

**Community Care Fund  
Pilot Scheme on Providing Special Subsidy for  
Persons with Permanent Stoma from  
Low-income Families for Purchasing Medical Consumables  
Evaluation Report**

**Background**

The Community Care Fund (CCF) launched the “Pilot Scheme on Providing Special Subsidy for Persons with Permanent Stoma from Low-income Families for Purchasing Medical Consumables” (the Pilot Scheme) in 2017, which aims at providing persons with permanent stoma<sup>1</sup> from low-income families with a special subsidy to relieve their financial burdens in purchasing medical consumables and improve their quality of life.

**Implementation of the Pilot Scheme**

2. The three-year Pilot Scheme was launched in September 2017. With a total funding of \$50.64 million, the Pilot Scheme, administered by the Social Welfare Department (SWD), is expected to benefit about 1 500 persons. SWD issued letters in phases to invite applications from those who may fulfil the eligibility criteria. Eligible persons may also apply direct to SWD.

3. The upper limit of the monthly subsidy for the Pilot Scheme is set at \$1,000 by SWD, with reference to the monthly consumption of medical consumables by persons with permanent stoma estimated by a Medical Officer of public hospital. There are three levels of subsidy in the Pilot Scheme: those with monthly household income at or less than 100% of the relevant Median Monthly Domestic Household Income (MMDHI) receive a full grant of the subsidy at \$1,000 per month; those with monthly household income from more than 100% to 125% of the MMDHI receive three-quarters grant of the subsidy at \$750 per month; and those with monthly household income from more than 125% to 150% of the MMDHI receive a half grant of the subsidy at \$500 per month.

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<sup>1</sup> Under the Pilot Scheme, “stoma” refers to colostomy, urostomy and ileostomy, where the patients are required to wear stoma bags to collect wastes from the body. A stoma is regarded as permanent if there is no plan for closure as confirmed by a Medical Officer/Nurse of public hospital/clinic/Surgical Specialist on the Specialist Register of the Medical Council of Hong Kong (applicable only to applicants who have not received surgical treatments in a public hospital/clinic). A Medical Officer of a public hospital/clinic refers to one in a Specialist Out-patient Clinic (Surgery) under the Hospital Authority (HA), while a nurse of a public hospital/clinic refers to one in a Stoma and Wound Care Clinic under HA.

## Evaluation

4. SWD conducted an evaluation of the effectiveness of the Pilot Scheme in January 2020 and completed it in February. The evaluation mainly analysed the number of beneficiaries, the amount of subsidy disbursed, how the subsidy was used by the beneficiaries, feedback from the beneficiaries and those units which assisted in distributing application materials as well as enquiries and comments made by the public. The data for the evaluation was collected through the questionnaire survey conducted with the beneficiaries and those units which assisted in distributing application materials, and the public enquiries and comments received.

### Analysis of Evaluation Results

5. SWD has analysed the collected information and data for the evaluation as follows:

(a) Statistical Data on Application and Profile of Beneficiaries

6. As at end-December 2019, SWD received 730 applications, among which 603 persons were assessed to be eligible and receiving subsidy on a quarterly basis, 74 persons were ineligible and 28 persons withdrew their applications. The remaining few applications which were received after the application deadline were still under processing. Among the 603 eligible applicants, 558 persons (92.5%) received a full grant of the subsidy at \$1,000 per month, 30 persons (5%) received three-quarters grant of the subsidy at \$750 per month and 15 persons (2.5%) received a half grant of the subsidy at \$500 per month.

7. Among the 603 eligible applicants, 517 persons were aged 60 or above, constituting 86% of all eligible applicants, with those aged between 60 and 69 being the largest group. The relevant statistical data is at **Attachment**.

(b) Units which Assisted in Promotion and Distributing Application Materials

8. A total of 2 021 invitation letters were sent via Hong Kong Stoma Association and the self-help groups of stoma patients of North District Hospital and Tuen Mun Hospital to their members. Besides, Medical Social Services Units of public hospitals with Specialist Out-patient Clinics (Surgery) (13 Units), Stoma and Wound Care Clinics under HA (18 Units), Patient Resource Centres and Rehab Shops located at some public hospitals (18 Units) assisted in promoting the Pilot Scheme and distributing programme briefs and application forms. Eligible persons may obtain application forms from the CCF Team of SWD or the abovementioned units direct. Application forms can also be downloaded from SWD website.

(c) Questionnaire Survey with the Beneficiaries

9. SWD conducted a telephone survey on 100 randomly selected beneficiaries (around 17% of the total number of beneficiaries) in January 2020, with a view to understanding their use of stoma bags and related medical consumables, use of subsidy, their care in daily living, as well as their comments on the Pilot Scheme.

(i) Use of Stoma Bags and Related Medical Consumables

10. 75% of the interviewees had been using stoma bags or related medical consumables for 3 years or above, while 22% had been using stoma bags or related medical consumables for 1 to 3 years. The interviewees also said that the expenses on stoma bags or related medical consumables were mainly borne by themselves (46%) or by their family members/relatives/friends living together or living away (35%).

(ii) Use of Subsidy and Care in Daily Living

11. After receiving the subsidy of the Pilot Scheme, 66% of the interviewees and their families still had to bear the additional spending on medical consumables, while 34% of the interviewees did not have to pay for any additional expenses. Most of the interviewees (25%) had to pay an additional expense of \$500 or below, followed by 21% of the interviewees who had to pay an additional expense of \$1,000 or above while 20% of the interviewees had to pay an additional expense of \$500 to \$1,000.

