

# The Chinese University of Hong Kong The Nethersole School of Nursing

## Cadenza Training Programme

CTP005: Community and Residential Care for Older People

### Chapter 4:

Re- examining community services and resources  
for older people in Hong Kong: paving the way for  
an elder-friendly community

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# Chapter Outline

- Re-examining the major community service needs and resources for older people in Hong Kong
- Importance of Community Elderly Services in Hong Kong
- Challenges of Community Elderly Services for older people
- Advocacy of 'ageing in place'
- Developing an elder-friendly community



*The Major  
Community  
Service Needs  
of the Aged*

# The major community service needs of the aged

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graph TD; A[Three Major Community Service Needs of the Aged] --- B[Housing Services]; A --- C[Health Services]; A --- D[Social Services]
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## Three Major Community Service Needs of the Aged

Housing  
Services

Health  
Services

Social  
Services



# Housing Services

The strong demand for public housing

In 2004,

- 985,700 people were aged 60 or above
- 39.8% of older people were living in public housing estates
- 46.4% of them resided in private housing

# Housing Services

The household composition of older persons:

Household Composition	No. of persons ('000)	Percentage(%)
Living alone	105.4	10.7
Living with spouse	223.5	22.7
Living with children	219.3	22.2
Living with spouse and children	403.5	40.9
Living with persons other than spouse and children	33.9	3.4
<b>Total</b>	<b>985.7</b>	<b>100.0</b>

# Housing Services

## Older persons by type of housing:

Type of housing	No. of persons ('000)	Percentage (%)
Public rental housing	392.4	39.8
Subsidised sale flats #	133.3	13.5
Private permanent housing @	457.0	46.4
Private temporary housing	2.9	0.3
<b>Total</b>	<b>985.7</b>	<b>100.0</b>

Notes: # Includes flats built under the Home Ownership Scheme, Middle Income Housing Scheme, Private Sector Participation Scheme, Buy or Rent Option Scheme and Mortgage Subsidy Scheme, and flats sold under the Tenants Purchase Scheme of the Hong Kong Housing Authority. Also includes flats built under the Flat for Sale Scheme and Sandwich Class Housing Scheme of the Hong Kong Housing Society. Flats that can be traded in the open market are excluded.

Notes: @ Includes private housing blocks, flats built under the Urban Improvement Scheme of the Hong Kong Housing Society, villas/ bungalows/ modern village houses, simple stone structures and other permanent housing. Subsidised sale flats that can be traded in the open market are also included.

Census and Statistics Department (2005).



# Housing Services

The housing needs of older people in HK:

- growing demand for separate housing
- increasing desire for privacy
- disinclination to share multi-generational accommodation

(Chan & Phillips,2002)



# Housing Services

The following housing schemes have been established to encourage older persons to live with their families:

- Single Elderly Persons Priority Scheme
- Elderly Persons Priority Scheme
- Harmonious Families Priority Scheme
- For more details, please visit this link.

<http://www.housingauthority.gov.hk/en/public-housing/meeting-special-needs/senior-citizens/index.html>

Hong Kong Housing Society, 2012

# Housing Services

- Senior Citizen Residences (SEN) Scheme:

The Hong Kong Housing Society Senior Citizen Residences Scheme are the first purpose-built, lease-for-life housing estates for the elderly in Hong Kong. The Senior Citizen Residences aim at providing a residential community environment which is **comfortable** and **which enhances the quality of life for residents**. Breaking new ground, each unit in the Senior Citizen Residences is self-contained with special facilities which meet the changing recreational, social and health care needs of the elderly as they 'age in place'.

Hong Kong Housing Society, 2012



# Health Services

- Primary health care
- Elderly Health Centres
- Curative and rehabilitative services
- Health Care Voucher Scheme

(Chan & Phillips,2002)



# Primary Health Care

- Provides accessible care to maintain health and reduce morbidity.
- Encompasses environmental hygiene, health promotion, disease prevention and general out-patient clinics.



# Elderly Health Centres

- Health education
- Preventive programmes
- For more details, please visit this link:  
<http://www.info.gov.hk/elderly/english/mainservice.htm>

Department of Health (2012a).



# Curative and Rehabilitative Services

- Curative and rehabilitative services:
  - public clinics and hospitals
  - community health services: to maintain older persons at home in line with the concept of 'care in the community' and 'ageing in place'.

Service providers:

Community Geriatric Assessment Teams (CGATs),  
Psycho-geriatric Assessment Teams (PGTs),  
Community Nursing Services (CNS) and day  
hospitals.

(Chan & Phillips,2002)



# Health Care Voucher Scheme

- Provides additional choices for elders on top of the existing public private primary health care (PHC) services.
- Implements the "money follows patient" concept on a trial basis, enabling elders to choose their own private PHC.
- For more details, please visit the following link:  
[http://www.hcv.gov.hk/eng/pub\\_background.htm](http://www.hcv.gov.hk/eng/pub_background.htm)

Department of Health (2012b).



