

CODE OF PRACTICE FOR DRUG DEPENDENT PERSONS TREATMENT AND REHABILITATION CENTRES



October 2025 (Revised Edition)

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CHAPTER 1

INTRODUCTION

1.1 General

1.1.1 The Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance (Cap. 566) (“the Ordinance”) came into operation on 1 April 2002.

s.25 of the
Ordinance

1.1.2 This Code of Practice, issued by the Director of Social Welfare (“DSW”), sets out principles, procedures or guidelines for the operation, management or other control of treatment centres, and provides practical guidance in respect of any one or more of the requirements of the Ordinance. The Ordinance governs the operation of drug dependent persons treatment and rehabilitation centres (“treatment centres” or “centres”) in Hong Kong.

1.1.3 The statutory provisions cited or mentioned in this Code of Practice were those in force as at October 2025. Readers of this Code of Practice should check whether there are any subsequent amendments to these provisions.

s.3

1.1.4 The Ordinance does not apply to treatment centres managed and controlled by the Hospital Authority.

1.1.5 Operators, including prospective operators, of treatment centres should read this Code of Practice carefully in conjunction with the Ordinance. To facilitate cross-reference, relevant sections of the Ordinance are indicated in the margins of this Code of Practice.

s.6(4)(c)(iii)

1.1.6 DSW may refuse to issue a licence to an applicant if it appears to DSW that the place to be used as the treatment centre does not comply with any requirements relating to the construction, design, structure, fire precautions, health, sanitation, or safety set out in this Code of Practice. For enquiries or advice, please contact the Licensing Office of Drug Dependents Treatment Centres (“Licensing Office”) of the Social Welfare Department (“SWD”).

1.1.7 Compliance with the requirements of this Code of Practice does not exempt the operator or any other person from the liabilities, obligations and requirements imposed under other ordinances or the common law.

1.2 Purpose of the Ordinance

The Ordinance governs treatment centres that provide voluntary residential treatment or rehabilitation services for drug dependent persons, through a licensing system administered by DSW. The legislation aims to –

- (a) ensure that the drug dependent persons receive services in a properly managed and safe environment, thereby protecting their well-being;
- (b) enable the Government to maintain a register of all treatment centres; and
- (c) regulate such centres under a unified system.

1.3 Interpretation

- s.2 1.3.1 “Treatment centre” means any place used or intended to be used -
- (a) for the treatment for drug dependence or for the rehabilitation of 4 or more drug dependent persons undergoing such treatment or rehabilitation on a voluntary basis; and
 - (b) for providing residential accommodation for such persons undergoing treatment for drug dependence or undergoing rehabilitation, at that place.
- s.2 1.3.2 “Drug dependent person” means a person who -
- (a) is suffering from the psychophysical state in which the usual or increasing doses of a dangerous drug (as defined in the Dangerous Drugs Ordinance (Cap. 134)) or a specified substance are required to prevent the onset of withdrawal symptoms; or
 - (b) has completed treatment for drug dependence and is undergoing rehabilitation at a treatment centre.
- s.2 1.3.3 “Specified operator” means, in relation to a treatment centre, the person specified as its operator in –

- (a) a licence; or
- (b) a certificate of exemption

for the time being in force in respect of the treatment centre.

1.4 Licence and Certificate of Exemption

- s.4(1) 1.4.1 No person shall operate or exercise control over the management of a treatment centre unless he is the specified operator of the treatment centre.
- s.4(2) 1.4.2 No person shall take part in the management of a treatment centre unless –
- s.6(2)(a) &
s.9(3)(a) (a) a licence has been issued or renewed in respect of that treatment centre and is for the time being in force; or
- s.8(3)(a) &
s.9(3)(a) (b) a certificate of exemption has been issued or renewed in respect of that treatment centre and is for the time being in force.
- 1.4.3 A licence or a certificate of exemption issued in respect of a treatment centre is location-based and non-transferable. Application for a licence or certificate of exemption, or for renewal must be made to DSW using the prescribed form, LODTC 1 [Appendix 2(a)]. The form can be obtained from the Licensing Office or downloaded from the SWD website.

1.5 Certificate of Registration

The operator of a private treatment centre is required to register the business with the Inland Revenue Department under the Business Registration Ordinance (Cap. 310), and with the Registrar of Companies under the Companies Ordinance (Cap. 622) if the centre is owned by a body corporate.

1.6 Insurance Coverage

Under the Employees' Compensation Ordinance (Cap. 282), the operator of a treatment centre, being the employer, is required to take out employees' compensation insurance against his liability to all employees. It is also advisable for the operator of a treatment

centre to take out other related insurance, e.g. public liability insurance, for the centre. (For other employment requirements such as leave and Mandatory Provident Fund, please refer to paragraphs 8.3.3 to 8.3.9 of this Code of Practice.)

CHAPTER 2

LICENCE

2.1 The Policy

- 2.1.1 Licences may be issued to treatment centres that comply with the requirements of the Ordinance. All treatment centres established on or after 1 April 2002 and planned to commence operation on or after that date, are subject to regulation by licensing. This is mainly because licensing can more effectively ensure a properly managed and safe environment for drug dependent persons to receive residential drug dependence treatment or rehabilitation services, thereby enhancing the protection of their well-being.
- 2.1.2 The SWD recognises the different treatment approaches adopted by different treatment centres and encourages a variety of options for drug dependent persons. Treatment centres should have autonomy in determining their treatment approaches, having regard to the welfare of residents.

2.2 Application for a Licence

s.6(1) An application for a licence must be made to DSW using the prescribed form LODTC 1 [Appendix 2(a)] and accompanied by any information DSW may require. The details are as follows -

- (a) The duly completed application form (the original and 3 copies) may be sent by registered post/submitted in person to the Licensing Office, or submitted online through the SWD website;
- (b) The following documents should be submitted together –
 - (i) a copy of the applicant's Hong Kong Identity Card ^{Note 1} (applicable to applications made by individuals);
 - (ii) copies of the Hong Kong Identity Cards ^{Note 1} of all directors, and a copy of the Certificate of Incorporation

^{Note 1} As an alternative, the original Hong Kong Identity Card(s) may be produced for verification.

issued by the Registrar of Companies (applicable to applications made by body corporates);

- (iii) copies of the Hong Kong Identity Cards ^{Note 1} of all partners, and a copy of the Business Registration Certificate and a certified copy of Business Registration Application issued by the Commissioner of Inland Revenue (applicable to applications made by partnerships);
- (iv) a copy of the tenancy agreements, and/or documents showing the land status (e.g. Government Land Licence, Land Lease, Short Term Tenancy or Short Term Waiver, etc.) and the expiration dates for such land use in respect of the treatment centre premises (applicable to rented centre premises);
- (v) a copy of the assignment in respect of the treatment centre premises (applicable to self-owned centre premises);
- (vi) 6 copies of building plans for the treatment centre premises. For details of the requirements on building plans, please refer to the Guidance Notes on Submission of Building Plans at Appendix 1(b);
- (vii) full list of staff in the prescribed form LODTC 2 for employees/prospective employees [Appendix 2(b)], and/or LODTC 2(a) for skeleton volunteers ^{Note 2} [Appendix 2(c)]; and
- (viii) fit person statement(s) completed by the applicant; by all partners where the applicant is a partnership; or by all directors where the applicant is a body corporate, using Annex A of Appendix 2(a).

2.3 Issue of Licence

s.6(2) DSW shall determine an application for a licence –

^{Note 2} Skeleton volunteers refer to those who perform fundamental or core duties of the treatment centre on a regular basis.

- s.11(1)(d)
- (a) by issuing to the applicant a licence [LODTC 3 at Appendix 2(d)], subject to such reasonable conditions as DSW may impose, for a period not exceeding 12 months; or
 - (b) by refusing to issue a licence to the applicant.

2.4 Licensing Conditions

s.6(2)(a) &
s.6(5)

DSW is empowered to issue a licence, subject to such reasonable conditions as he may impose, which may include –

- (a) requirements relating to the accommodation, staffing, equipment and management of the treatment centre as stipulated in this Code of Practice; and
- (b) any other reasonable conditions as deemed fit by DSW.

2.5 Fit Person Requirement

s.6(4)

2.5.1 DSW may refuse to issue a licence to the applicant if it appears to DSW –

- (a) where the applicant is an individual, that the applicant is not a fit person;
- (b) where the applicant is a body corporate, that any director of the body corporate is not a fit person; and
- (c) where the applicant is a partnership, that any partner of the partnership is not a fit person.

s.7

2.5.2 A person is not a fit person if –

- (a) he is or was a drug dependent person unless he satisfies DSW that he has not been a drug dependent person continuously in the 7 years immediately prior to the day on which DSW considers the matter;
- (b) he has been convicted in Hong Kong of any offence specified in Schedule 1 of the Organized and Serious Crimes Ordinance (Cap. 455) and sentenced to imprisonment within the 10 years immediately prior to the day on which DSW considers the matter; or

- (c) he has been convicted elsewhere, within that period, of any offence constituted by an act or omission that, if it had occurred in Hong Kong, would have constituted an offence specified in Schedule 1 of the Organized and Serious Crimes Ordinance (Cap. 455), and sentenced to imprisonment on the conviction. [The said Schedule, version dated 19 September 2025, is attached at Appendix 1(c).]
- 2.5.3 To enable DSW to determine whether a person is a fit person for the purpose of paragraph 2.5.1, the applicant, or any director/partner of an applicant that is a body corporate/partnership, should notify DSW whether he has –
 - (a) been convicted of any criminal offence as specified in paragraphs 2.5.2(b) and (c); and
 - (b) been a drug dependent person in the 7 years immediately prior to the date of application.
- 2.5.4 Within 14 days after being convicted of any criminal offence as specified in paragraphs 2.5.2(b) and (c), an applicant or a specified operator, or any director/partner of an applicant or a specified operator that is a body corporate/partnership, should notify DSW using the prescribed form LODTC 5 [Appendix 2(f)] and attach an authorisation form [Annex A1] to facilitate the SWD in checking his criminal conviction record with the Hong Kong Police Force. He should submit another LODTC 5 within 14 days of sentencing if the court has adjourned the sentence.
- 2.5.5 To ascertain that the fit person criteria are being met, DSW may require an applicant or a specified operator, or any director/partner of an applicant or a specified operator that is a body corporate/partnership, to give consent for the SWD to check his criminal conviction record with the Hong Kong Police Force. Such a check will be conducted under the following circumstances –
 - (a) when it comes to the knowledge of DSW that the applicant or specified operator, or any director/partner of the applicant or specified operator that is a body corporate/partnership, has recently been convicted of any criminal offence as specified in paragraphs 2.5.2(b) and (c);
 - (b) if DSW has doubt about the content of the fit person statement made; or
 - (c) in any other situations DSW considers appropriate.

2.6 Renewal of Licence

- s.9(1) & (2) 2.6.1 The specified operator of a treatment centre may apply to DSW not more than 4 months and not less than 2 months before the expiration of the licence, or within such other period prior to the expiration as DSW may in writing permit, for it to be renewed for a period of 12 months or such lesser period as may be specified.
- s.9(7)
- s.9(3) 2.6.2 DSW shall determine such application –
- (a) by granting the renewal, subject to any reasonable variation of the conditions of the licence as DSW may think fit; or
 - (b) by refusing to grant the renewal.

2.7 Cancellation of Licence

- s.14 DSW may at any time, by notice in writing served on the specified operator of a treatment centre, cancel the licence in respect of the centre –
- (a) on the ground that the specified operator or any other person has committed an offence under section 4, 5, 10, 16, 17 or 19 of the Ordinance in respect of the treatment centre;
 - (b) on the ground that, in respect of the treatment centre or the drug dependent persons residing in the treatment centre, any requirement, order or direction made or given under the Ordinance has not been complied with;
 - (c) on the ground that any condition of the licence has not been or is not being complied with;
 - (d) if it appears to DSW that –
 - (i) the treatment centre has ceased to operate as such or to exist;
 - (ii) the specified operator has ceased to operate the treatment centre; or
 - (iii) on any occasion the treatment centre has been operated in a manner contrary to the public interest; or

- (e) on any ground specified in section 6(4)(a), (b), (c) or (d) of the Ordinance that would entitle DSW to refuse an application for a licence for the treatment centre.

2.8 Notice of Refusal or Cancellation

- s.15(1) 2.8.1 Before refusing an application for a licence or an application for its renewal, or serving a notice of cancellation of a licence in respect of a treatment centre as mentioned in paragraphs 2.3(b), 2.6.2(b) and 2.7 respectively, DSW shall give to the applicant or the specified operator (as the case may be) notice of his intention to do so, which shall –
 - (a) state the grounds on which he intends to refuse the application or serve a notice under section 6(2)(b), 9(3)(b) or 14 of the Ordinance (as the case may be); and
 - (b) contain a statement that the applicant or the specified operator may make written representations to DSW within 21 days after the day on which such notice is given.
- s.15(2) 2.8.2 DSW may, after 21 days from the day on which the notice of intention as mentioned in paragraph 2.8.1 is given and after considering the written representations (if any) received from the applicant or specified operator, serve on the applicant or specified operator a notice under section 6(2)(b), 9(3)(b) or 14 of the Ordinance (as the case may be), but such notice shall not have effect earlier than 21 days from the day on which such notice is given.

