

Our Ref.: (1) in SWD/S/101/3 Pt. 2
Tel. No.: 2832 4308
Fax. No.: 2575 5632

30 December 2021

Chairpersons and Heads of
Non-governmental Organisations
operating Subvented Welfare Services

Dear Sir/Madam,

Submission of Special Incident Report and Compliance with 16 Service Quality Standards

I write to remind you of the importance of submitting the Special Incident Report (SIR) in a timely manner and the need to strictly comply with the Service Quality Standards (SQSs) in delivering welfare services.

A reporting mechanism has been implemented since 2017 that all subvented service units are required to submit the Special Incident Report (SIR) (**Annex**) to the Subventions Branch with a copy to the concerned service branch(es) of this Department within **three working days** following the incidents. You may browse the related information on our website at the following link -

https://www.swd.gov.hk/en/index/site_ngo/page_serviceper/sub_SpecialIncidents/

On the requirement for the submission of SIR, special incidents refer to the following –

- (a) unusual death / incident resulting in serious injury or death of service user(s);
- (b) missing of service user(s) requiring police assistance;
- (c) established / suspected cases of abuse of service user(s) by staff / other service user(s);
- (d) dispute resulting in physical injury and requiring police assistance; and
- (e) other major incidents affecting the daily operation of the service unit for at least 24 hours / drawing media concern.

For subvented service units subject to regulation under the Residential Care Homes (Elderly Persons) Ordinance (Cap. 459) or the Residential Care Homes (Persons with Disabilities) Ordinance (Cap. 613), they should continue to follow the existing practice of reporting significant incidents / special incidents to the Licensing Office of



Residential Care Homes for the Elderly or the Licensing Office of Residential Care Homes for Persons with Disabilities, as the case may be, by using the prescribed forms for reporting special incidents as listed in (a) to (e) above, with a copy to the Subventions Branch.

In relation to the recent child abuse cases happened in a subvented service unit, please be reminded that service operators are obliged to provide adequate supervision and closely monitor the behaviour of all staff and service units to ensure full compliance with the 16 SQSs as stipulated in the Funding and Service Agreements. Most of all, effective measures should be put in place **to ensure that service users are free from abuse** in accordance with SQS 16 and the relevant guidelines for protecting service users especially for vulnerable persons in need of care and attention. Where suspected abuse or abuse incident is identified, it should be **handled and reported immediately** to the parties concerned without delay. For details, please refer to the respective guidelines for the procedures of handling abuse cases and consult the relevant service branches of this Department if required.

For any enquiry, please contact Miss CHOW Mei-yee, Senior Social Work officer (Subventions), on telephone number 2832 4307.

Yours faithfully,

Signed

(Ms LUI Ka-wing)
for Director of Social Welfare

c.c. Chief Executive, Hong Kong Council of Social Service

Special Incident Report

(To be submitted to the Subventions Branch and the relevant service branch of the Social Welfare Department not more than 3 working days following the Special Incident¹)

To : **Subventions Branch** (Fax : 2575 5632)
*Elderly Branch *(Fax : 2832 2936)
*Family and Child Welfare Branch *(Fax : 2833 5840)
*Rehabilitation and Medical Social Services Branch *(Fax : 2893 6983)
*Youth and Corrections Branch
*Corrections Section *(Fax : 2833 5861)
*Youth Section *(Fax : 2838 7021)
*Licensing and Regulation Branch
*Child Care Centres Advisory Inspectorate *(Fax : 2591 9113)
*Licensing Office of Drug Dependents Treatment Centres *(Fax : 2119 9057)
(* Delete as appropriate)

Reporting Unit

Name of NGO : _____
Name of service unit : _____
Address of service unit : _____
Name of responsible staff : _____
Contact telephone no. : _____

Special Incident

(a) Date of incident : _____
(b) Time of incident : _____
(c) Location of incident : _____
(d) Nature of incident : _____

¹ Special incidents that happened in the service units and/or other places in the course of service delivery should be reported.

- Unusual death / incident resulting in serious injury or death of service user(s)
- Missing of service user(s) requiring police assistance
- *Established / suspected cases of abuse of service user(s) by staff² / other service user(s) (* Delete as appropriate)

Nature of abuse :

- Physical
- Sexual
- Psychological
- Neglect
- Others (*Please specify:* _____)

- Dispute resulting in physical injury and requiring police assistance
- Other major incidents affecting the daily operation of the service unit for at least 24 hours / drawing media concern

(e) Reported by media

- Yes
- No

(f) Description of the incident :

Service User(s) Concerned (if applicable)

- (a) Service user (*1st*) : Sex _____ Age _____
- (b) Service user (*2nd if any*) : Sex _____ Age _____
- (c) Service user (*3rd if any*) : Sex _____ Age _____

Staff² Concerned (if applicable)

- (a) Staff member (*1st*) : Sex _____ Post _____
- (b) Staff member (*2nd if any*) : Sex _____ Post _____
- (c) Staff member (*3rd if any*) : Sex _____ Post _____

² Staff includes foster parents of Foster Homes and house-parents of Small Group Homes and their family members.

Follow-up Actions

- (a) Reported to police
 - Yes (*Date and time of report* : _____)
(*Police Report Number* : _____)
 - No (*Remarks* : _____)

 - (b) Informed family members / relatives / guardian / guarantor
 - Yes (*Date and time of notification* : _____)
(*Relationship with the service user(s)* : _____)
(*Name of the informing staff*: _____)
 - No (*Remarks* : _____)

 - (c) Medical arrangement
 - Yes (*Please specify* : _____)
 - No

 - (d) Multi-disciplinary case conference conducted / Care plan formulated for the service user(s) concerned
 - Yes (*Please specify, with date*: _____)
 - No (*Remarks* : _____)

 - (e) Need to respond to concerns / enquiries by outside parties (e.g. Concern Groups, District Council or Legislative Council, etc.)
 - Yes (*Please specify* : _____)
 - No

 - (f) Immediate follow-up actions taken, including measures to protect other service users (if applicable)
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(g) Follow-up plan

Prepared by	:	_____	Endorsed by	:	_____
Name	:	_____	Name	:	_____
Post	:	_____	Post	:	_____
Telephone no.	:	_____	Telephone no.	:	_____
Date	:	_____	Date	:	_____