# Social Services

Two main components of social services:

1. The administration and delivery of social security payments.
2. Intervention in personal and social problems.

(Chan & Phillips,2002)





# Social Services

## 1. Social security

- Old age allowance
- Comprehensive social security allowance
- Disability allowance



# Social Services

## 2. Personal social services

- Community support services:  
social and recreational activities, care support programmes, home care services, day care services, counselling.
- Residential care services:  
focus on the very frail people in residential care and to encourage the more able-bodied to live in their own homes.



# *The Importance of Community Elderly Services in Hong Kong*



# Importance of elderly community care services

- Elderly community care services are becoming more important as the demand for long-term care (LTC) in Hong Kong increases.

## Increased demand results in:

- care services currently unable to meet the demand for LTC
- service needs to expand to deliver to older people in the community
- faster pace of expansion needed to meet the enhanced community elderly care service needs



# Definition of LTC

"The full range of health, personal health care and social services provided at home and in the community for a continuing period to adults who lack or have lost the capacity to care fully for themselves and remain independent".

(Phillips 2000a, p. 1652)



# Services dedicated to LTC

## Community Care Services (CCS)

1. Integrated Home Care Services (IHCS) in respect of frail cases with moderate or severe levels of impairment
2. Enhanced Home and Community Care Services (EHCCS)
3. Day Care Centre for the Elderly / Day Care Unit for the Elderly (D/E/DCU)

In terms of service type, IHCS and EHCCS are home-based services whereas D/E / DCU are centre-based services.

Social Welfare Department (2012).

# Services dedicated to LTC

## Residential Care Services (RCS)

1. Home for the Aged (in respect of applicants prior to 1 January 2003)
2. Care-and-attention (C&A) Home
3. Nursing Home (NH)

Older people are the main users of LTC services.

Social Welfare Department (2012).



# Reasons for increased LTC demand in HK

## 1. Ageing population

- An ageing population triggers the issue of sustainability of long-term care services for the elderly.
- The number and proportion of very old persons requiring long-term care will grow rapidly in the coming decades.
- Increase from 71,000 (1% of total population) in 2003 to 240,900 (2.9% of total population) in 2033 for those aged 85 years and above.

(Census and Statistics Department, 2004)





# Reasons for increased LTC demand in HK

## 2. Increased Life Expectancy

From 1971 to 2005, life expectancy has increased for both sexes

- Men: from 67.8 to 78.8 years
- Women: from 75.3 to 84.5 years

The increase is a result of:

- enhanced medical technology
- advances in lifestyles and public health environment

(Census and Statistics Department, 2006)



# Reasons for increased LTC demand in HK

## 3. Social Change

- Less emphasis on the philosophical belief of filial piety.
- Trend towards nuclear family weakens networking and support from family members.
- More women are entering the workforce.



# Countering the exaggerated demand for LTC

- Decrease residential care options
- Advocate the need to promote ageing in place



# Excessive demand in LTC

Change of eligibility criteria for using residential care service:

- gradually phase out the provision of hostels and homes for the aged
- encourage the more able to live in their own homes
- focus on very frail people entitled to residential care
- emphasis on care and attention (C&A) homes and nursing homes (NH) for frail persons
- huge demand for C&A and NH, thus creating a long waiting list



# Impacts on community care elderly services

- More older people with compromised functional status remain in the community.
- Increased burden on community elderly services to take care of this expanding group of older people.



# Types of Community Care Elderly Services in HK

- Variety of community care services for the aged provided by NGOs, Hospital Authority and Department of Health.
  - Respite services
  - Day care centres
  - Home care
  - Carer support services (loaned equipment, mutual support groups)
  - Community Geriatric Assessment Teams
  - Community Nursing Services
  - Home-based rehabilitation
  - Elderly health outreach teams



# Problems of policy in service delivery

- service gap on defining old age
- lack of vision of the role of the elderly and limitations in definition of service targets
- lack of comprehensive and operational plans
- lack of integration and coordination
- lack of comprehensive data for policy-making



# Service gap on defining old age

## Service gap on defining old age

- Local tradition and government regard 60 as retirement age.
- Some public organisations make 65 the qualifying age for free or subsidised services such as social security payments, medical and health services.
- There is a gap of five years between what different agencies consider to be old age.

(Chan & Phillips,2002)





## Lack of vision of the role of older persons in society and limitations in definition of service targets

- Misconception of older people as a burden to society
- The elderly service 'care in the community' targets single and/or deprived older people.