2.9 Display of Licence

- s.12 2.9.1 To assist members of the public in identifying the legal status of the treatment centre, the specified operator shall display, or cause to be displayed, the licence for the time being in force in respect of the treatment centre in a conspicuous place on the centre premises.
- 2.9.2 If a treatment centre is issued with an electronic licence, the specified operator may display the licence, or a copy of it, on an electronic screen, in printed form, or through some other means, in a conspicuous place on the centre premises for public inspection.

CHAPTER 3

CERTIFICATE OF EXEMPTION

3.1 The Policy

Certificates of exemption are to be granted to treatment centres that were already in operation on or before 31 March 2002 but do not fully comply with the legislative requirements. This is because allowing these treatment centres to continue operating is in the interests of drug dependent persons. A certificate of exemption may be revoked if the treatment centre poses a danger to residents or their well-being is adversely affected.

3.2 Application for a Certificate of Exemption

s.8(1) & (2) An application for a certificate of exemption must have been made to DSW on or before 30 June 2002 and accompanied by such information as DSW may require. New applications are no longer accepted.

3.3 Issue of Certificate of Exemption

s.8(3) DSW shall determine an application for a certificate of exemption –

s.11(2)(d) (a) by issuing to the applicant the certificate of exemption [LODTC 4 at Appendix 2(e)], subject to such reasonable conditions as DSW may impose, for a period not exceeding 12 months; or

(b) by refusing to issue the certificate of exemption to the applicant.

3.4 Conditions of Exemption

s.8(3)(a) DSW is empowered to issue a certificate of exemption, subject to such reasonable conditions as DSW may impose, which may include –

(a) requirements relating to the construction, design, structure, fire precautions, health, sanitation, safety, accommodation, staffing, equipment and management of the treatment centre as stipulated in this Code of Practice; and

- (b) any other reasonable conditions as deemed fit by DSW.

3.5 Renewal of Certificate of Exemption

- s.9(1) & (2) 3.5.1 The specified operator of a treatment centre may apply to DSW not more than 4 months and not less than 2 months before the expiration of the certificate of exemption, or within such other period prior to the expiration as DSW may in writing permit, for it to be renewed for a period of 12 months or such lesser period as may be specified.
- s.9(7)
- s.9(3) 3.5.2 DSW shall determine such application –
 - (a) by granting the renewal, subject to any reasonable variation of the conditions of the certificate of exemption as DSW may think fit; or
 - (b) by refusing to grant the renewal.

3.6 Cancellation of Certificate of Exemption

- s.14 DSW may at any time, by notice in writing served on the specified operator of a treatment centre, cancel the certificate of exemption in respect of the centre on the same grounds as for the cancellation of licence, except the ground stated in paragraph 2.7(e). For details, please refer to paragraphs 2.7 (a) to (d).

3.7 Notice of Refusal or Cancellation

- s.15(1) 3.7.1 Before refusing an application for a certificate of exemption or an application for its renewal, or serving a notice of cancellation of a certificate of exemption in respect of a treatment centre as mentioned in paragraphs 3.3(b), 3.5.2(b) and 3.6 respectively, DSW shall give to the applicant or the specified operator (as the case may be) notice of his intention to do so, which shall –
 - (a) state the grounds on which he intends to refuse the application or serve a notice under section 8(3)(b), 9(3)(b) or 14 of the Ordinance (as the case may be); and
 - (b) contain a statement that such applicant or such specified operator may make written representations to him within 21 days after the day on which such notice is given.

- s.15(2) 3.7.2 DSW may, after 21 days from the day on which the notice of intention as mentioned in paragraph 3.7.1 is given and after considering the written representations (if any) received from the applicant or specified operator, serve on the applicant or specified operator a notice under section 8(3)(b), 9(3)(b) or 14 of the Ordinance (as the case may be), but such notice shall not have effect earlier than 21 days from the day on which such notice is given.

3.8 Display of Certificate of Exemption

- s.12 3.8.1 To assist members of the public in identifying the legal status of the treatment centre, the specified operator shall display, or cause to be displayed, the certificate of exemption for the time being in force in respect of the treatment centre in a conspicuous place on the centre premises.
- 3.8.2 If a treatment centre is issued with an electronic certificate of exemption, the specified operator may display the certificate of exemption, or a copy of it, on an electronic screen, in printed form or through some other means, in a conspicuous place on the centre premises for public inspection.

CHAPTER 4

MANAGEMENT

4.1 Admission of Residents

- 4.1.1 Prior to admitting the applicant, centre staff should clearly explain the centre's rules and regulations, fees, treatment programmes, duration of treatment, and the criteria for admission and discharge to the applicant, his guardian/parent/family members/relatives and referrer. The centre should also clearly specify to the applicant which fees are refundable and which are not.
- 4.1.2 Centre staff should let the applicant, irrespective of whether he is, or will be, a subject of a probation order, understand that -
- (a) the admission is voluntary in nature, subject to the applicant's willingness to follow the admission requirements and abide by the rules and regulations of the centre;
 - (b) the resident may be dismissed by the centre for failing to comply with its rules and regulations; and
 - (c) the resident has the right to initiate a request for early discharge.
- 4.1.3 Centre staff should conduct the procedures stated in paragraph 4.1.2 in the presence of a witness, preferably the applicant's guardian/parent/family members/relatives, before asking the applicant to sign the admission form to indicate his consent to the admission requirements. Where the applicant is under 18 years old, the consent of his guardian/parent should be obtained as well. If the applicant has special difficulty to arrange for a witness for this purpose, he should be asked to state the difficulty and make a request for exemption in writing in the admission form.
- 4.1.4 The rules and regulations of the treatment centre should be printed on the admission form and posted in a conspicuous place on the centre premises.
- 4.1.5 Centre staff should obtain a detailed account of the applicant's drug abuse history, and preferably the with the views of his guardian/parent/family members/relatives and referrer. Examples of particular concern in the intake assessment include –

- (a) drugs which are or have been abused by the applicant;
- (b) effect of these drugs on the applicant; and
- (c) whether the applicant has passed the initial detoxification period, and is not experiencing acute and severe withdrawal symptoms and/or displaying abnormal behaviour (such as suicidal signs, aggression or gross self-neglect).

4.1.6 The centre should note that -

- (a) the applicant should have passed the initial detoxification period, and should not be experiencing acute and severe withdrawal symptoms and/or displaying abnormal behaviour (such as suicidal signs, aggression or gross self-neglect); or
- (b) the applicant has been assessed by a registered medical practitioner to be medically fit to undergo the residential treatment programme for drug dependent persons. A mental assessment by a psychiatrist is required where necessary, say when the applicant displays, or is suspected to have displayed abnormal behaviour. The purpose is to ensure that the applicant is mentally stable (such as not having suicidal or psychiatric complications) to undergo residential treatment programme for drug dependent persons.

4.1.7 If an applicant is assessed to be mentally or medically unfit to undergo detoxification in a treatment centre, centre staff should advise the applicant to enrol in a treatment programme at a Substance Abuse Clinic under the Hospital Authority or a Methadone Clinic under the Department of Health before considering his admission.

4.1.8 Tests for blood-borne diseases, such as a human immunodeficiency virus (HIV) test, should not be regarded as a routine test or a prerequisite of admission. If the centre requires or arranges for the applicant to take any test for blood-borne diseases in any medical assessment, it should comply with the following requirements -

- (a) the tests to be performed on the relevant sample and the purposes of such tests should be explained to the applicant (e.g. for early treatment and/or prevention of spread of the disease);

- (b) information on the health status and medical treatment of the applicant should be kept confidential ^{Note 3}. In case where disclosure is considered necessary for the benefit of the applicant concerned, it should be restricted to the designated persons ^{Note 4} on a need-to-know basis;
- (c) specific consent of the applicant, and the guardian/parent for applicants under 18 years old, should be obtained beforehand for -
 - (i) conducting any test for blood-borne diseases; and/or
 - (ii) disclosing such sensitive data to the designated persons; and
- (d) The applicant, and the guardian/parent for applicants under 18 years old, should be informed of his rights to refuse the requests stated in sub-paragraph (c).

It should be noted that rejection of admission, admission on less favourable terms, or less favourable treatment after admission (such as restriction on activities or access to facilities, or isolation) of any applicant who refuses to undergo such tests or give consent to disclosure of such sensitive data, or who is found to be infected with any blood-borne disease, may constitute unlawful discrimination under the Disability Discrimination Ordinance (Cap. 487).

4.2 Discharge of Residents

- 4.2.1 To prepare for the discharge of the resident, the treatment centre should render assistance and, if required, make referrals for services in aspects such as accommodation, finance, job/school placement to facilitate the resident's reintegration into the community.
- 4.2.2 If the resident requests early discharge, the treatment centre should address the resident's concerns and well-being carefully, and, as far as possible, engage the resident and his guardian/parent/family members/relatives and referrer to formulate a practicable future plan. Where the resident consents, the centre should consider referring him

^{Note 3} Separate confidential record system, which is only accessible to the designated persons, should be maintained by the centre.

^{Note 4} The designated persons should observe the confidentiality rule of such data.

to other residential or non-residential drug treatment and rehabilitation services.

- 4.2.3 Methods for handling left-behind items should be mutually agreed with the resident as early as possible. Prior to discharge, the resident should also be reminded to check that he has all his belongings packed. Any left-behind property of the discharged resident should be clearly recorded, properly stored and handled in accordance with the mutually agreed methods. In case of difficulty in implementing such mutually agreed methods, and if the property still cannot be returned to the discharged resident after 3 months, the treatment centre should consider handing it over to the Police for disposal. The Police will treat such items as found property.

4.3 Schedule of Daily Activities

A routine programme schedule or timetable for the residents' daily activities should be designed and posted in the treatment centre.

4.4 Staff Duty List

A comprehensive duty list for different staff posts and a staff duty roster should be drawn up for staff to follow.

4.5 Health Care

- 4.5.1 Close supervision should be provided to residents undergoing the initial stage of detoxification. Residents displaying acute and severe withdrawal symptoms, abnormal behaviour (such as suicidal signs, aggression or gross self-neglect), or suffering from other acute illnesses or accidental injuries should be sent to a nearby Accident and Emergency Department for treatment.
- 4.5.2 Other medical and psychiatric needs of the residents should be properly addressed. In case of reported illness of any resident, medical and/or psychiatric treatment should be arranged for him as appropriate.
- 4.5.3 The treatment centre should establish clear guidelines and procedures to ensure that any medicine taken by individual residents is in strict adherence to the prescriptions and advice of registered medical practitioners.
- 4.5.4 Over-the-counter medication and prescribed drugs should be properly recorded and kept in a safe and locked place.

- 4.5.5 A satisfactory standard of cleanliness, tidiness and sanitation in the treatment centre should be maintained all the time. The centre should also develop precautionary measures relating to personal and food hygiene to prevent the spread of infection in the centre.
- 4.5.6 In the event of any resident or staff suffering from any infectious disease, prompt medical consultation should be sought and the treatment directives should be fully observed. Precautionary measures (e.g. disinfecting the contaminated environment) should also be taken to prevent further spread of the diseases.
- 4.5.7 If any staff or resident is suffering or suspected to be suffering from a notifiable infectious disease, the supervisor should expeditiously report the case to the Department of Health. For this purpose, the patient should be brought to the attention of a registered medical practitioner. The supervisor should also ensure that the case is reported to the Licensing Office as soon as practicable. For details of notifiable infectious diseases, please refer to Schedule 1 of the Prevention and Control of Disease Ordinance (Cap. 599). [The said Schedule, version dated 11 November 2022, is attached at [Appendix 1\(d\)](#).]
- 4.5.8 Owing to the nature of communal living in the treatment centre, apart from notifiable infectious diseases, the outbreak or suspected outbreak of a communicable disease, such as influenza or scabies, among staff or residents, also warrants special attention. In the event of such an occurrence, the supervisor shall promptly report the case to the Department of Health for consultation and advice.
- 4.5.9 The specified operator shall ensure that centre staff and residents receive education on, and practise, comprehensive precautionary measures to safeguard themselves from being infected with blood-borne diseases such as hepatitis B, hepatitis C and HIV. If any test for blood-borne diseases is to be conducted for any resident, the principles and requirements laid down in paragraph 4.1.8 should be observed.

