elderly Health), <u>Ms YAN Lai-ming</u>, Jenny, Assistant Director of Social Welfare (Elderly), <u>Ms AU Mo-ching, Katherine</u>, Chief Manager/Management (Support Services Section 2) of the Housing Department and <u>Dr CHING Waikuen</u>, Director (Strategy and Planning) of the Hospital Authority (HA). 2. The <u>Chairman</u> reminded Members that they must declare potential conflict between their interests and matters under discussion, if any.

Agenda item 1: Confirmation of the minutes of the 110th meeting

3. Members did not propose any amendments to the Chinese and English versions of the draft minutes issued by the Secretariat on 7 June 2023. The minutes were confirmed.

Agenda item 2: Matters arising

4. There were no matters arising from the 110th meeting.

Agenda item 3: End-of-life care: legislative proposals on advance medical directives and dying in place

5. <u>Mr LEE Lik-kong, Eddie</u>, Deputy Secretary for Health 2, briefed Members on the end-of-life care legislative proposals concerning advance medical directives (AMDs) and dying in place.

6. After the briefing, the <u>Chairman</u> and Members expressed views¹ and raised questions as follows:

- (a) how legal disputes arising from challenges by family members against AMDs would be dealt with after legislation;
- (b) how healthcare workers would handle situations where family members of a patient, who had made an AMD, requested life-sustaining treatment for the patient;
- (c) how the Government would proactively promote AMDs to the public in light of the Singaporean experience where the number of participants remained low despite promotional efforts of AMDs over the past decade;

¹ The written comments submitted by Member <u>Mr MA Heng. Theodore</u> on 18 June this year had been forwarded to the Health Bureau for consideration.

- (d) the Government might consider promoting the concepts of advance planning as well as life-and-death education among the public early, so that they could make prior arrangements to prepare for future deterioration of physical conditions;
- (e) currently, under the Coroners Ordinance (Cap. 504), all cases of deaths (including cases of natural deaths) in residential care homes (RCHs) for persons with disabilities (RCHDs) or RCHs for the elderly (RCHEs) which were not nursing homes (specified RCHs) were categorised as reportable deaths, irrespective of whether the person had been diagnosed with terminal illness or attended to by a registered medical practitioner (RMP) within 14 days prior to his/her death. Subsequent to the legislative amendments, whether death cases meeting the prescribed conditions at specified RCHs would still be reportable to the Social Welfare Department (SWD) in accordance with the prevailing requirements under the RCH ordinances; and
- (f) whether the Government would retrofit supporting facilities at existing RCHs for residents to spend the final days in their care homes and provide training to RCH staff, given that newly-built RCHs were equipped with such supporting facilities and a greater demand for related facilities was expected following the legislative amendments.

7. In response to Members' views and questions, <u>Dr LEE Ha-yun, Libby</u>, <u>Mr LEE Lik-kong</u>, <u>Eddie</u>, <u>Ms KWOK Wai-ling</u>, Polly, Deputy Secretary for Labour and Welfare (Welfare) 2 and <u>Ms</u> <u>YAN Lai-ming</u>, Jenny, gave consolidated replies as follows:

- (a) implementation of the Advance Decision on Life-Sustaining Treatment Bill (the Bill) would give legal effect to a maker's AMD. The Bill would specify that the making of an AMD required two witnesses, one of whom must be an RMP, who should be satisfied that the maker was mentally capable to make an AMD and had been informed of the nature of the AMD as well as the consequences of refusing the specified treatment. The aforementioned two witnesses would also need to satisfy certain conditions, including not being estate beneficiaries of the maker to the best of his/her knowledge. In addition, since the Bill would allow presentation of the original copy as well as certified true copies of an AMD as proof of validity, it was suggested that they should be separately kept by the maker and his/her family members. It was hoped that disputes could be minimised via thorough communication and understanding between the maker and his/her family members on the wish as expressed in the AMD;
- (b) the Bill aimed to respect patients' wishes; AMDs made in compliance with prescribed conditions were legally effective and could not be altered by family members;

- (c) patients were required to devise an advance care planning (ACP) before making an AMD, and the healthcare personnel would promote life-and-death education during their discussion with patients on ACP in tandem. The HA had already commenced working with RCHs in which geriatric healthcare personnel were deployed to explain ACP to the elderly residing at RCHs, and provided training to RCH staff so as to assist residents in devising an ACP and making an AMD. With gradual acceptance of ACP, the Health Bureau would consider progressively extending its coverage to discharged patients and elderly centres. In parallel, public education on life-and-death issues would also be promoted;
- (d) the Government would amend provisions of Cap. 504 to stipulate that if a resident of a specified RCH passed away in the care home, and he/she had been diagnosed with terminal illness and had been attended to by an RMP within 14 days prior to death, the death was not a reportable death provided that an attending RMP was able to make a final diagnosis to confirm that the deceased resident had died from a natural cause. Upon legislative amendments to Cap. 504, the SWD would follow up on the corresponding reporting requirements for RCHs; and
- (e) all SWD's contract homes had been required to provide rooms for dying residents to spend their final days since 2017. The first batch of contract homes with such supporting facilities would come into operation in 2025-26. The SWD would also step up efforts in providing relevant training for RCH staff.

8. The <u>Chairman</u> said that the Commission supported the Bill and the related legislative amendments to implement the recommendations on AMDs and patients dying in place. The <u>Chairman</u> opined that the Commission could revisit the issues on promoting advance planning and life-and-death education among the public in the future.

Agenda item 4: Training and review of manpower for health and rehabilitation services in residential care homes

9. With the aid of a PowerPoint presentation, <u>Ms KWAN Shuk-yee</u>, <u>Nancy</u>, Assistant Director (Licensing and Regulation) of the SWD, briefed Members on the training and review of manpower for health and rehabilitation services in RCHs.