(Chan & Phillips,2002)



## Lack of comprehensive and operational plans

- Lack of clear a policy statement and resource commitments to actualise community care and improve service provision to enable older people to continue living in their own communities.
- Lack of concrete services to support informal/family caregivers in caring for the elderly in the community, e.g., direct cash subsidies.

(Chan & Phillips,2002)



# Lack of integration and coordination

- Unable to meet public demand for acute-care hospital beds for elderly patients.
- Bureaucratic systems within hospitals present challenges, e.g., referrals between different services, the transfer of a client's information or history.
- Lack of proper planning in the admission and discharge of patients; hospital re-admissions are high.
- Poor communication between the stakeholders in aged care.



## Lack of comprehensive data for policy-making

- The severe lack of the following data hinders the development of informed policy:
  - information on health and social services usage and outcomes
  - more refined socio-economic and health status characteristics of adult cohorts
  - longitudinal studies to track selected patient/ service groups
  - data on networks and levels of support
  - risk indicators and registration

(Chan & Phillips,2002)



# *Advocacy of "ageing in place"*



# What is 'ageing in place'?

- Allows elders to stay in their own homes
- Communities supply elders with appropriate services including:
  1. affordable housing
  2. easily accessible and user-friendly transportation
  3. social services to allow them to function independently
  4. social opportunities to enhance their continual participation
  5. any form of assistance to encourage their continual living in the community

National Association of Area Agencies on Aging (2008).



# New direction of elderly housing in HK

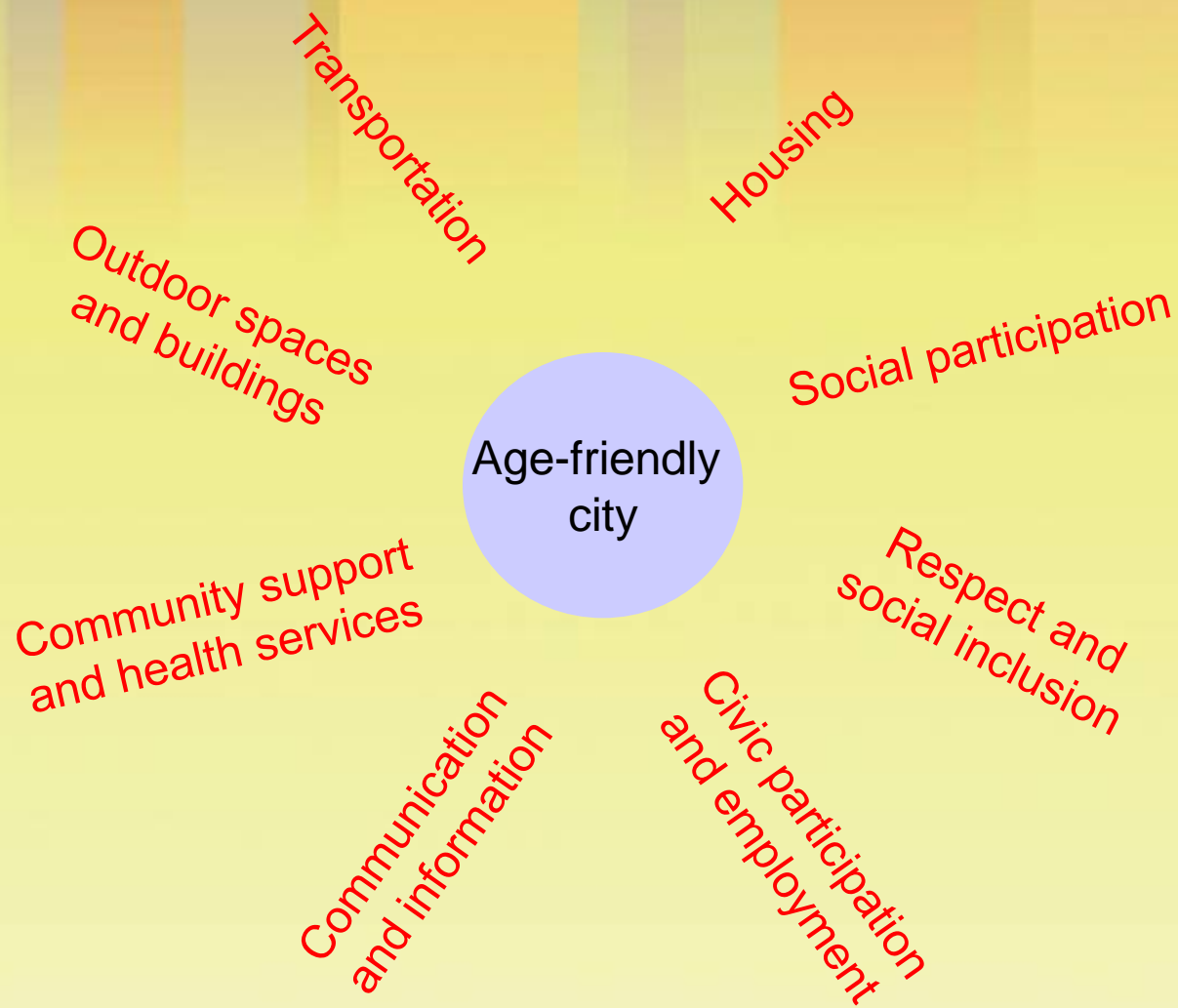
- The Senior Citizen Residences (SEN) Scheme developed by the Housing Society introduces the concepts of 'housing with care' and 'ageing in place' in Hong Kong.
- SEN can meet the long-term housing needs of the elderly.