4.6 Handling of Fire, Accidents and Emergencies

The specified operator is responsible for drawing up operational guidelines regarding the handling procedures to be observed by staff, their roles and duties and follow-up actions to be taken in the event of fire, accidents, other types of emergencies (e.g. typhoon, thunderstorm warning, rainstorm warning, or landslide), and emergencies involving residents. (Examples of emergencies involving residents are: a resident displaying acute and serious withdrawal symptoms or drug induced psychotic symptoms, or a resident suffering from acute illness.)

4.7 Record Keeping

4.7.1 The specified operator of the treatment centre is required to establish and maintain a record of centre employees and/or skeleton volunteers as follows -

- (a) Employees' Record, with particulars including -
 - (i) personal particulars, such as name (Chinese and English), sex, date of birth/age, address, telephone number and Hong Kong Identity Card number;
 - (ii) previous working experience (applicable to supervisors or equivalent ranks);
 - (iii) post held in the centre;
 - (iv) working hours and shift patterns;
 - (v) terms of appointment (e.g. a full-time or part-time employee, or a trainee); and
 - (vi) the date of appointment/resignation/dismissal; and/or
- (b) Skeleton Volunteers' Record, with particulars including -
 - (i) personal particulars, such as name (Chinese and English), sex, date of birth/age, address, telephone number and Hong Kong Identity Card number;
 - (ii) previous working experience (applicable to supervisors or equivalent ranks);
 - (iii) post held in the centre;
 - (iv) serving hours and shift patterns; and
 - (v) the date of commencement/termination of service.

4.7.2 The supervisor of the treatment centre is required to establish and maintain a comprehensive system of records, which the specified operator should also inspect and sign on a regular basis to ensure the proper functioning of the centre. During inspections, the Licensing Office may request the production of, and examine or take copies of, any record relating to the operation or management of the centre, or any other activities carried out in or in relation to the centre. Such records normally include the staff record mentioned in paragraph 4.7.1 and the following records -

- (a) Record of Residents, with particulars including –
 - (i) name (Chinese and English), sex, date of birth/age, Hong Kong Identity Card number and address;
 - (ii) name, address and telephone number of a relative or contact person (if any);
 - (iii) the date of admission and discharge;
 - (iv) history of drug abuse;
 - (v) record of each medical consultation or treatment arranged, clearly stating the date, time, particulars of the registered medical practitioner and details of the medicines prescribed;
 - (vi) record of accidents, illnesses or death (if any), and follow-up actions taken in that respect; and
 - (vii) money or property kept or stored on behalf of each resident by the treatment centre, with the written consent obtained from the resident. The record should include the amount of money and other property items kept, the dates of deposits, and the dates on which any money or property item is partially or wholly returned to, reclaimed or used by the resident.

(b) Log Book

Log book should be used by staff on duty to record important events happened in the centre, irregularities observed in or by individual residents (including the residents' physical, emotional and health conditions), follow-up actions on any accident, etc. The record should be signed by the staff concerned.

(c) Financial Record

The treatment centre should properly maintain an accounting system that clearly reflects its incomes from various sources (such as fee income, charitable funds, public funds and donations) and expenditures (such as staff salaries/allowances, works expenses and other charges).

(d) Record of Programmes and Activities

The treatment centre should maintain records of treatment and rehabilitation programmes and activities organised for the residents, including the date, time, type of activities, number of residents participated, staff responsible and other related information.

(e) Record of Visits

Records of visits to the treatment centre and/or to each resident by his guardian/parent/family members/relatives and referrer should be maintained.

(f) Record of Fire Drills

Each fire drill or fire alarm test conducted in the centre, and any action taken to remedy defects in the fire alarm system should be recorded.

(g) Record of Fire, Accidents and Emergencies

The treatment centre should maintain records of fire, accidents and other emergencies, including the date, time, details of the incident, residents affected, whether the guardian/parent/family members/relatives and referrer of each affected resident has been informed, and actions taken by the centre. The staff member who handles the incident should sign the record.

(h) Record of Complaints

Complaints or opinions made by residents or other persons relating to the management or operation of the centre, and the follow-up actions taken by the centre should be kept.

4.7.3 Statistical Record

The supervisor of the treatment centre shall compile monthly statistics for timely submission to the government departments concerned. The monthly statistics should include the following items –

- (a) the number of admissions, discharges and dropouts;
- (b) the rate of placement occupancy ^{Note 5}; and
- (c) the rate of completion of the treatment programme ^{Note 6}.

4.7.4 Other Records

- (a) Other records in connection with the operation and management of the treatment centre should be kept properly for easy reference and follow-up. Such records may include -
 - (i) correspondence with government departments and/or other agencies;
 - (ii) information in all forms delivered to the residents or the public; and
 - (iii) other records as directed by DSW or his representatives.
- (b) The supervisor of the treatment centre shall furnish, within the specified period, the Licensing Office with such other records as directed by DSW or his representatives.

4.8 Special Incident Report

In the event of a special incident [including unusual death/repeated injuries of residents, other incidents resulting in the death/serious injuries of residents, residents going missing and requiring police assistance, established/suspected abuse/infringement of residents in the centre, disputes in the centre requiring police assistance, serious medical/drug incidents, other special incidents affecting the operation of the centre/residents (e.g. suspension of power/water supply,

^{Note 5} The rate of placement occupancy refers to the number of places occupied, as compared with the capacity of the treatment centre.

^{Note 6} The rate of completion of the treatment programme refers to the number of residents who have undergone and fulfilled the requirements of the agreed residential treatment and rehabilitation programme in the centre, as compared with the number of residents discharged from the centre.

building defects or structural problems, fire outbreaks, floods/ landslips, unknown gas leakage, or other natural disasters, etc.), the treatment centre shall inform the Licensing Office as soon as possible and submit a Special Incident Report [(Appendix 2(g)] to the Licensing Office within 3 calendar days (including public holidays) after the occurrence of the special incident. Apart from the above-mentioned situations, the centre shall submit a Special Incident Report to the Licensing Office in a timely manner, depending on the nature and seriousness of the individual incidents.

CHAPTER 5

BUILDING AND ACCOMMODATION

5.1 General

- 5.1.1 All treatment centres shall comply with the relevant provisions of the Buildings Ordinance (Cap. 123) (“BO”) and its subsidiary regulations, as well as any requirement made by the Building Authority (“BA”), or the Housing Authority where appropriate, relating to safety and health standards for buildings. Plans of any new building to be erected for the operation of a treatment centre shall be formally submitted to the BA, or the Housing Authority where appropriate, for approval, and consent to the commencement of works shall be obtained prior to construction.
- 5.1.2 Each case shall be considered on its merits after full consideration of the circumstances. Nothing contained herein should be taken as in any way derogating from the powers of the BA, or the Housing Authority, where appropriate, to secure reasonable and adequate safety and health standards of the buildings.
- 5.1.3 As the subject matters are often related to complicated technical issues that may be difficult to overcome, the applicant is strongly advised to enlist the services of an Authorized Person (“AP”) (an architect, engineer or surveyor registered under the BO) at the early stage to avoid unnecessary waste of time and effort resulting from unsuccessful applications.
- 5.1.4 Where alteration and addition works, including works involving the structure and/or means of escape of a building, are to be carried out, formal submission of plans for the proposed works to the BA, or the Housing Authority, where appropriate, by an AP/Registered Structural Engineer (“RSE”) is required unless such works are exempted under Section 41 of the BO. If the works fall within the scope of the Minor Works Control System (“MWCS”), such works may proceed under the simplified requirements of the MWCS. It is strongly recommended that the advice of an AP/RSE be sought in advance. Registers of AP and RSE under the BO are available on the Buildings Department’s (BD) website (www.bd.gov.hk) or at its office for viewing.

5.2 Restriction on Premises

No part of a treatment centre shall be located in or under any structure built without the approval and consent of the BA, or the Housing Authority where appropriate, unless exempted under the BO or carried out under the MWCS; or operated in contravention of the provisions of the relevant Outline Zoning Plan and the permitted user conditions of any government lease or licence issued by the Land Authority.

5.3 Structural Design

5.3.1 The minimum imposed loads of the premises shall not be less than 2.0 kPa for dormitory areas and 2.5 kPa for living/recreational areas in accordance with the Code of Practice for Dead and Imposed Loads 2011 issued by the BD and any subsequent amendments or revisions thereto.

5.3.2 The increased loading, caused by heavy equipment/plant or internal alterations (such as raised flooring and new partition walls, or any other permanent construction works) that may affect the structure of the building shall be adequately justified by an AP/RSE to demonstrate that the premises is structurally capable of withstanding the imposed load. The structural justification shall be submitted to the BA, or the Housing Authority where appropriate.

(a) With regard to raised screeds, the AP/RSE should either confirm that the screed was laid under his supervision, or core tests on the material, type, density and thickness should be carried out to ensure compatibility with any supporting structural calculations.

(b) With regard to new partition walls or any other permanent constructions, the type, size, thickness and density of the construction materials, along with the manufacturer's catalogues and specifications of any plant and equipment, should be clearly provided to demonstrate the correct specific/operating weight used to facilitate the checking of structural calculations.

5.3.3 Structural justification may not be required if the proposed building works are carried out under the simplified requirements of the MWCS of the BD.

5.3.4 The premises shall be kept in sound structural condition.

5.4 Fire Resisting Construction

5.4.1 Every treatment centre shall be designed and constructed in accordance with the Code of Practice for Fire Safety in Buildings 2011 issued by the BD and any subsequent amendments or revisions thereto.

5.4.2 Some of the general requirements on fire resisting construction include -

- (a) Every element of construction within each fire compartment, and every fire barrier of each fire compartment should have a fire resistance rating (“FRR”) of not less than 60 minutes.
- (b) Every treatment centre should be separated from other parts of the building of different uses by fire barriers having the longer FRR of the respective usage categories.
- (c) The kitchen in a treatment centre shall be separated from other parts of the centre premises by fire barriers having an FRR of not less than 60 minutes. The door of the kitchen shall have an FRR of not less than 60 minutes, and shall be self-closing and kept closed at all times.
- (d) If additions or alterations to fire-resisting construction are involved, the applicant should submit a form and supporting test/assessment reports prepared by an AP/RSE in accordance with the Practice Notes for APs, RSEs and Registered Geotechnical Engineers (“PNAP”) APP-13 to the BA, or the Housing Authority, where appropriate, to certify the adequacy of fire resisting construction. The form and reports are available on the BD’s website at www.bd.gov.hk. Submission of such form and reports is not required if PNAP ADM-20 is applicable for the fire-resisting construction.

5.5 Means of Escape

5.5.1 Every treatment centre shall be provided with adequate exits and exit routes in accordance with the Code of Practice for Fire Safety in Buildings 2011 issued by the BD and any subsequent amendments or revisions thereto.

5.5.2 The maximum occupant capacity permitted by the means of escape provisions in every room, fire compartment, floor of a building, or the building as a whole at any one time is restricted to that stipulated in the Code of Practice for Fire Safety in Buildings 2011. Besides, an adequate number of exit routes and exit staircases of the required width shall be provided for every floor and for the whole building. It follows that if, as a result of the operation of a treatment centre, the exit routes or exit staircases provided cannot accommodate the occupant capacity, the BD will recommend the licensing authorities to reject the application. In assessing occupant capacity, applications in respect of premises located within the same building will be processed on a first-come-first-served basis.

5.5.3 Some of the general requirements on means of escape include –

- (a) All exit routes shall have a minimum width of not less than 1 050 mm, and greater widths may be required depending on the total occupant capacity of the entire centre. The exit doors shall each have a minimum clear width of not less than 750 mm for an occupant capacity of 30 persons or fewer; 850 mm with a minimum total width of 1 750 mm for an occupant capacity between 31 and 200 persons; and 1 050 mm with a minimum total width of 2 500 mm for an occupant capacity between 201 and 300 persons. All means of escape shall be kept free from obstruction.
- (b) Every part of an exit route should have a clear headroom of not less than 2 000 mm.
- (c) Where the occupant capacity of individual rooms or of every storey of a treatment centre exceeds 30 persons, at least 2 exits should be provided. Every door across exit routes should open in the direction of exit, or have a transparent upper view panel if constructed to open both ways. No door opening should at any part of its swing reduce the minimum required width of the exit route.