12. Almost all the interviewees were living in the community (including short-term hospitalisation), and only one interviewee was living in a residential care home. For care in daily living, 25% of the interviewees needed to be taken care of by others and the main carers were mostly their family members/relatives/friends living together. They also agreed that the Pilot Scheme could relieve their financial burdens in purchasing related medical consumables. 98% of the interviewees agreed that the Pilot Scheme rendered appropriate support to them in purchasing related medical consumables. A few interviewees expressed that the amount of subsidy of the Pilot Scheme was insufficient.

(iii) Comments on the Pilot Scheme

13. All the interviewees (100%) were satisfied with the overall arrangement of the Pilot Scheme. 26% of the interviewees made some comments, including 13% of the interviewees proposing to increase the amount of subsidy, 9% of the interviewees proposing to extend the subsidy period, and 4% of the interviewees respectively proposing to disburse subsidy on a monthly basis, disburse subsidy on a reimbursement basis, relax the asset limit

and strengthen publicity, etc.

(iv) Questionnaire Survey with Units which Assisted in Promotion and Distributing Application Materials

14. SWD conducted a questionnaire survey with all units which assisted in distributing application materials and received 16 responses in total. The majority of them introduced the Pilot Scheme to applicants through interviews with staff/medical officers or telephone enquiries. 11 interviewed units made a number of suggestions, including relaxing the eligibility criteria (such as covering persons with chronic wounds or temporary stomas), increasing the amount of subsidy, simplifying the application procedures, shortening the processing time, extending the Pilot Scheme, adding different publicity means and strengthening the enquiry hotline service. All the interviewed units agreed that the Pilot Scheme had helped relieve the financial burdens of the applicants and their families in purchasing related medical consumables, and they also expressed their willingness to provide continuous assistance to similar programmes.

(d) Public Enquiries and Comments

15. In the course of implementing the Pilot Scheme, SWD has set up an enquiry hotline to provide necessary support and information for persons concerned. As at end December 2019, SWD received a total of 1 166 enquiries on the Pilot Scheme, the majority of which concerned the eligibility criteria, application procedures, completion of application forms/submission of documents, application progress, etc. Some enquiries also provided comments on the Pilot Scheme, such as simplifying the application procedures and relaxing the eligibility criteria.

## **Conclusion**

16. The evaluation results showed that more than 80% of the beneficiaries were aged 60 or above, and more than 90% of the beneficiaries are receiving a full grant of the subsidy at \$1,000 per month. This reflected that most of the beneficiaries were from relatively low-income families, and the Pilot Scheme could render appropriate support to them. At the same time, over 70% of the interviewees had been using stoma bags or related medical consumables for more than three years, which indicated that they had long-term need of the subsidy from the Pilot Scheme. They hoped that the subsidy period of the Pilot Scheme could be extended or the Pilot Scheme be incorporated into the regular service of the Government.

17. Notwithstanding that more than 60% of the interviewees and their families still had to pay an additional expense for medical consumables

even with the subsidy from the Pilot Scheme, the majority of them agreed that the Pilot Scheme was able to relieve their financial burdens. Thus, some interviewees expressed their wish to that the amount of subsidy be increased.

18. Based on the above survey data and results analysis, the Pilot Scheme has achieved its purpose of relieving the financial burdens of persons with permanent stoma from low-income families, especially those who have been using stoma bag for a long period of time. Regularisation of the Pilot Scheme may continue to provide support to those in need.

19. It was announced in the 2019 Policy Address Supplement that the Pilot Scheme would be regularised. SWD expects that the regularised service can be implemented in March 2021. In the course of the implementation of the Pilot Scheme, SWD has launched a number of publicity initiatives, such as issuing press releases and uploading relevant information onto the websites of SWD and CCF. Other than those units as listed in paragraph 8 above which assisted in the promotion of the Pilot Scheme, posters were put up and publicity materials were distributed at District Social Welfare Offices of SWD and Home Affairs Enquiry Centres of the Home Affairs Department. The publicity means were primarily paper-based and relatively passive. As the actual number of beneficiaries falls below the target, SWD will consider different publicity avenues to diversify the publicity means upon regularisation of the Pilot Scheme. Moreover, to ensure that the beneficiaries of the Pilot Scheme can continue to receive support, there is a need to extend the Pilot Scheme in this transitional period to allow the eligible persons to receive the subsidy until the regularised service is implemented.

Social Welfare Department  
August 2020

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**Subsidy Profile of the Beneficiaries**

Grant of Subsidy	Number of Beneficiaries	Percentage
Full grant (\$1,000 per month)	558	92.5%
Three-quarters grant (\$750 per month)	30	5%
Half grant (\$500 per month)	15	2.5%
<b>Total</b>	<b>603</b>	<b>100%</b>

**Age Profile of the Beneficiaries**

Age Group	Number of Beneficiaries	Percentage
0–19	1	0.2%
20–29	5	0.8%
30–39	3	0.5%
40–49	22	3.7%
50–59	55	9.1%
60–69	181	30.0%
70–79	179	29.7%
80–89	132	21.9%
90 or above	25	4.1%
<b>Total</b>	<b>603</b>	<b>100%</b>