

政府總部  
民政事務局

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**GOVERNMENT SECRETARIAT  
HOME AFFAIRS BUREAU**

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130 HENNESSY ROAD,  
WAN CHAI,  
HONG KONG.

11 July 2017

Legislative Council Secretariat  
(Attn: Mr Keith WONG)  
Legislative Council Complex  
1 Legislative Council Road  
Central, Hong Kong

Dear Mr WONG,

**Supernumerary Administrative Officer Staff Grade C Post  
for the Community Care Fund**

We refer to Hon Eddie Chu's letter dated 14 June 2017 addressed to the Chairman of the Legislative Council Establishment Subcommittee and the Secretary for Home Affairs on the captioned subject. Our responses to the issues raised in the letter are set out below.

**(A) Attendance Records**

Please refer to Annex 1 for the attendance records.

**(B) Donation Ratio**

The Community Care Fund (CCF) is not a matching fund. The CCF has a current balance of about \$19.7 billion which should provide adequate funds for the launch of new assistance programmes to assist people with financial difficulties. Nevertheless, we will invite the CCF Task Force to review the arrangements on donation.

**(C) Evaluation of Programmes**

- (1) Among the assistance programmes being implemented by the CCF, 7 programmes have been operated for over three years. List of the relevant programmes, implementation period and reasons for not being incorporated into the Government's regular assistance programmes are set out at Annex 2.
  
- (2) The CCF launched the Elderly dental assistance programme (the Programme) in September 2012 to provide free removable dentures and related dental services for low-income elders who are users of the home care service or home help service. The implementing agent of the Programme (i.e. the Hong Kong Dental Association) evaluated the overall situation of the initial stage of the Programme in July 2013, with a view to exploring the arrangements to expand the target beneficiaries of the Programme to cover other elderly groups.

Thereafter, the Programme expanded in phases in September 2015 to cover elders who are Old Age Living Allowance (OALA) recipients, starting with those aged 80 or above in the first phase. In October 2016, the target beneficiaries of the Programme were expanded to cover OALA recipients aged 75 or above. On 3 July 2017, the age requirement of beneficiaries of the Programme was further lowered to those aged 70 or above. The implementing agent of the Programme updates the CCF Task Force under the Commission of Poverty on the implementation of the Programme from time to time and will conduct reviews in due course.

Since the launch of the Programme in September 2012 and up to May 2017, around 23 800 eligible elders' applications were processed, out of which around 16 800 elders completed the necessary dental services and the remaining some 7 000 elders are receiving dental services at different stages. Besides, 10 elders were not able to participate in the Programme as they did not meet the eligibility criteria.

- (3) The implementation of the Elderly dental assistance programme (the Programme) has been elaborated in paragraph (C)(2) above. Having regard to the progress of implementation and the overall manpower situation in the dental profession, the implementing agent of the Programme and the Food and Health Bureau will further lower the age requirement of the beneficiaries to cover OALA recipients aged 65 or above. Upon extension of the coverage of the Programme to cover all OALA recipients, considerations will be given to whether to expand the service targets further.

The main objective of setting up the CCF is to provide assistance to people with financial difficulties, in particular those falling outside the social safety net or those within the safety net but with special circumstances not being covered. In view of the objective of setting up the CCF, there is no plan to expand the target beneficiaries to cover all elders aged above 60 or 65.

- (4) The number of ineligible cases and its ratio to the total number of applications under the Special care subsidy for the severely disabled programme of the CCF for the past four years are listed as follows:

Programme implementation year	No. of applications	No. of ineligible cases	Ratio of ineligible cases to the total number of applications
2013	1 855	8	0.43%
2014	2 030	13	0.64%
2015	2 317	34	1.47%
Extended programme in 2016	2 437	24	0.98%

The ratio of ineligible cases to the total number of applications for the programme has sharply decreased when compared with the data contained in the evaluation report in February 2013.