- (d) If it is necessary to secure an exit door against entry from outside, the locking device should be of the type that is capable of being readily opened from the inside without the use of a key. The locking device may be electrically operated, but it should be released automatically upon power failure or upon actuation of a fire alarm signal by the fire service installation(s) designed and installed to the satisfaction of the Director of Fire Services. A local manual override should also be provided on the inside near the exit door for people to gain access to an exit route without the use of a key. A push plate, push bar or a single-action lever handle should not be encased when installed on the exit door.
- (e) All fire-rated doors should have a self-closing device and be kept closed at all times.
- (f) All exit routes shall lead directly to a street, and the staircase enclosure on G/F shall be continued on G/F as to separate it from the remainder of the building.
- (g) Where the direction of travel from an exit door of a room to a required staircase is possible in one direction only (i.e. a dead end), the dead-end travel distance is limited to 12 m from the room to the protected exit or a point from which travel in different directions to 2 or more protected exits is available. In a storey served by two or more protected exits or points of discharge to an ultimate place of safety, the maximum travel distance (including any dead-end travel distance) is limited to 30 m, or 45 m if along balcony approach.
- (h) If the discharge point of the exit route to the ultimate place of safety is so sited that it adjoins another exit route or other accommodation, the walls enclosing the exit route should return along the frontage of the final discharge, or project from the frontage, for a distance of not less than 450 mm, provided that any return should not reduce the effective width of the exit route.
- (i) The occupant capacity of a treatment centre should be calculated based on the type of accommodation set out in Table B1 of the Code of Practice for Fire Safety in Buildings 2011, or as determined by the BA.

- (j) The adoption of fire engineering approach in accordance with the Code of Practice for Fire Safety in Buildings 2011 may be considered on a case-by-case basis.

5.6 Lighting and Ventilation

- 5.6.1 Every room used or intended to be used as an office or for habitation should have a height not less than 2.5 m measuring vertically from the floor to the ceiling, or not less than 2.3 m measuring vertically from the floor to the underside of any beam.
- 5.6.2 Every room used for habitation or as an office or a kitchen in a treatment centre shall be provided with natural lighting and ventilation. Such natural lighting and ventilation shall be provided by means of one or more windows facing the external air (as defined in Regulation 31 of the Building (Planning) Regulations), having an aggregate superficial area of glass of not less than one-tenth of the floor area of the room, and which can, to an extent at least equal in aggregate to one-sixteenth of the floor area of the room, be openable in accordance with Regulation 30 of the Building (Planning) Regulations.
- 5.6.3 Every room containing a soil fitment or waste fitment in a treatment centre shall be provided with a window facing the open air (as defined in Regulation 2 of the Building (Planning) Regulations), having an aggregate superficial area of glass of not less than one-tenth of the floor area of the room, and which can, to an extent of not less than one-tenth of the floor area of the room, be opened directly into the open air in accordance with Regulation 36 of the Building (Planning) Regulations.
- 5.6.4 Exemption from natural lighting and ventilation in kitchens, ancillary offices and toilets may be given on the condition that artificial lighting and mechanical ventilation of not less than 5 air changes per hour are provided to the satisfaction of the BA.
- 5.6.5 Where a room-sealed gas water heater is installed in a bathroom or in any other place in the centre, an adequate aperture in an external wall with direct access to the external air shall be provided to the satisfaction of the BA.

5.7 Provision of Sanitary Fitments

- 5.7.1 All sanitary fitments, plumbing, drainage works and materials shall comply with the provisions of the Building (Standards of Sanitary Fitments, Plumbing, Drainage Works and Latrines) Regulations.
- 5.7.2 The number of watercloset fitments, lavatory basins and baths or showers provided shall be not less than the numbers specified below -

No. of persons in the residential building	No. of watercloset fitments	No. of lavatory basins	No. of baths or showers
1 to 8 (inclusive)	1	1	1
More than 8	1 plus 1 for every 12 persons (or part thereof) over 8		

CHAPTER 6

FIRE SAFETY

6.1 General

All treatment centres are subject to inspection by the Fire Services Department (“FSD”) and should comply with any recommendations made by the FSD regarding fire safety and precautionary measures.

6.2 Fire Safety Requirements

6.2.1 For centres not exceeding three storeys in height (the FSD may consider waiving some requirements based on the merits/constraints of individual treatment centres) -

- (a) a manual fire alarm system should be installed;
- (b) emergency lighting should be provided throughout the entire building and all exit routes leading to ground level;
- (c) sufficient directional and exit signs should be provided to ensure that all exit routes from any floor within the building are clearly indicated;
- (d) portable fire extinguishers, preferably dry powder type, and fire blankets should be provided as required by the Director of Fire Services;
- (e) all electric wiring supplying electricity shall be run in metal conduit and be securely fixed to walls/floors;
- (f) fire safety precautions as detailed in section 6.4 should be observed;
- (g) battery-powered smoke detectors should be installed in sleeping accommodation; and
- (h) for centres that are remotely situated with no emergency vehicular access and/or water supply for fire-fighting, a hose reel system with a 2 m³ water tank should be provided.

6.2.2 For new centres exceeding three storeys in height or forming part of a major development/complex -

- (a) fire service installations and equipment shall be provided in accordance with the current requirements as specified in paragraph 4.31 or 4.32 of the Code of Practice for Minimum Fire Service Installations and Equipment; and
- (b) where emergency vehicular access and/or water supply for fire-fighting are not available, enhanced fire safety requirements may be prescribed by the Director of Fire Services.

6.3 Additional Requirements

6.3.1 All fire service installations and equipment installed in the centre premises shall be kept in efficient working order at all times, and shall be maintained, inspected and certified at least once every 12 months by a Registered Fire Service Installations Contractor, who is required to submit the “Certificate of Fire Service Installations and Equipment” (“Form FS 251”) to the Director of Fire Services. In addition, the specified operator shall also submit a copy of the FS 251 to DSW as proof of compliance.

6.3.2 Any works concerning fixed electrical installations in the treatment centre, including installation, inspection, testing and issue of certificates, shall be carried out by Registered Electrical Contractors (“RECs”) and Registered Electrical Workers (“REWs”). On completion of the electrical works and prior to connection for use, the RECs and REWs shall issue a Work Completion Certificate (Form WR1) to the owner of the fixed electrical installations in the centre, and shall submit to DSW a copy of the certificate confirming compliance with the requirements of the Electricity Ordinance (Cap. 406). If the approved loading of the low-voltage fixed electrical installations in the treatment centre exceeds 100 amperes (single- or three-phase), the centre shall arrange for inspection, testing and certification (Form WR2) of the installations by an REC at least once every 5 years. The certificate shall be re-issued and submitted to DSW every 5 years.

- 6.3.3 All gas installations or alteration works at the centre premises must be undertaken by a Registered Gas Contractor in accordance with the Gas Safety Ordinance (Cap. 51). A copy of the certificate of compliance/completion shall be submitted to DSW once available as proof of compliance with the gas safety regulations and relevant codes of practice for using Towngas or liquefied petroleum gas (“LPG”). If piped gas supply, Towngas or LPG central supply is already available at the centre premises, it should be used to supply all gas equipment. Only when piped gas supply is not available should consideration be given to using individual LPG cylinders stored in a purpose-designed chamber (in accordance with the latest edition of “Gas Utilisation Code of Practice GU06 – LPG Installations for Catering Purposes in Commercial Premises” issued by the Gas Authority).
- 6.3.4 Gas appliances installed in the centre should be equipped with flame failure device. Gas water heaters should be of the room-sealed balanced flue type. Newly purchased domestic gas appliances should bear a “GU” mark, signifying approval by the Gas Authority of the Electrical and Mechanical Services Department for import/manufacture/sale. In addition, all gas equipment should be inspected/maintained annually by a Registered Gas Contractor to ensure safety. Documentary proof of continuing annual inspection/maintenance shall be submitted with any application for renewal of licence.

6.4 Fire Safety Precautions

- 6.4.1 No cooking with a naked flame shall be permitted inside the centre premises other than in the kitchen.
- 6.4.2 Where gas appliances are installed –
- (a) the manufacturers’ users instructions should be read carefully before using the gas appliances to ensure safe operation, including gas ignition, etc.; and
 - (b) liaison with the Registered Gas Contractor should be maintained for regular inspections of the gas appliances as prescribed in paragraph 6.3.4 and for the provision of safety advice on gas-related matters.

- 6.4.3 All staff of the treatment centre shall be conversant with potential fire hazards and the actions to be taken in case of a fire, e.g. the use of fire-fighting equipment, evacuation procedures and routes, etc. Any staff detecting a fire shall –
- (a) sound the alarm to warn all other staff, residents and visitors;
 - (b) ensure that the fire is reported to the FSD by dialing the 999 hotline; and
 - (c) immediately evacuate residents (especially those requiring assistance) together with other staff members.
- 6.4.4 A nightly patrol shall be conducted with a proper record to ensure that –
- (a) all cooking/heating appliances are switched off;
 - (b) all doors leading to common corridors are closed;
 - (c) there is no obstruction to fire service installations and equipment;
 - (d) there is no obstruction to exit routes; and
 - (e) any door along means of escape that is locked is openable in the direction of egress without the use of a key in an emergency.
- 6.4.5 Air heaters shall not be used for drying clothes, and combustible materials shall not be placed in their close vicinity.
- 6.4.6 If gas leakage is suspected, the staff concerned should –
- (a) extinguish all naked flames;
 - (b) turn off the gas appliances and the main valve;
 - (c) not operate electrical switches;
 - (d) open doors and windows; and
 - (e) immediately call the gas supplier's emergency number using a telephone remote from the affected area. The gas supply shall not be turned on again until it has been inspected by staff of the gas supplier or a registered gas contractor.

- 6.4.7 If gas continues to leak after the switches have been turned off, or the smell of gas persists, staff shall immediately call emergency services by dialing 999, contact the gas supplier using a telephone remote from the affected area, evacuate residents to a safe location, and await the arrival of emergency services.
- 6.4.8 The centre shall be under the close supervision of the specified operator or any person designated by him at all times.
- 6.4.9 Means of communication with the FSD shall remain available at all times, and the specified operator, or a person designated by him, shall be responsible for reporting any fire or emergency.
- 6.4.10 Fire drills shall be conducted at least annually. A roll call shall be taken to ensure all persons are accounted for. An evacuation plan shall be drawn up and be submitted to DSW as and when required.
- 6.4.11 Any intended storage or use of dangerous goods, as defined in the Dangerous Goods Ordinance (Cap. 295), should be notified to the Director of Fire Services.

CHAPTER 7

EQUIPMENT AND FACILITIES

7.1 Guide on Basic Furniture and Equipment

- 7.1.1 Every treatment centre should, with due regard for the interests and safety of residents, provide appropriate facilities, furniture and equipment of a reasonable standard.
- 7.1.2 All facilities, furniture and equipment should be properly maintained, replaced and refurbished.
- 7.1.3 There should be at least one first aid box on each floor, or in each separate unit of the centre if such premises occupy different and non-adjointing units on the same floor. The first aid box should contain a sufficient stock of first aid supplies such as plastic gloves, bandages, medicated plasters, dressings, a mild antiseptic solution, ointment suitable for burns and scalds, and ointment suitable for stings and bites, etc.

CHAPTER 8

STAFFING

8.1 General

The specified operator should ensure that there are appropriate staff and/or skeleton volunteers to perform all the jobs of the treatment centre according to the size and enrolment of the centre. Staff and/or skeleton volunteers should be on duty in the centre for maintenance of basic safety and necessary care to residents at any time.

8.2 Guiding Principles for Staffing

8.2.1 Specified Operator

Each treatment centre must have a specified operator, to whom a licence or certificate of exemption has been issued or renewed under the Ordinance. The specified operator, who operates or exercises control over the management of a treatment centre, is responsible for -

- (a) manpower planning, staff employment and/or volunteer recruitment;
- (b) maintenance of staff records;
- (c) furnishing of plans or diagrams of the premises;
- (d) furnishing of fee charging details;
- (e) informing the residents in writing of any proposed increase in the fee or charge for any service or commodity at least 30 days in advance of the effective implementation date; and
- (f) ensuring appropriate guidelines are established in accordance with this Code of Practice and properly followed.

(Where the specified operator is also responsible for the management of the day-to-day operation of the centre, he should be responsible for the duties specified for the supervisor in paragraph 8.2.2 as well.)

8.2.2 Supervisor

A supervisor means any person responsible for the management of the day-to-day operation of the treatment centre, and he is responsible for -

- (a) overall administration of the treatment centre;
- (b) planning, organising and implementing programmes and activities to meet the needs of residents in the centre;
- (c) maintaining an acceptable standard of cleanliness, tidiness and sanitation;
- (d) deploying staff to meet the operational needs of the centre, and handling other staff matters;
- (e) dealing with all emergency situations;
- (f) maintaining up-to-date records as stipulated in section 4.7 of this Code of Practice;
- (g) reporting information on infectious diseases as stipulated in paragraphs 4.5.7 and 4.5.8 of this Code of Practice; and
- (h) providing information concerning the centre as required by DSW.

8.2.3 The specified operator shall decide the staffing composition, having regard to the operational need of the treatment centre. The following examples are not exhaustive, but are common in the treatment centre -

- (a) Social Worker

A social worker means any person whose name appears on the register of social workers kept under the Social Workers Registration Ordinance (Cap. 505). Social workers are responsible for rendering professional input through a course of well-structured and goal-oriented activities geared towards the interests of residents.

(b) Peer Counsellor

A peer counsellor means any rehabilitated person who is responsible for rendering daily and personal care, as well as advice, to residents in the centre to facilitate their rehabilitation.