Hong Kong Housing Society (2012).



# Eight Topics of an Age-friendly city







# Outdoor spaces and buildings

The outside environment and public buildings have a major impact on the mobility, independence and quality of life of older people and affect their ability to 'age in place'.



# Outdoor spaces and buildings

## The characteristics:

1. pleasant and clean environment
2. importance of green spaces
3. somewhere to rest
4. age-friendly pavements
5. safe pedestrian crossings
6. accessibility
7. a secure environment
8. walkways and cycle paths
9. age-friendly buildings
10. adequate public toilets
11. older customers services



# Transportation

## The characteristics:

1. availability
2. affordability
3. reliability and frequency
4. travel destinations
5. age-friendly vehicles
6. specialised services for older people
7. priority seating and passenger courtesy
8. courteous transport drivers
9. safety and comfort



# Transportation

10. Transport stops and stations (with shelters, lighting, benches and easy access)
11. Taxis (affordable, provision of subsidy scheme, disability access)
12. Community transport (e.g., community volunteer drivers, free shuttle services)
13. Information on transport options, on how to use public transport and on timetables
14. Driving conditions
15. Courtesy towards older drivers
16. Parking (priority parking for older and disabled people in close proximity to buildings, drop-off and pick-up areas)



# Housing

## The characteristics:

- 1.affordability
- 2.essential services (provision of public utility services)
3. design (appropriate to the needs of older people)
4. modifications (to ensure older people continue to live comfortably at home)
5. maintenance
- 6.access to services (e.g., access to services and facilities, provision of home care services)
7. community and family connections (e.g., familiar surroundings)
8. housing options
9. living environment (sufficient space, safety, privacy at home)



# Social Participation

## The characteristics:

- Accessible opportunities (provision of transport)
- Affordable activities
- Range of opportunities (e.g., cultural, educational, social and traditional activities)
- Awareness of activities and events
- Encouraging participation and addressing isolation
- Integrating generations, cultures and communities



# Respect and social inclusion

## The characteristics:

- Respectful and disrespectful behaviour
- Ageism and ignorance
- Intergenerational interactions and public education
- Place within the community
- Helpfulness of the community (providing help to older people)
- Place in the family (being cared for, having affection and supported by families)
- Economic exclusion (provision of financial aid from the government)





# Civic participation and employment

## The characteristics:

1. Volunteering choices for older people
2. Better employment options and more opportunities, such as incentives to employers to hire older people
3. Flexibility to accommodate older workers and volunteers: e.g., flexible working, lighter workloads, more sick leave



# Civic participation and employment

4. Encouraging civic participation
5. Training
6. Creating entrepreneurial opportunities for older people to earn money and participate in the workforce.
7. Valuing older peoples' contributions



# Communication and Information

## Characteristics

1. Widespread distribution
2. The right information at the right time
3. Use of different ways to reach various types of older people
4. Write in simple, short sentences with big letters
5. Use of computers and the internet brings about advantages and disadvantages
6. Responsibility to keep abreast of new information



# Community support and health

## The characteristics:

- Accessible care: well-located, easily accessible
- A wider range of health services
- Ageing well services: prevention and health promotion programmes



# Community support and health

- A wide range of home support and care services
- Residential care facilities for people unable to live at home
- A network of community services
- Volunteers needed to assist older people in clinics and hospitals, as well as to deliver social services and home care and provide transportation for shopping and appointments.
- Other issues (e.g., in case of emergency situations; lack of cemetery space)



# Preparing for an Elder-Friendly Community

To prepare for and elder-friendly community, we must first prepare

- our hearts
- our minds



# Preparing for an Elder Friendly Community

- From the heart:
  - Put your heart into the work
  - Does the community recognise the value of seniors and treat them respectfully and appreciatively?
- In the mind:
  - Be fair-minded and think positively to do the work
  - Knowledge is power
  - Ageing is not a problem but AGEISM is

Cadenza (2008).



# Conclusion

- A balance should be found between the demands of the community and the supply of residential care services.
- ‘Ageing in place’ will become a global trend in the future.
- We need to consider many essential elements as we prepare to build an age-friendly community.



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