- (5) When the Special care subsidy for the severely disabled programme of the CCF was extended in 2012, the income limit was relaxed to 100% of the Median Monthly Domestic Household Income (MMDHI) applicable to the corresponding household size, compared with the original 75% of MMDHI adopted in the first launched in 2011. The definition of “family members living under the same premises” has also been extended from the beneficiary and the beneficiary’s father, mother, son, daughter, husband or wife living under the same premises with the beneficiary in Hong Kong to include the beneficiary’s siblings living under the same premises with the beneficiary and aged below 18 or aged 18-25 receiving full-time education or adult siblings who are disabled. The extension of the programme in 2013 further relaxed the income limit to 150% of the MMDHI applicable to the corresponding household size.

With the relaxed income limit and the extended definition of “family members living under the same premises”, the number of ineligible cases has sharply decreased when compared with the data in the evaluation report in February 2013. The number of beneficiaries has also sharply increased.

#### **(D) Overall Directions**

- (1) The CCF is an integral part of the Government’s poverty alleviation blueprint, serving the functions of plugging gaps in the existing system and implementing pilot schemes. The Hong Kong Poverty Situation Report 2015 published by the Commission on Poverty has formulated the Government's directions and strategies for poverty alleviation, including that the CCF will continue to roll out more assistance programmes and expand or enhance some existing programmes to meet the needs of different groups, in order to strengthen the support for grassroots families. Subject to resource availability, programmes proved to be effective will be incorporated into the Government’s regular assistance programmes.

- (2) The CCF will continue to collect views of the public and stakeholders in considering the launch of new programmes to assist the underprivileged and grassroots families. At present, 18 assistance programmes are being implemented and eight new assistance programmes will soon be implemented by the CCF for various low-income beneficiary groups. Please refer to the Annex to Legislative Council (LegCo) Paper No. CB(2)1680/16-17(01) (<http://www.legco.gov.hk/yr16-17/english/panels/ha/papers/ha20170626cb2-1680-1-e.pdf>) for the latest progress of the CCF programmes.

Meanwhile, please also refer to LegCo Paper No. CB(2)543/16-17(07) (<http://www.legco.gov.hk/yr16-17/english/panels/ws/papers/ws20170109cb2-543-7-e.pdf>) for details on the support measures currently provided by the Government to low-income households not receiving Comprehensive Social Security Assistance.

**(E) Future Work Plan**

- (1) For details of the eight new assistance programmes to be implemented by the CCF, please refer to paragraph 6 of LegCo Paper No. CB(2)1680/16-17(01) (<http://www.legco.gov.hk/yr16-17/english/panels/ha/papers/ha20170626cb2-1680-1-e.pdf>).

Yours sincerely,



(Ms Rebecca WAN)  
for Secretary for Home Affairs

Encl.

cc

Secretary for Financial Services and the Treasury

(Attn: Deputy Secretary (Financial Services)1)

Secretary for the Civil Service

(Attn: Senior Executive Officer (Manpower)1)

Attendance Rate of the Members of the Commission on Poverty

(from December 2012 to June 2017)

<b>Member</b>	<b>Attendance Rate</b>
Ms Amy Chan Lim-chee	85%
Ms Sylvia Chan May-kuen	93%
Ms May Chan Suk-mei	85%
Mr Clement Chen Cheng-jen	85%
Dr Henry Cheng Kar-shun	33%
Mr Cheung Kwok-che	88%
Professor Stephen Cheung Yan-leung	80%
Mr Chua Hoi-wai	98%
Dr Stephen Frederick Fisher	88%
Mr Frederick Fung Kin-kee	85%
Mr Ho Hei-wah	73%
Ms Lam Shuk-yee	85%
Mr Lau Ming-wai	48%
Dr Law Chi-kwong	100%
Hon Leung Che-cheung	65%
Mr Clarence Leung Wang-ching	84%
Ms Li Fung-ying	80%
Professor Francis Lui Ting-ming	72%
Ms Yvonne Sin	60%
Hon Michael Tien Puk-sun	73%