(c) Ancillary Worker

An ancillary worker means any person, other than a social worker or peer counsellor, employed/recruited by the specified operator. The ancillary worker may broadly refer to a cook, domestic assistant, driver, watchman, welfare worker, or clerk, etc., and is responsible for carrying out duties relating to the daily care of residents and/or clerical support to the centre.

- 8.2.4 Owing to differences in treatment approaches, treatment centres may establish different staffing composition. For example, treatment centres adopting a religious approach may arrange religious personnel to assist in the implementation of the treatment and rehabilitation programmes, whereas treatment centres adopting a “family approach” may likely engage volunteers to assist.

8.3 Conditions of Service

8.3.1 Hours of Work

The specified operator shall arrange staff to work on shift so as to keep the centre manned around the clock. The number of working hours is usually agreed upon in the contract of employment between the employer and employee. If volunteers constitute partly or wholly the centre staff, the number of service hours should also be mutually agreed between the specified operator and the volunteers.

8.3.2 Sexual Conviction Record Check

To uphold good practice, all employees / skeleton volunteers / self-employed persons involved in the implementation of treatment and rehabilitation programmes of a treatment centre should undergo the Sexual Conviction Record Check implemented by the Security Bureau through the Hong Kong Police Force prior to employment or renewal of employment contract.

8.3.3 Sick Leave

The employees' entitlement to paid sick leave should be in line with Part VII of the Employment Ordinance (Cap. 57).

8.3.4 Maternity Leave / Paternity Leave

Female/male employees entitled to maternity/paternity leave should be given, by the specified operator, such leave and, where applicable, salary payment for such leave at a rate as specified in Part III/IIIA of the Employment Ordinance respectively.

8.3.5 Statutory Holidays and Annual Leave

The specified operator should grant statutory holidays and annual leave to all employees in accordance with the terms stipulated in Part VIII and Part VIIIA of the Employment Ordinance.

8.3.6 Termination of Service

- (a) Subject to the Employment Ordinance and the terms of the relevant contract, either party to a contract of employment may at any time terminate the contract by giving the other party notice, orally or in writing, of his intention to do so. The length of notice required to terminate a contract of employment should be in accordance with Part II of the Employment Ordinance.
- (b) The specified operator should comply with Part VA and Part VB of the Employment Ordinance to ensure that employees are entitled to severance payment and long service payment.

8.3.7 Insurance

All employees should be covered by employees' compensation insurance in accordance with the Employees' Compensation Ordinance (Cap. 282).

8.3.8 Mandatory Provident Fund

The specified operator shall comply with the stipulations regarding the establishment of mandatory provident fund for the centre employees in the Mandatory Provident Fund Schemes Ordinance (Cap. 485). Enquiries in relation to this fund can be made to the Mandatory Provident Fund Schemes Authority.

8.3.9 Others

Employment policies should comply with the provisions in the Employment Ordinance. Enquiries on matters related to personnel or employment can be made to the Labour Relations Division of the Labour Department.

8.4 Staff Training

8.4.1 All staff of the treatment centre should preferably have a basic knowledge of first aid. It is also desirable that at least one staff member has completed a course in first aid and holds a valid first aid certificate.

8.4.2 The treatment centre should arrange training to enhance the knowledge and skills of staff in providing treatment and rehabilitation services to drug dependent persons. Such training may cover different topics such as managing drug withdrawal symptoms, preventive measures against HIV infection, approaches to eradicating psychological dependence on drugs, and knowledge of abused drugs, etc.

8.5 Staff Changes

8.5.1 The specified operator shall inform DSW in writing within 14 days of any change in the supervisor, or an equivalence, of the treatment centre.

8.5.2 The specified operator, or any person designated by him, shall, if so requested in writing by DSW, submit to DSW a list of employees and/or skeleton volunteers within 14 days.

8.6 Importation of Staff

The specified operator shall observe the terms and conditions of employment for staff imported under the Enhanced Supplementary Labour Scheme, and such terms and conditions shall be stipulated in the employment contract. The specified operator may be legally liable for any violation of the immigration or labour rules and regulations in relation to the imported staff. Enquiries on such matters can be made to the Labour Department.

CHAPTER 9

SOCIAL AND JOB SKILL TRAINING

9.1 Drug Treatment and Rehabilitation Programmes and Activities

- 9.1.1 Owing to diverse backgrounds, different treatment centres have adopted different approaches to providing treatment and rehabilitation services to residents. Some common (though not exhaustive) examples include the religious therapeutic approach and the family therapeutic model. Work therapy is also given greater significance in the treatment process. The SWD's policy is to let treatment centres continue exercising autonomy in choosing their own appropriate approaches, programmes and activities to provide treatment and rehabilitation services to residents. When planning such programmes and activities, treatment centres should observe the following principles.
- 9.1.2 The programmes and activities organised for residents, whether in groups or individually, should be well-structured, goal-oriented and geared towards the needs of residents and the ultimate goal of reintegrating them into the community. Residents should be briefed on these programmes and activities upon admission. The schedule of such programmes and activities should also be clearly displayed on notice boards for residents' information.
- 9.1.3 Upon admission, centre staff should, as far as possible, explain the treatment and rehabilitation programmes to residents' guardian/parent/family members/relatives and referrers to foster better communication, and facilitate their participation in the residents' rehabilitation process.
- 9.1.4 If any programme or activity requires coaching or supervision by trained personnel to ensure safe implementation, the specified operator shall ensure that people possessing relevant qualifications are assigned to conduct the programme or activity, or to supervise the process.

- 9.1.5 The centre should, with due consideration of the treatment and rehabilitation progress of individual residents, involve their guardian/parent/family members/relatives throughout the treatment and rehabilitation process as much as possible to enhance the residents' support network. To this end, the centre may engage the residents' guardian/parent/family members/relatives in various goal-oriented programmes and activities.

9.2 Outdoor Activities

Where the centre programmes include outdoor activities, the centre should formulate operational guidelines and procedures for different types of outdoor activities to ensure the safety of the residents taking part in such activities. The following points should be taken into consideration when drawing up the guidelines and procedures –

- (a) Adequate manpower;
- (b) Staff responsible should be familiar with the route to, and the surrounding environment of the spot chosen for the outdoor activity. A site visit to the spot before the event is desirable;
- (c) Safety considerations regarding the arrangement of transportation;
- (d) Formulating pre-contingency and ad hoc contingency plans in case of weather changes, such as tropical typhoons, and other emergencies, including residents falling ill, loss of contact, outbreaks of fire, and food and water shortages;
- (e) Ensuring the proper handling of food and hygiene;
- (f) Arranging staff or other persons with the experience and skills necessary for conducting the activity;
- (g) Ensuring the availability of first aid boxes with sufficient stocks of first aid supplies; and
- (h) Considering relevant safety measures for specific outdoor activities, such as hiking, cycling, camping, swimming, other water sports, etc.

9.3 Job Skill Training

9.3.1 Where any job skill training venue is set up on any centre premises, the specified operator shall make sure that every practicable measure is adopted to safeguard the occupational safety and health of all persons participating in or conducting such job skill training on such premises.

9.3.2 For example, the specified operator should, as far as practicable, ensure that –

- (a) machines are properly maintained with the dangerous parts effectively guarded;
- (b) no person under 18 years old cleans the machine while any of its dangerous parts is in operation;
- (c) platforms or pits are securely fenced to prevent any person from falling;
- (d) dangerous goods are properly stored;
- (e) means of escape are safe and free from obstruction, with illuminated exit signs installed at all exits;
- (f) training venues are kept clean and provided with adequate ventilation and lighting;
- (g) training venues are provided with effective drainage installations to prevent floor wetness;
- (h) separate first aid facilities are provided and maintained in each training venue. Such facilities shall be clearly marked “FIRST AID” and contain the items specified in Schedule 2 of the Occupational Safety and Health Regulation (Cap. 509A). [The said Schedule, version dated 28 November 2024, is attached at Appendix 1(e)];
- (i) where manual handling operations that may create safety and health risks are practicably unavoidable, appropriate steps are taken to reduce the safety and health risks to the lowest level that is reasonably practicable. In general, such steps may include -
 - (i) conducting a preliminary risk assessment of the operations;

- (ii) providing relevant information concerning the load to the residents/staff concerned;
 - (iii) assessing the competencies of the residents/staff in undertaking such operations;
 - (iv) providing mechanical aids and protective equipment for use by the residents/staff while such operations are being performed;
 - (v) assigning an adequate number of residents/staff to perform such operations; and
 - (j) any dangerous occurrence (such as fire) or any accident causing death or serious bodily injury at the training venue is reported in writing to an occupational safety officer of the Labour Department and the Licensing Office within 24 hours of the occurrence.
- 9.3.3 Before joining any job skill training programme, or changing the type of training, a resident should first be given an orientation to familiarise themselves with the situation, followed by appropriate supervised training.
- 9.3.4 Relevant safety instructions, written in simple and clear language, should be properly posted in conspicuous spots in all training venues and near machines.
- 9.3.5 The provisions in the Occupational Safety and Health Ordinance (Cap. 509) and its subsidiary legislation shall be complied with.
- 9.3.6 The specified operator should make reference to the Factories and Industrial Undertakings Ordinance (Cap. 59) and its subsidiary legislation when formulating corresponding safety standards appropriate to their specific job skill training situations. There are prevailing statutes that prescribe safety measures for, say, woodworking machinery, the guarding and operation of machinery, noise at work, protection of eyes, etc.
- 9.3.7 The specified operator may approach the Occupational Safety and Health Branch of the Labour Department for assistance and advice to ensure the safety of the machines installed in any job skill training venue on the centre premises, and the adequacy of measures adopted to safeguard the occupational safety and health of the residents and staff therein.

9.4 Aftercare Services

- 9.4.1 After the discharge of a resident, the centre may provide necessary services and support to the resident and his guardian/parent/family members/relatives to facilitate mutual adjustment and the resident's reintegration into the community.
- 9.4.2 An aftercare service plan should include a specific timeframe, and specify the actions to be taken by centre staff and the resident to work towards the agreed objectives.

CHAPTER 10

VISITS BY PARENTS AND GUARDIANS

10.1 Guiding Principles for Visits

- 10.1.1 The specified operator is responsible for ensuring that opportunities and suitable facilities are provided for regular visits to residents in the centre by their guardian/parent/family members/relatives.
- 10.1.2 The treatment centre should have a statement outlining the visiting schedule, facilities available to residents and visitors, as well as other arrangements connected with visits. Such a statement should be brought to the attention of residents and their guardian/parent/family members/relatives, and displayed in conspicuous spots in the centre.

CHAPTER 11

SECURITY MEASURES

11.1 Practicable Measures to Ensure Smooth Operation and Drug-free Environment in the Centres

- 11.1.1 The specified operator should adopt any lawful, reasonable and practicable measure necessary to ensure the smooth operation of the centre and to keep it free from illicit drugs. Such measures should be specified by the centre in its admission rules. In respect of any measure which may interfere with a resident's rights, the centre should obtain the resident's prior consent to the carrying out of all such measures. To ensure that such consent is given voluntarily, the centre shall observe the procedures stipulated in paragraphs 4.1.2 and 4.1.3 of this Code of Practice.
- 11.1.2 The treatment centre should set any lawful and reasonable rule or regulation to protect residents from undesirable external interference and to exercise effective control over the centre premises. These rules or regulations may cover aspects including the reception of visitors and the enforcement of security measures.
- 11.1.3 The treatment centre should, having regard to the preliminary plan for the individual resident to eradicate drug dependence, prepare, jointly with the resident concerned, a detailed treatment plan that may help the resident resist undesirable external interference while undergoing treatment or rehabilitation. Reasonable follow-up arrangement, as agreed mutually, may be undertaken if the resident concerned is unable to comply with the treatment plan.
- 11.1.4 The treatment centre should clearly explain the centre's rules and regulations, which aim at ensuring a drug-free environment on the centre premises, to residents and their guardian/parent/family members/relatives, and, where appropriate, friends, during individual, group, or mass treatment programmes. The centre should advise residents not to engage in any behaviour related to illicit drugs, including the unlawful use of such drugs, and inform them of the possible consequences of breaching such rules.
- 11.1.5 If the centre has reasonable grounds to believe that any resident has violated the Dangerous Drugs Ordinance (Cap. 134), for example by having in his possession any suspected illicit drug, the centre should report the case to the police for investigation.

