

Commission on Poverty

Training, Retraining and Continuing Education - Home Help and Personal Care Services

PURPOSE

To facilitate Members' discussion on training initiatives to assist the middle-aged and low-skilled unemployed, this paper provides some background information on the job opportunities in the home help and personal care market, including domestic helper service, post-natal care, and health massage/foot reflexology. It also examines the potentials of the elderly care services industry.

HOME HELP SERVICE

2. The domestic helper retraining courses provided by the ERB has proven to be effective in developing the Local Domestic Helpers' (LDHs) market. The courses help to equip job seekers with professional housework techniques, knowledge of occupational safety and health, and proper working attitude with a view to enhancing their occupational skills. To further expand the LDHs' market, the ERB introduced the Integrated Scheme for LDHs in May 2002. The Integrated Scheme seeks to provide "employer-oriented" value-added services. Under the Scheme, a centralized web-based database on LDH vacancies and LDH retrainees has been set up in 13 Regional Services Centres to facilitate effective and efficient job matching and referral for employers and LDH retrainees. The number of vacancies registered under the Scheme increased steadily from some 37,000 in 2002 to over 58,000 in 2005. On average, over 60% of these vacancies were filled by the retrainees. The overall placement rate for the retrainees was 86% in 2005-06.

POST-NATAL CARE

3. The post-natal care market is a showcase of how low-skilled, low education and middle-aged women can be organized and trained to serve a relatively new and untapped market. Notable innovative projects include the 'Healthy Mothers-to-be' - A Women and Community Networking Project funded by the Community Investment and Inclusion Fund¹. Through a well-organized capacity-building training and continuous

¹ A presentation was made at the Social Enterprise Conference 2006 (www.seconference.gov.hk/PPT/Noel%20Yeung.ppt).

development programme with professional advice and network support, unemployed women are empowered to provide post-natal companionship, mentorship and support to first-time parents. A 'Healthy Mothers-to-be' Club is formed by these post-natal mentors to promote networking and development of skills to self-manage the service operation. Separately, the ERB is also providing training course on post-natal care workers. It was introduced in March 2003 as a follow-up module of the training for LDHs. Up to July 2006, over 5,600 LDH retrainees have undergone the training. In view of the market potential of this job, the ERB also expanded the module into a full-time placement-tied course in January 2006. Up to March 2006, a total of about 170 retrainees have completed the course and the placement rate is 85%.

HEALTH MESSAGE/FOOT REFLEXOLOGY

4. Through market surveys, the ERB has assessed the local demand for health massage and foot reflexology. In parallel with the development of the two new courses, the ERB aims to establish quality assurance, conduct market promotion for this growing sector, and provide complementary employment assistance to the retrainees. Standardised retraining courses were introduced in November 2004. Up to March 2006, over 1,300 retrainees have completed the training, of whom 960 (or 72%) have joined the industry. In April 2006, the ERB commenced a pilot scheme to provide health massage and foot reflexology services to residents in some property developments through their club houses. The feedback has been encouraging in that a number of them are going to incorporate such services in the club houses on a permanent basis. The ERB would continue to explore and expand the market through other property developments and premises, as well as shopping malls, offices and educational institutions.

ELDERLY CARE SERVICE

Existing residential care services for the elderly

5. Currently, residential care homes for the elderly (RCHEs) is an important part of the elderly care service industry in Hong Kong. They are run by both the private sector and non-governmental organizations (NGOs). Amongst them, a large proportion of RCHEs are private homes (PHs). As at end April 2006, there were a total of 748 RCHEs with 573 (77%) operated by private service providers and 175 (23%) run by NGOs. These RCHEs offer a total of about 73,000 places, out of which, about 27,000 (37%) are subsidized places.

6. There are two broad categories of formal care workers in the sector, namely health workers (HWs)² and personal care workers (PCWs)³. Since April 2006, applicants for admission to the HW training courses must have attained a minimum of Form 5 education level. PCWs or other ancillary workers may be more suitable for the low-education and low-skilled unemployed. As at 27 June 2006, the numbers of PCWs and ancillary workers employed by 748 RCHEs are 8,681 and 4,798 respectively.

Training for employment as formal care workers

7. There are training and re-training courses for the existing and new care workers. The SWD provides training for care workers and home helpers. The ERB provides retraining courses, including tailor-made programmes on PCWs for specific RCHEs. In 2005-06, about 3,200 retrainees completed the PCW training and the overall placement rate was 83%. The Vocational Training Council also runs a series of training courses for care workers, funded by the Skills Upgrading Scheme.

Manpower demand by RCHEs

8. Despite the availability of job vacancies, the industry associations⁴ pointed out that most PHs face a shortage of care workers. The current issue is not the lack of suitable training to help the low-skilled unemployed to enter the elderly residential care sector. Given the current wage level, working conditions and career prospects, not many people are willing to enter the industry. The SWD has been working with the industry associations to explore possible relief measures including the provision of training for care staff. In this connection, the Qualifications Framework being established by the EMB should help establish clearer articulation ladders between different qualifications in order to improve the career prospects of care workers, hence enticing more people to take up the elementary level jobs.

² A health worker (HW) is responsible for the overall health care of residents living in RCHEs including providing medical information on residents, devising health plans, providing routine basic medical checks and supervising the intake of medicine by residents etc. A minimum F.5 education level is required for HWs.

³ A personal care workers (PCW) is to assist nurses and HWs to provide daily personal care services to the residents. According to the industry associations, a large number of PCWs are newly arrived middle-aged women with low education and skill levels.

⁴ The Hong Kong Association of the Private Homes for the Elderly and the Hong Kong Private Nursing Home Owners Association.

Potentials of the home help market

9. Similar to many other places in the world, Hong Kong is facing an ageing population. According to the consultation document on Hong Kong Population Trends and Overseas Perspectives recently released by the Council of Sustainable Development⁵, Hong Kong's elderly population (those aged 65 or above) is projected to rise from 836 400 in 2005 to 2 243 100 in 2033. Hong Kong people also enjoy a long life expectancy. The respective life expectancy at birth of male and female will increase from 78.8 years and 84.4 years in 2005 to 82.5 years and 88.0 years in 2033. While the trend presents some challenges to our society, it also presents potential opportunities in the development of elderly care service industry, and the related job opportunities in particular for the low-skilled workers.

10. Besides formal care delivered through RCHEs, the Government is also actively promoting ageing in the community. Currently, there are some efforts in promoting training for informal carers (e.g. family members, relatives, neighbours, domestic helpers, volunteers etc.) to provide home care for elders. The Elderly Commission considers that in view of the increasing role of informal carers in taking care of elders ageing in the community, the Administration should further consider training opportunities for informal carers.

Social enterprise as a model

11. Overseas experience indicates that social enterprise is a model to integrate the provision of training and placement opportunities for the low-skilled unemployed, and the provision of quality care services, including for the elderly. The model encourages bottom-up solutions and innovative approaches to address the needs of the unemployed as well as service clients. The industry associations as well as some non-governmental organizations reflected that they would look into possibility of establishing new social enterprises to provide quality care services to the elderly.

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⁵ Table 1.1 and table 1.3, Chapter 1, Hong Kong Population Trends and Overseas Perspectives.
http://www.susdev.org.hk/en/paper/paper_ch1.asp