Attendance Rate of the  
Members of the Community Care Fund Task Force  
 (from January 2013 to June 2017)

<b>Member</b>	<b>Attendance Rate</b>
Dr Law Chi-kwong	100%
Dr Bunny Chan Chung-bun	62%
Mr Cheung Kwok-che	86%
Mr Chua Hoi-wai	86%
Mr Ho Hei-wah	67%
Mr Lau Ming-wai	38%
Mr Clarence Leung Wang-ching	58%
Hon Michael Tien Puk-sun	33%
Miss Ophelia Chan Chiu-ling	90%
Ms Chang Siu-wah	100%
Mr Cheung Leong	50%
Dr Cheung Wai-lun	52%
Mr Langton Cheung Yung-pong	67%
Mr Stanton Chu Wai-ki	83%
Dr Saimond Ip	86%
Mr Frederick Lai Wing-hoi	76%
Dr Sigmund Leung Sai-man	95%
Dr Donald Li Kwok-tung	43%
Mr Daryl Ng Win-kong	33%
Ms Nancy Tsang Lan-see	90%
Ms Grace Yu Ho-wun	42%
Dr Yuen Pong-yiu	81%

Community Care Fund Assistance Programmes Operated for Over 3 Years and  
Not Yet Incorporated into the Government's Regular Assistance Programmes

Programme	Implementation period	Reasons for not being incorporated into the Government's regular assistance programmes
<p>(1) Subsidy for patients of Hospital Authority for specified self-financed cancer drugs which have not yet been brought into the Samaritan Fund safety net but have been rapidly accumulating medical scientific evidence and with relatively higher efficacy (Medical Assistance Programmes – First Phase Programme)</p>	<p>5 years and 10 months</p>	<p>Drugs covered by the Medical Assistance Programmes – First Phase Programme (the Programme) are those specified self-financed cancer drugs which have not yet been brought into the Samaritan Fund (SF) safety net but have been rapidly accumulating medical evidence and with relatively higher efficacy. The SF covers drugs with sufficient medical evidence and proven clinical efficacy. This notwithstanding, with the lapse of time, drugs covered by the Programme with sufficient medical evidence may be re-categorised and included under SF in future. On the other hand, suitable self-financed cancer drugs will be identified for inclusion into the Programme based on their accumulated medical evidence and development on clinical efficacy. The number of drugs covered by the Programme has been expanded from six since implementation (i.e. August 2011) to 13 at present (i.e. June 2017). In addition, three specified self-financed drugs / indications previously covered by the Programme were re-categorised into SF safety net. As a result, it is considered necessary to retain the Programme at this stage.</p>
<p>(2) Special care subsidy for the severely disabled</p>	<p>5 years and 9 months</p>	<p>To further support persons with disabilities in addition to their families and carers, the Community Care Fund (CCF) launched the Pilot scheme on living allowance for low-income carers of persons with disabilities and the Pilot scheme on providing subsidy for Higher Disability Allowance recipients in paid employment to hire carers in October 2016. The Social Welfare Department (SWD) will continue</p>



Programme	Implementation period	Reasons for not being incorporated into the Government's regular assistance programmes
		to evaluate the effectiveness and number of beneficiaries of the two above-mentioned pilot schemes and the Special care subsidy for the severely disabled programme (the Programme), as well as the development of various community support measures for persons with disabilities, so as to consider if the Programme would be incorporated into the Government's regular assistance programmes.
(3) Subsidy for Comprehensive Social Security Assistance recipients living in rented private housing	5 years and 8 months	<p>The maximum rent allowance (MRA) under the Comprehensive Social Security Assistance (CSSA) Scheme is adjusted annually in accordance with the established mechanism having regard to the movement of rent index for private housing under the Consumer Price Index (A) for CSSA households to meet the necessary rental expenses. The index, compiled by the Census and Statistics Department on a monthly basis, measures the rental movements of private housing among non-CSSA households with relatively low expenditure and serves as the basis for adjusting the MRA. The cumulative increase on MRA by SWD from 2013 to 2017 has amounted to 35% so as to further relieve the financial burden on rent for CSSA households living in rented private housing.</p> <p>Multiple factors have to be taken into account when considering whether or not to incorporate the programme into the Government's regular assistance programmes, including the possibility of triggering the increase of rent for private housing (including accommodation for non-CSSA tenants). Therefore, the Government should exercise prudence in rendering assistance to the needy persons in order to safeguard public money.</p> <p>SWD will continue to adjust the MRA in</p>