CHAPTER 12

CONDUCT OF CENTRES

12.1 Service Ethics

- 12.1.1 The specified operator shall ensure that the primary objective of operating the treatment centre is to safeguard the best interests and well-being of residents.
- 12.1.2 The treatment centre should inform all residents of the rules and regulations of the centre, the possible consequences of non-compliance, as well as residents' rights and obligations.
- 12.1.3 Information in all forms delivered to residents or the public in relation to the treatment centre, including its objectives, service contents, facilities, staffing, charges, admission and discharge procedures, etc., shall be accurate and reflect the actual situation.
- 12.1.4 The specified operator should be vigilant against any abuse of staff-resident relationship by staff members in pursuit of personal gain.
- 12.1.5 The practice of social workers in the treatment centre should be consistent with the Code of Practice for Registered Social Workers issued under the Social Workers Registration Ordinance (Cap. 505).
- 12.1.6 If and when a service fee is required and a resident or prospective resident is experiencing financial constraints, the specified operator should consider referring the individual for necessary assistance and services as appropriate to ensure that he will not be denied timely services.

12.2 Rights and Welfare of Service Recipients

- 12.2.1 The treatment centre should formulate guiding principles and operational procedures to ensure that residents are treated in a manner compliant with the Personal Data (Privacy) Ordinance (Cap. 486) and the Hong Kong Bill of Rights Ordinance (Cap. 383).
- 12.2.2 The centre should arrange briefings, guidance or other forms of training to strengthen the staff's understanding of such guiding principles and operational procedures.

12.2.3 Privacy and Confidentiality

- (a) The centre shall protect and respect residents' right to privacy at all times. Its operations and practices shall be consistent with the provisions in the Personal Data (Privacy) Ordinance (Cap. 486) and shall not contravene any data protection principle, unless the operation or practice concerned (as the case may be) is required or permitted under the Personal Data (Privacy) Ordinance.
- (b) In the course of collecting personal data from a resident, his guardian/parent/family members/relatives and referrer, the centre should clearly inform them of the voluntary nature of providing the data, the purpose of collecting the data, how the data will be used, as well as the level of confidentiality.
- (c) Upon receiving a request for access to and/or correction of personal data, the centre should inform the requestor of the means to make such a request and render related assistance.
- (d) Publication of case material involving the personal data of a resident, his guardian/parent/family members/relatives and referrer shall require the respective individual's consent. The centre is still responsible for ensuring that such personal data are directly related to the purpose of collection and are not excessive in relation to that purpose.

12.2.4 Protection of Communication Contact

Every resident should be provided with basic facilities and adequate opportunities to maintain communication with his guardian/parent/family members/relatives and referrer. Communication in this context includes correspondence and telephone contacts, etc.

12.2.5 Complaints, Opinions, and Suggestions Raised by Residents

- (a) The centre should formulate procedural guidelines for handling complaints, opinions, or suggestions. The specified operator shall ensure that any complaints, opinions, and suggestions are properly handled and responded to.

- (b) The centre should inform residents, their guardian/parent/family members/relatives and referrers of their rights to raise complaints, opinions, and suggestions, the corresponding procedures, and the centre's way of handling such matters. The centre should also make the mechanism easy to use.

12.2.6 Protection of Residents' Property Rights

- (a) The operation and practice of the centre shall align with the principle of respecting residents' property rights. A policy statement and guiding principles on the protection of such rights shall be drawn up and observed by staff.
- (b) In accordance with the requirements set out in paragraph 4.7.2(a)(vii) of this Code of Practice, the centre should draw up operational guidelines on the proper handling of residents' personal belongings and property for staff compliance.
- (c) If any money or property is to be kept or stored on behalf of a resident by the centre, prior consent from the resident concerned shall be obtained. At the same time, the centre should explain to the resident his rights and the arrangements for reclaiming his money or property.
- (d) The centre shall devise precautionary measures to provide an environment in which the personal belongings and property of residents can be kept safe and secure.

12.2.7 Protection from Abuse

- (a) The specified operator is responsible for providing a secure environment to protect residents from any kind of abuse, including physical harm/abuse, psychological harm/abuse, neglect and sexual abuse.
- (b) The centre shall formulate effective measures and provide clear work guidelines and arrange training and supervision for staff, in order to enhance their knowledge for identifying, preventing and handling abuse incidents, and for protecting the residents from any form of abuse.
- (c) If the centre receives residents under the age 18 years, appropriate staff training should be provided to enhance the knowledge and skills of all types of staff at the centres about handling suspected child abuse cases. The centre shall follow the "Protecting Children from Maltreatment – Procedural

Guide for Multi-disciplinary Co-operation” ^{Note7} when suspected child abuse is identified, and properly arrange appropriate and timely treatment services or referral to social workers for follow-up in order to formulate appropriate welfare plans. The relevant procedural guide is available for download on the website of the SWD (<http://www.swd.gov.hk/tc>).

12.2.8 Freedom of Thought, Morality and Religion

- (a) Every resident shall have the right to freedom of thought, morality and religion. This right shall include the freedom to profess or adopt a religion or belief of his choice, and the freedom to manifest that religion or belief in worship, observance, practice and teaching.
- (b) No one shall use coercion to infringe upon residents’ freedom to profess or adopt a religion or belief of their own choice.

12.2.9 Right to Medical Care

- (a) The specified operator should ensure that every resident has the right to receive treatment for illness and access rehabilitation facilities, and is not deprived of this right.
- (b) The specified operator should take appropriate action to provide residents with necessary medical care to ensure full protection of their physical and mental health. In this connection, the treatment centre should draw up a contingency plan to address residents’ various urgent needs for medical care and attention.

12.2.10 Rights of Guardians

Every treatment centre should be aware of the rights of the parent/guardian of any juvenile resident. The centre should inform the parent/guardian of any such resident of any significant matter related to such resident throughout the treatment and rehabilitation process, and, where necessary, obtain his consent. If any such resident insists on an early discharge, the centre should make its best endeavour to discuss the discharge arrangements with the parent/guardian.

^{Note 7} As the Procedural Guide for Handling Child Abuse Cases is updated from time to time where necessary, the centre should follow the latest version issued by the SWD.

12.3 Preventive Measures Against Corruption

- 12.3.1 The specified operator should put in place measures to guard against corruption and bribery. All staff should be advised in writing that soliciting or accepting any advantage from any person in connection with any act related to the operation or business of the centre without permission constitutes an offence under section 9 of the Prevention of Bribery Ordinance (Cap. 201). “Advantage” is defined in section 2 of the Prevention of Bribery Ordinance to mean almost anything of value, except entertainment. Common examples of an “advantage” include any gift (both in cash and in kind), loan, fee, reward, commission, office, employment, contract, service, favour, etc. The centre should also issue notices to residents and their guardian/parent/family members/relatives, and, where appropriate, friends, to remind them not to offer any advantage to centre staff. Reports of suspected corrupt acts should be made immediately to the Independent Commission Against Corruption on 2526 6366.
- 12.3.2 The specified operator should draw up rules on conflict of interest for observance by all centre staff. A conflict of interest arises when the financial or other personal interests of a staff member (or his family members, relatives, close personal friends, or any person to whom he owes a favour) conflict or compete with the interests of the centre. If any conflict of interest cannot be avoided, for example, when a candidate for employment, a supplier of goods or services to the centre, or a drug dependent person seeking the centre’s service, is the family member, relative or close personal friend of a staff member, the staff member should declare the conflict to centre management and either refrain from dealing with the matter or follow the instructions of centre management. In dealing with any supplier of goods or services to the centre, a staff member should also avoid putting himself in a position of obligation by accepting frequent or lavish entertainment or accepting favours from the supplier.
- 12.3.3 The specified operator should promulgate clear policies on the admission and discharge of residents, precautionary measures for the security of personal belongings and property of residents, the enforcement of security measures in the centre, and the consequences of residents breaching the rules and regulations of the centre. These policies would be conducive to reducing corruption opportunities.

Social Welfare Department

Personal Information Collection Statement

Please read this notice before you provide any personal data¹ to the Social Welfare Department

Purposes of Collection

1. The personal data supplied by you will be used by the Social Welfare Department (SWD) to process your application or renewal for a Licence / Certificate of Exemption and related matters, including but not limited to monitoring and reviewing of services. The provision of personal data to SWD is voluntary. However, if you fail to provide the personal data requested of you, we may not be able to process your application.

Classes of Transferees

2. The personal data you provided may be made available to other government departments/ organisations/persons or under the circumstances listed below for the purposes mentioned in paragraph 1 above -

- (a) Other parties such as government bureaux /departments, if they are involved in-
 - (i) processing and/or assessing any application from you for the provision of service to you by the SWD;
 - (ii) service supervision and regulation of treatments centres, including handling of complaints;
- (b) Where such disclosure is authorised or required by law; or
- (c) Where you have given your prescribed consent to such disclosure.

Access to Personal Data

3. You have the right to request access to and correction of your personal data held by SWD in accordance with the Personal Data (Privacy) Ordinance, Cap 486. A fee is charged for supplying copies of personal data. Requests for access to and correction of personal data collected by SWD should be addressed to –

Post title : Social Work Officer
Office : Licensing Office of Drug Dependents Treatment Centres
Address : Unit 206, 2/F, THE HUB, 23 Yip Kan Street, Wong Chuk Hang, Hong Kong
Email : lodtcenq@swd.gov.hk

¹ Under the Personal Data (Privacy) Ordinance, Cap. 486, personal data means any data –

- (a) relating directly or indirectly to a living individual;
- (b) from which it is practicable for the identity of the individual to be directly or indirectly ascertained; and
- (c) in a form in which access to or processing of the data is practicable.

Guidance Notes on Submission of Building Plans

- (1) 6 sets of building plans should be submitted. Each plan should be duly signed by the applicant (if the applicant is an individual) or stamped with the company/organization chop (if the applicant is a company or an organization).
- (2) Name of treatment centre (in Chinese and English), address (in Chinese and English) and the date of submission should be clearly written on each plan.
- (3) Each plan should be drawn to the scale of 1:100 or 1:50. For part plan, 1:20 is also acceptable.
- (4) The area of the treatment centre to be licensed should be demarcated in red on the plan.
- (5) The use of various parts or areas of the centre premises should be specified. Detailed measurements in metric of all rooms, corridors, passages, exit doors, etc. should be shown. Rooms of the same use should be numbered.
- (6) Calculation of the area of all rooms, corridors, passages, etc. should be correctly shown.
- (7) The total net floor area of the proposed premises should be indicated.
- (8) The position of all columns, doors, windows, parapets, partitions, sanitary fittings, gates, fire service installations and equipment, false ceiling and all other fixture and fittings should be shown and annotated.
- (9) Number and locations of gas stoves and gas heaters, type of gas in use and location of LPG chamber (if applicable) should be indicated.
- (10) The height of ceiling of all parts of the centre premises, measuring vertically from floor should be shown.
- (11) Walls should be indicated by double lines.
- (12) The construction material of any proposed partition walls and exit doors should be indicated.
- (13) The shape of the centre premises shown in the plan should be same as the actual shape.
- (14) Should there be the need (e.g. complicated drawings requiring professional knowledge), the applicant should appoint a professional to prepare the plans.

Chapter : 455	Title : ORGANIZED AND SERIOUS CRIMES ORDINANCE	Gazette Number : 39 of 2025
Schedule: 1	Heading : OFFENCES RELEVANT TO DEFINITIONS OF "ORGANIZED CRIME" AND "SPECIFIED OFFENCE"	Version Date : 19/09/2025

[sections 2, 8 & 31]

Common law offences

1. Murder
2. kidnapping
3. false imprisonment
4. conspiracy to pervert the course of justice

Statutory offences

<u>Offence</u>	<u>Description*</u>
5. Import and Export Ordinance (Cap 60)	
section 6A	import or export of strategic commodities
section 6C	import of certain prohibited articles
section 6D(1) and (2)	export of certain prohibited articles
section 6E	carriage, etc. of prescribed articles in Hong Kong waters
section 18	importing or exporting unmanifested cargo
5A. Dutiable Commodities Ordinance (Cap. 109)	
section 17	restrictions on dealing with and possession of tobacco
(but only where the offence is committed in relation to tobacco)	(Added 39 of 2025 s. 16)
6. Immigration Ordinance (Cap 115)	
section 37D(1)	arranging passage to Hong Kong of unauthorized entrants
section 38(4)	carrying an illegal immigrant
section 42(1) and (2)	false statements, forgery of documents and use and possession of forged documents
7. Dangerous Drugs Ordinance (Cap 134)	
section 4(1)	trafficking in dangerous drugs
section 4A(1)	trafficking in purported dangerous drugs
section 6(1)	manufacturing a dangerous drug
8. Gambling Ordinance (Cap 148)	
section 5	operating, managing or controlling gambling establishment
section 7(1)	bookmaking
9. Societies Ordinance (Cap 151)	
section 19	penalties on an office-bearer, etc. of an unlawful society
section 21	allowing a meeting of an unlawful society to be held on premises

section 22	inciting etc., a person to become a member of an unlawful society
10. Money Lenders Ordinance (Cap 163) section 24(1)	lending money at an excessive interest rate
11. Crimes Ordinance (Cap 200) section 24 section 25 section 53 section 54 section 55 section 60 section 61 section 71 section 75(1) section 98(1) section 100(1) section 105 section 118 section 119 section 120 section 129 section 130 section 131 section 134 section 137 section 139	threatening a person with intent assaulting with intent to cause certain acts to be done or omitted causing explosion likely to endanger life or property attempt to cause explosion, or making or keeping explosive with intent to endanger life or property making or possession of explosive destroying or damaging property threats to destroy or damage property forgery possessing a false instrument with intent counterfeiting notes and coins with intent custody or control of counterfeit notes and coins with intent importation and exportation of counterfeit notes and coins rape procurement of person by threats procurement of person by false pretences trafficking to or from Hong Kong in persons control over person for purpose of unlawful sexual act or prostitution causing prostitution of person detention of person for unlawful sexual act or in vice establishment living on earnings of prostitution keeping a vice establishment
12. Theft Ordinance (Cap 210) section 9 section 10 section 11(1) section 16A section 17 section 18 section 18D section 19 section 23(1) and (4) section 24(1)	theft robbery burglary fraud (<i>Added 45 of 1999 s. 6</i>) obtaining property by deception obtaining a pecuniary advantage by deception procuring false entry in certain records false accounting blackmail handling stolen goods
13. Offences against the Person Ordinance (Cap 212) section 17	shooting or attempting to shoot, or wounding or striking with intent to do grievous bodily harm