10. After the briefing, the <u>Chairman</u> and Members expressed views and raised questions as follows:

- (a) it was agreed that the manpower for health and rehabilitation services in RCHs should be reviewed. Regarding the skill, qualification, training and statutory registration requirements of RCH staff, which was one of the areas to be reviewed, consideration could be given to introducing an assessment and registration system for ensuring the staff quality and enhancing recognition. Also, the Qualifications Framework level of the proposed rank of Senior Health Worker (SHW) should be the same as that of Enrolled Nurse;
- (b) given the existing difficulties encountered by RCHs in recruiting nurses, consideration could be given for the proposed SHWs to take up part of the nurses' work so as to reduce the demand for nursing manpower;
- (c) it was important to provide career progression paths for RCH staff, thereby attracting more young people to join the RCH service industry; and
- (d) apart from reviewing the manpower for rehabilitation and nursing services, the manpower for taking care of the physical and mental health of the elderly and their social activities should also be reviewed.

11. In response to Members' views and questions, <u>Ms LAU Yim, Alice</u>, Permanent Secretary for Labour and Welfare and <u>Ms KWAN Shuk Yee</u>, <u>Nancy</u> gave consolidated replies as follows:

- (a) other than examining the qualification requirements, professional standards and regulatory framework of RCH staff, the consultant was required to conduct on-site inspection of the operation of RCHEs and RCHDs as well in order to put forward a practicable recommendation to the Government;
- (b) on the shortage of care manpower of RCHs, the Labour and Welfare Bureau (LWB) had introduced to Members the Special Scheme to Import Care Workers at previous meetings of the Commission. To establish career progression paths for RCH staff such that frontline healthcare staff could gain promotion by consolidating their experience, qualification and training, a holistic review of the manpower arrangements for both health and rehabilitation services in RCHs was needed. The current review would begin with the fundamentals, so as to identify the types of skills required for the provision of quality health and rehabilitation services to RCH residents, examine the

training needs of RCH staff and subsequently project the baseline for manpower requirements. Meanwhile, the consultant had to explore an appropriate staff mix, such as whether the proposed SHWs could take up some of the nurses' duties in the future. It was hoped that the recommendations put forward in the review could help provide promotion opportunities for frontline health and rehabilitation services staff and attract more people to join the RCH service industry in the long run, thereby improving the manpower shortage situation;

- (c) the LWB was deeply concerned about the physical and mental health of elderly residents at RCHs and their overall life quality. In respect of the physical, mental and social well-being of the elderly, professional outreaching teams were being deployed to organise on-site social activities for RCH residents; and
- (d) Members were encouraged to actively participate and give their views to the concerned consultant for enriching the content of the review.

12. The <u>Chairman</u> said that Members supported the review of the manpower for health and rehabilitation services in RCHs, and would actively share their views with the consultant.

Agenda item 5: Progress reports by Working Groups and Committee

Working Group on Elderly Services Programme Plan and Working Group on Ageing in Place

13. <u>Ms CHAN Ah-wing, Ivy</u>, Secretary to the Commission, reported that the second joint meeting of the Working Group on Elderly Services Programme Plan (WGESPP) and the Working Group on Ageing in Place (WGAIP) was held on 19 May 2023, during which Members were briefed by the SWD on the Home Care and Support Services for Elderly Persons with Mild Impairment and the Scheme on Community Care Service Voucher for the Elderly.

Committee on Elder Academy Development Foundation

14. <u>Ms CHAN Ah-wing, Ivy</u>, said that the first round of funding applications to the Committee on Elder Academy Development Foundation (EADF) in 2023-24 was closed on 31 May this year. The Vetting Sub-committee would meet around August/September this year to assess the applications.

15. As the financial situation of the EADF was relatively stringent, it was reported at the last

meeting that the Secretariat would solicit external donations in addition to seeking resources from the Government. In this connection, the Secretariat had sent out invitations to various enterprises, family charitable foundations, major clansman associations and chambers of commerce to solicit donations. So far, several organisations had pledged to donate to the EADF. The Secretariat was also discussing cooperation with several enterprises about making use of their donation and expertise to enrich programme offerings and activities of the elder academies.

Agenda item 6: Any other business

16. The <u>Chairman</u> said that the following four Members would retire from the Commission upon expiry of their terms of membership in late July this year:

- (a) Ms CHAN Mei-kit, Maggie, MH
- (b) Ms CHAN Yee-ching, Tammy
- (c) Mr CHUA Hoi-wai, JP
- (d) Ms LI Fai, Grace, MH

On behalf of the Commission, the <u>Chairman</u> extended heartfelt gratitude to the four Members for their contribution during the tenure. The four Members had participated in the work of both the WGESPP and the WGAIP as well as the Committee on EADF, their advice was highly conducive to promoting the Commission's work on various fronts. The <u>Chairman</u> looked forward to their continuous communication with the Commission as well as concern and support for the development of elderly services in Hong Kong after their retirement from the Commission.

17. Speaking for the Government and the LWB, <u>Ms LAU Yim, Alice</u>, expressed sincere thanks to the four Members for their unfailing support for the elderly services and SWD's work over the past six years, and looked forward to their continuous advice to the Government through various channels. <u>Ms LAU</u> said that the Secretary for Labour and Welfare (SLW) would host a luncheon for all incumbent and new Members in August this year and invited Members to attend amid their busy schedules.

[Post-meeting note: The SLW's luncheon with Commission Members was held on 3 August this year.]

Time of adjournment

18. The meeting was adjourned at 12:05 p.m.

Date of next meeting

19. The next meeting was tentatively scheduled for 20 September 2023. The Secretariat would advise Members of the meeting details in due course.

August 2023