Programme	Implementation period	Reasons for not being incorporated into the Government's regular assistance programmes
		due course according to the established mechanism having regard to the movement of rent index for private housing. This programme relieves the financial burden of CSSA households living in rented private housing at a time when there is a periodic increase of rent without triggering the increase of rent for private housing at the same time.
(4) Relocation allowance for eligible residents of sub-divided units in industrial buildings who have to move out as a result of the Buildings Department's enforcement action	5 years and 5 months	The Government is conducting an interim evaluation on the programme, including the current level of allowance and the eligibility criteria etc., opportunity will also be taken to evaluate whether the programme should be incorporated into the Government's regular assistance programmes.
(5) Elderly dental assistance programme	4 years and 9 months	The CCF launched the Elderly dental assistance programme (the Programme) in September 2012 to provide free removable dentures and related dental services for low income elders who are users of the home care service or home help service. As the Programme is in the course of expanding its scope to cover different age groups of the Old Age Living Allowance recipients in phases, currently, there is no plan to incorporate the Programme into the Government's regular assistance programmes.
(6) Subsidy for owners' corporations of old buildings	4 years and 8 months	To strengthen the support for owners' corporations (OCs) of old buildings with low rateable values and to enhance building management, the CCF carried out the Subsidy for Owners' Corporations of old buildings (the Programme) in October 2012. The Home Affairs Department (HAD), responsible for implementing the Programme, evaluated the effectiveness of the Programme in August 2015. The results showed that the Programme was effective in relieving the burden relating to

Programme	Implementation period	Reasons for not being incorporated into the Government's regular assistance programmes
		<p>the daily operating expenses on OCs of old buildings. The CCF continued the implementation of the Programme with enhancements (the Enhanced Programme) for 3 years in October 2015 so as to benefit more OCs of old buildings and owners from the grassroots. Eligible OCs may apply for subsidy on an accountable basis in respect of the specified items at most five times. Up to 50% of the actual expenses may be claimed for each item at a maximum total amount of \$20,000 for each OC.</p> <p>Management of private buildings is the responsibilities of the owners. Therefore, the Government should be cautious in assisting OCs of old buildings to ensure that public funds are used properly. HAD will conduct an evaluation on the effectiveness of the Enhanced Programme, and report the results to the CCF Task Force with proposals on the way forward in the context of the effective use of public resources.</p>
(7) Incentive scheme to further encourage CSSA recipients of the Integrated Employment Assistance Programme for Self-reliance to secure employment	3 years and 2 months	<p>Generally speaking, the three-year Incentive scheme to further encourage CSSA recipients of the Integrated Employment Assistance Programme for Self-reliance to secure employment (the Incentive Scheme) was completed on 31 March 2017. However, participants who enrolled for the Incentive Scheme after 1 April 2014 are also provided with 3 years for accumulating the incentive payment and thus their time for accumulating the incentive payment under the Incentive Scheme will be deferred. The last batch of participants enrolling for the Incentive Scheme may accumulate the incentive payment until early July 2017.</p> <p>SWD has commissioned The Chinese University of Hong Kong to conduct an</p>

Programme	Implementation period	Reasons for not being incorporated into the Government's regular assistance programmes
		evaluation study on the effectiveness of the Incentive Scheme. The evaluation study is still in progress and the way forward of the Incentive Scheme will be set out after the completion of evaluation.