14. Firearms and Ammunition Ordinance (Cap 238)
section 13
section 14
section 14A
possession of arms or ammunition without licence
dealing in arms or ammunition without a licence
manufacture or assembly of firearms from illicit component parts (*Added 20 of 2025 s. 19*)
- 14A. Trade Descriptions Ordinance (Cap. 362)
section 9(1) and (2)
section 12
(provided that for the purpose of this Ordinance, an offence under section 12 of the Trade Descriptions Ordinance does not include an offence relating only to false trade description)
section 22
(provided that for the purpose of this Ordinance, "offence under this Ordinance" referred to in section 22 of the Trade Descriptions Ordinance only means an offence under-
(a) section 9(1) or (2) of that Ordinance; or
(b) section 12 of that Ordinance, excluding any offence relating only to false trade description)
offences in respect of infringement of trade mark rights
import or export of goods bearing forged trade mark
being accessory to certain offences committed outside Hong Kong (*Added L.N. 11 of 2000*)
15. Drug Trafficking (Recovery of Proceeds) Ordinance (Cap 405)
section 25(1)
dealing with property known or believed to represent proceeds of drug trafficking (*Replaced 26 of 2002 s. 3*)
16. Organized and Serious Crimes Ordinance (Cap 455)
section 25(1)
dealing with property known or believed to represent proceeds of drug trafficking (*Replaced 26 of 2002 s. 3*)
17. Weapons of Mass Destruction (Control of Provision of Services) Ordinance (Cap 526)
section 4
providing services that assist the development, production, acquisition or stockpiling of weapons of mass destruction (*Added 90 of 1997 s. 15*)
18. Copyright Ordinance (Cap 528)
section 118(1), (4) and (8)
(provided that for the purpose of this Ordinance, "infringing copy" referred to in section 118(1) and (4) of the Copyright Ordinance does not include a copy of a work which is an infringing copy by virtue only of section 35(3) of that Ordinance and which was lawfully made in the country, territory or area where it was made)
offences relating to making or dealing with infringing copies

section 120(1), (2), (3) and (4)
(provided that for the purpose of this Ordinance, "infringing copy" referred to in section 120(1) and (3) of the Copyright Ordinance does not include a copy of a work which is an infringing copy by virtue only of section 35(3) of that Ordinance and which was lawfully made in the country, territory or area where it was made)

offences relating to making infringing copies outside Hong Kong (*Added L.N. 11 of 2000. Amended 15 of 2007 s.77*)

19. Chemical Weapons (Convention)
Ordinance (Cap. 578)
section 5

prohibition against using, developing or producing, acquiring, stockpiling, retaining, participating in the transfer of, engaging in military preparations, or in preparations of a military nature, intending to use, chemical weapons, or assisting, encouraging or inducing anyone to engage in any activity prohibited by the Convention on the Prohibition of Development, Production, Stockpiling and Use of Chemical Weapons and on their Destruction, signed at Paris on 13 January 1993 (*Added 26 of 2003 s. 44*)

20. Protection of Endangered Species of
Animals and Plants Ordinance (Cap.
586)

section 5
section 6

illegal import of a specimen of an Appendix I species
illegal introduction from the sea of a specimen of an Appendix I species

section 7
section 8

illegal export of a specimen of an Appendix I species
illegal re-export of a specimen of an Appendix I species

section 9

illegal possession or control of a specimen of an Appendix I species

section 11

illegal import of a specimen of an Appendix II or III species

section 12

illegal introduction from the sea of a specimen of an Appendix II species

section 13

illegal export of a specimen of an Appendix II or III species

section 14

illegal re-export of a specimen of an Appendix II or III species

section 15

illegal possession or control of a specimen of an Appendix II species (*Added 23 of 2021 s. 3*)

* Note: The short description of offences in this Schedule is for ease of reference only.

(Enacted 1994)

(Remark : The version in this Appendix, which is downloaded from the website of Hong Kong e-Legislation (HKeL) of the Department of Justice (www.elegislation.gov.hk), is solely for reference.)

Chapter: 599	Title: PREVENTION AND CONTROL OF DISEASE ORDINANCE	Gazette Number: L.N. 215 of 2022
Schedule: 1	Heading: INFECTIOUS DISEASES	Version Date: 11/11/2022

[sections 2 & 15]

1. Acute poliomyelitis (急性脊髓灰質炎(小兒麻痺))
2. Amoebic dysentery (阿米巴痢疾)
3. Anthrax (炭疽)
4. Bacillary dysentery (桿菌痢疾)
5. Botulism (肉毒中毒)
6. Chickenpox (水痘)
- 6A. Chikungunya fever (基孔肯雅熱) (*Added L.N. 35 of 2009*)
7. Cholera (霍亂)
8. Community-associated methicillin-resistant *Staphylococcus aureus* infection (社區型耐甲氧西林金黃葡萄球菌感染)
- 8A. Coronavirus disease 2019 (COVID-19) (2019冠狀病毒病) (*Added L.N. 46 of 2020*)
9. Creutzfeldt-Jakob disease (克雅二氏症)
10. Dengue fever (登革熱)
11. Diphtheria (白喉)
- 11A. Enterovirus 71 infection (腸病毒71型感染) (*Added L.N. 35 of 2009*)
12. (*Repealed L.N. 101 of 2011*)
13. Food poisoning (食物中毒)
14. *Haemophilus influenzae* type b infection (invasive) (乙型流感嗜血桿菌感染(侵入性))
15. Hantavirus infection (漢坦病毒感染)
- 15A. Invasive pneumococcal disease (侵入性肺炎球菌病) (*Added L.N. 2 of 2015*)
16. (*Repealed L.N. 23 of 2014*)
17. Japanese encephalitis (日本腦炎)
18. Legionnaires' disease (退伍軍人病)
19. Leprosy (麻風)
20. Leptospirosis (鈎端螺旋體病)
21. Listeriosis (李斯特菌病)
22. Malaria (瘧疾)
23. Measles (麻疹)
- 23A. Melioidosis (類鼻疽) (*Added L.N. 215 of 2022*)
24. Meningococcal infection (invasive) (腦膜炎雙球菌感染(侵入性))
- 24A. Middle East Respiratory Syndrome (中東呼吸綜合症) (*Added L.N. 104 of 2013*)

- 24B. Monkeypox (猴痘) (*Added L.N. 135 of 2022*)
25. Mumps (流行性腮腺炎)
- 25A. Novel influenza A infection (新型甲型流行性感) (*Added L.N. 23 of 2014*)
26. Paratyphoid fever (副傷寒)
27. Plague (鼠疫)
28. Psittacosis (鸚鵡熱)
29. Q fever (寇熱)
30. Rabies (狂犬病)
31. Relapsing fever (回歸熱)
32. Rubella and congenital rubella syndrome (風疹(德國麻疹)及先天性風疹綜合症)
33. Scarlet fever (猩紅熱)
34. Severe Acute Respiratory Syndrome (嚴重急性呼吸系統綜合症)
- 34AAA. (*Repealed L.N. 46 of 2020*)
- 34AA. (*Repealed L.N. 104 of 2013*)
- 34A. Shiga toxin-producing *Escherichia coli* infection (產志賀毒素大腸桿菌感染) (*Added L.N. 101 of 2011*)
35. Smallpox (天花)
36. *Streptococcus suis* infection (豬鏈球菌感染)
37. Tetanus (破傷風)
38. Tuberculosis (結核病)
39. Typhoid fever (傷寒)
40. Typhus and other rickettsial diseases (斑疹傷寒及其他立克次體病)
41. Viral haemorrhagic fever (病毒性出血熱)
42. Viral hepatitis (病毒性肝炎)
43. West Nile Virus Infection (西尼羅河病毒感染)
44. Whooping cough (百日咳)
45. Yellow fever (黃熱病)
46. Zika Virus Infection (寨卡病毒感染) (*Added L.N. 33 of 2016*)

(Remark: The version in this Appendix, which is downloaded from the website of Hong Kong e-Legislation (HKeL) of the Department of Justice (www.elegislation.gov.hk), is solely for reference.)

Chapter: 509A	Title: OCCUPATIONAL SAFETY AND HEALTH REGULATION	Gazette Number: 5 of 2023
Schedule: 2	Heading: ITEMS CONTAINED IN FIRST AID FACILITY	Version Date: 28/11/2024

[sections 17, 18 &19]

PART I

WORKPLACES AT WHICH THE NUMBER OF EMPLOYEES EMPLOYED IS LESS THAN 10

1. A copy of the leaflet, issued by the Commissioner, giving advice on first aid treatment.
2. At least 1 small sterilized unmedicated dressing for injured fingers.
3. At least 1 medium-sized sterilized unmedicated dressing for injured hands or feet.
4. At least 3 adhesive wound dressings of assorted sizes.
5. At least 1 triangular bandages of unbleached calico, the longest side of the bandage measures not less than 1.3 m and each of the other sides not less than 900 mm.
6. At least 1 roll of adhesive plaster (zinc oxide), approximately 25 mm wide and at least 2 m long.
7. At least 1 packet of absorbent cotton wool of 30 g.
8. A pressure bandage.
9. Safety pins.

PART II

WORKPLACES AT WHICH THE NUMBER OF EMPLOYEES EMPLOYED IS 10 OR MORE BUT LESS THAN 50

1. A copy of the leaflet, issued by the Commissioner, giving advice on first aid treatment.
2. At least 6 small sterilized unmedicated dressings for injured fingers.
3. At least 3 medium-sized sterilized unmedicated dressings for injured hands or feet.
4. At least 12 adhesive wound dressings of assorted sizes.
5. At least 2 triangular bandages of unbleached calico, the longest side of each bandage measures not less than 1.3 m and each of the other sides not less than 900 mm.
6. At least 1 roll of adhesive plaster (zinc oxide), approximately 25 mm wide and at least 4.5 m long.
7. At least 3 packets of absorbent cotton wool each of 30 g.
8. A pressure bandage.
9. Safety pins.

PART III

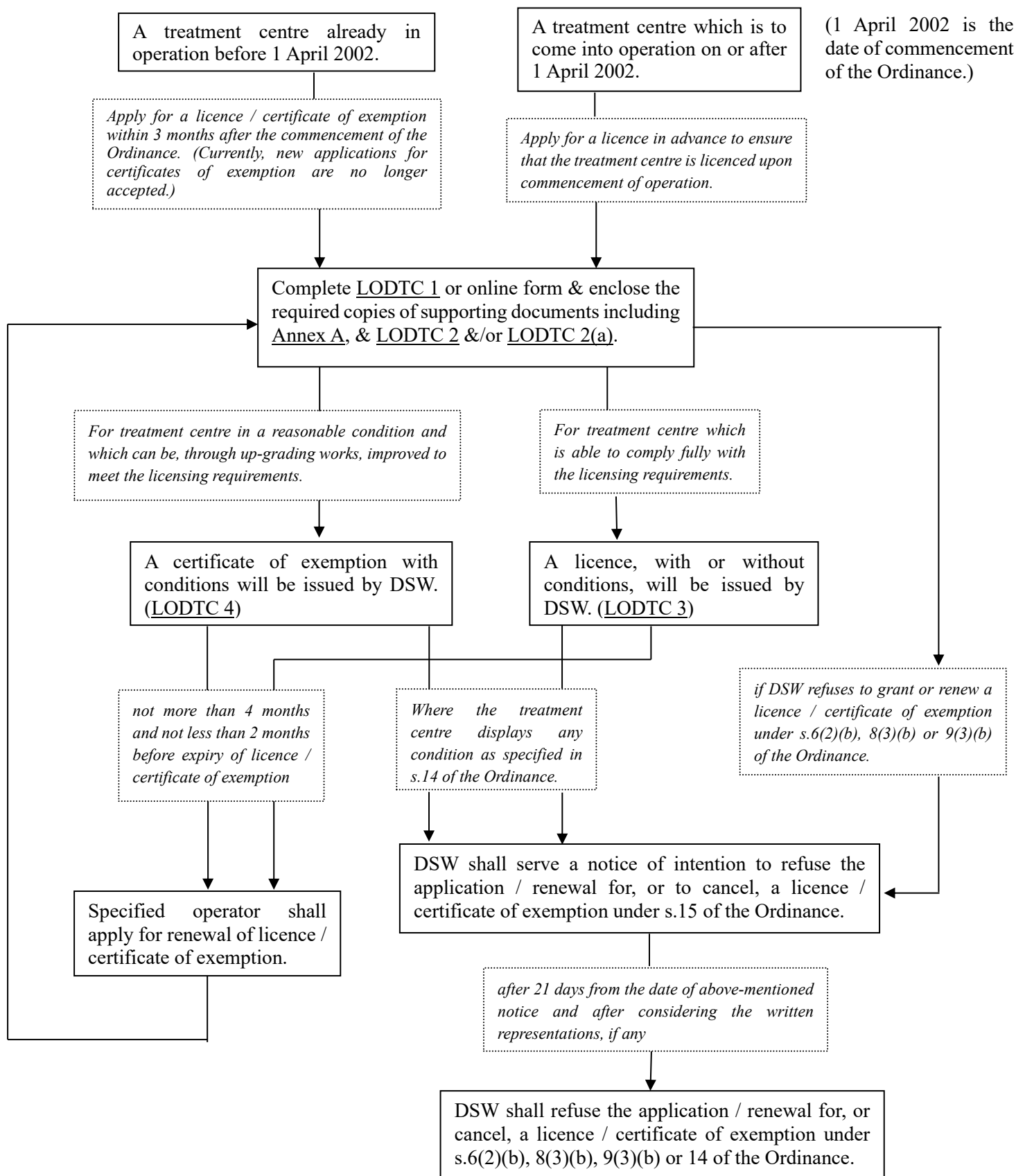
WORKPLACES AT WHICH THE NUMBER OF EMPLOYEES EMPLOYED IS 50 OR MORE

1. A copy of the leaflet, issued by the Commissioner, giving advice on first aid treatment.
2. At least 12 small sterilized unmedicated dressings for injured fingers.
3. At least 6 medium-sized sterilized unmedicated dressings for injured hands or feet.
4. At least 24 adhesive wound dressings of assorted sizes.
5. At least 4 triangular bandages of unbleached calico, the longest side of each bandage measures not less than 1.3 m and each of the other sides not less than 900 mm.
6. At least 1 roll of adhesive plaster (zinc oxide), approximately 25 mm wide and at least 4.5 m long.
7. At least 6 packets of absorbent cotton wool each of 30 g.
8. A pressure bandage.
9. Safety pins.

(Remark : The version in this Appendix, which is downloaded from the website of Hong Kong e-Legislation (HKeL) of the Department of Justice (www.elegislation.gov.hk), is solely for reference.)

FLOW CHART

Application / Renewal for a Licence / Certificate of Exemption under the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance



**DRUG DEPENDENT PERSONS TREATMENT AND REHABILITATION CENTRES
(LICENSING) ORDINANCE (CAP. 566)**

**APPLICATION / RENEWAL * FOR
A LICENCE / CERTIFICATE OF EXEMPTION ***

- Remark : (i) Before filling in the form, please read the Social Welfare Department Personal Information Collection Statement to Data Subject Before Collection of Personal Data.
[Appendix 1(a) of the Code of Practice for Drug Dependent Persons Treatment and Rehabilitation Centres]
- (ii) Please read the notes on page 8 before submission.
- (iii) Applicant must complete Sections I, II, III(A) or III(B) and IV in English or Chinese.

Section I Type of application #

[] Application is hereby made for a Licence under section 6(1) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.

[] Application is hereby made for a renewal of Licence under section 9(1) & 9(2) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.

Existing Licence Number : _____

[] Application is hereby made for a Certificate of Exemption under section 8(1) & 8(2) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.

[] Application is hereby made for a renewal of Certificate of Exemption under section 9(1) & 9(2) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.

Existing Certificate Number : _____

* Delete where appropriate

Tick in the appropriate bracket

Section II Particulars of the treatment centre in respect of which this application is sought.

(a) Name of the treatment centre in English :

(b) Name of the treatment centre in Chinese :

(c) Full address of the treatment centre *(Please include DD & Lot number of all premises)* :

(d) Number of building structures occupied by the treatment centre : _____

(e) Number of units / floors occupied by the treatment centre : _____ units / _____ floors

(f) Telephone number : _____

(g) Fax number : _____

(h) Email address : _____

(i) Nature of the treatment centre #

☐ Subvented *(Please go to item (k).)*

☐ Self-financing and non-profit-making *(Please go to item (k).)*

☐ Private and profit-making *(Please continue in item (j).)*

(j) Ownership of business # *(For completion if the treatment centre is a private establishment)*

☐ Sole proprietorship

☐ Partnership

☐ Incorporation

* Delete where appropriate

Tick in the appropriate bracket

LODTC 1

- (k) The premises of the treatment centre is : #
☐ a self-owned property ☐ a rented premises
☐ partly self-owned and partly rented
 -self-owned unit(s) concerned : _____
 - rented unit(s) concerned : _____
☐ others (*please specify*) : _____
- (l) Capacity of the treatment [Male] _____ [Female] _____ [Total] _____
- (m) No. of residents presently enrolled in [Male] [Female] [Total]
 the treatment centre :
 No. of drug dependent residents _____
 No. of non-drug dependent _____
 Total no. of residents _____
- (n) Min. and/or max. * age of drug dependent persons upon admission : _____
- (o) Net floor area of the treatment centre : _____ square metres
- (p) The treatment centre is : #
☐ a proposed service/business* ☐ an existing service/business*
- (q) Date/Tentative date* when the treatment centre commences service/business*:
 _____ *Date* _____ *Month* _____ *Year*
- (r) Does the treatment centre comply with the conditions of the following ^{Endnote1} ?
 The Government Lease or Licence # ☐ Yes ☐ No
 The Outline Zoning Plan # ☐ Yes ☐ No
- (s) Monthly fee charged per drug dependent person :
 \$ _____ (*Please enter the range if fees charged are variable.*)

* Delete where appropriate

Tick in the appropriate bracket

Part (A)	Particulars to be completed by the applicant if the treatment centre is operated by sole proprietor
----------	---

- (j) [] # Fit Person Statement (Annex A) is attached.

Tick in the appropriate bracket

Part (B) Particulars to be completed by the applicant if the treatment centre is operated by a body corporate / partnership *

(a) Name of the company / non-government organization * (*if applicable*)

(*in English*) :

(*in Chinese*) :

(b) Business Registration number (*if applicable*):

(c) Certificate of Incorporation number (*if applicable*):

(d) Name of responsible person of the Company/Non-government Organization/Partnership* :

Mr/Mrs/Miss/Ms*

(*English, surname first*)

(*Chinese*)

(e) Position held in the company / non-government organization * :

(f) Address of the company / non-government organization / responsible partner *

Flat/Room

Floor

Block

Name of building

(Hong Kong / Kowloon /

Number and name of street/estate

District

New Territories *)

(g) Telephone number :

(h) Fax number :

(i) Email address :

* Delete where appropriate

Tick in the appropriate bracket

LODTC 1

(j) Particulars of **all** partners / **all** directors *

(i) Mr/Mrs/Miss/Ms*

(English, surname first)

(Chinese)

Hong Kong Identity Card number : _____

Fit Person Statement (Annex A) is mailed separately/attached in sealed envelope /
attached unsealed *.

(ii) Mr/Mrs/Miss/Ms*

(English, surname first)

(Chinese)

Hong Kong Identity Card number : _____

Fit Person Statement (Annex A) is mailed separately/attached in sealed envelope /
attached unsealed *.

(iii) Mr/Mrs/Miss/Ms*

(English, surname first)

(Chinese)

Hong Kong Identity Card number : _____

Fit Person Statement (Annex A) is mailed separately/attached in sealed envelope /
attached unsealed *.

(iv) Mr/Mrs/Miss/Ms*

(English, surname first)

(Chinese)

Hong Kong Identity Card number : _____

Fit Person Statement (Annex A) is mailed separately/attached in sealed envelope /
attached unsealed *.

Additional sheet (stating particulars of _____ (number) other partners / directors*)* is /
is not * attached.

* Delete where appropriate

Tick in the appropriate bracket

Section IV Declaration of the applicant

I declare that :

- (a) the information in this application is true and correct to the best of my knowledge and belief; and
- (b) the operation, keeping, management or other control of the treatment centre referred to in Section II above is under my continuous and personal supervision.

Date : _____ Signature of applicant : _____

Company / Organization chop* :
(if applicable) : _____

<u>WARNING</u>
Any person who in or in connection with this application makes any statement (whether such statement be oral or written), or furnishes any information, which is false or misleading in a material particular and which he/she knows or reasonably ought to know is false or misleading in such particular, shall be guilty of an offence under section 10 of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance (Cap.566). The supply of such false or misleading information may also prejudice the application or renewal of a licence / certificate of exemption.

* Delete where appropriate

Tick in the appropriate bracket

Note : The applicant should forward the following documents, either by registered post /in person to the Licensing Office of Drug Dependents Treatment Centres, or submit the online application form through SWD website –

- (1) The original and three copies of this application form;
- (2) Photocopy of the Hong Kong Identity Cards^{Endnote 2} of –
the individual applicant (if the applicant is an individual);
all partners (if the applicant is a partnership); or
all director(s) (if the applicant is a body corporate);
- (3) Photocopy of (i) the Business Registration Certificate and (ii) certified copy of Business Registration Application issued by the Commissioner of Inland Revenue (applicable for a private treatment centre);
- (4) Photocopy of Certificate of Incorporation issued by the Registrar of Companies (applicable for a body corporate);
- (5) Photocopy of the tenancy agreement and/or documents showing the land status (e.g. Government Land Licence, Land Lease, Short Term Tenancy or Short Term Waiver, etc.) and the expiry dates for such use in respect of the centre premises, (applicable for rented premises);
- (6) Photocopy of the assignment in respect of the treatment centre premises (applicable for self-owned premises);
- (7) 6 copies of building plans of the premises of the treatment centre in metric and to scale (not less than 1:100);
- (8) Full list of employees (employed / to be employed) and/or skeleton volunteers, using the prescribed form LODTC 2 and/or LODTC 2(a); and
- (9) Fit person statement, using the prescribed form Annex A (to be completed by the applicant; or by **all** partners / **all** directors where the applicant is a partnership / body corporate). The statement may be returned apart from the application form for personal privacy purpose.

Endnote 1 Operator of a treatment centre holds the responsibility to ensure compliance with the conditions of the Deed of Mutual Covenant.

Endnote 2 Applicant may, as an alternative, produce the original Hong Kong Identity Card(s) for checking.

* Delete where appropriate
Tick in the appropriate bracket

LODTC 1

Fit Person Statement

Remark : 1. The following information is collected for the purpose of assessing whether the person below is a fit person as stipulated in section 7 of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance (Cap.566).

2. For the purpose of protecting your data privacy, you may choose to separate this sheet from the application form, seal it in an envelope and mail to the Licensing Office of Drug Dependents Treatment Centres, Social Welfare Department direct.

(Name of treatment centre)

I, _____ (Name), holder of Hong Kong Identity Card number _____, hereby state that -

- (a) I have / have not * been convicted of criminal offence(s) ^{Note 1} as specified in section 7(1)(b) or (c) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance in the 10 years immediately prior to the date of this application.

* Details of such criminal convictions in the 10 years immediately prior to the date of this application are as follows -

Date(s) of conviction(s)

Offence(s)

_____	_____
_____	_____
_____	_____

Place(s) of conviction(s)

Sentence(s)

_____	_____
_____	_____
_____	_____

^{Note 1} Criminal convictions to be reported are convictions in Hong Kong of any offence specified in Schedule 1 of the Organized and Serious Crimes Ordinance (Cap.455), and convictions elsewhere of any offence constituted by an act or omission that, if it had occurred in Hong Kong, would have constituted an offence specified in the said Schedule.

Fit Person Statement (cont'd)

- (b) I have / have never had * experience of drug dependence.
(If no experience of drug dependence, please delete (c).)
- (c)* I have / have not * been a drug dependent person ^{Note 2} continuously in the 7 years immediately prior to the date of this application. I have abstained from drug since _____ (month/year) *.
- (d) I understand that under section 10 of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance, giving false or misleading statement is an offence liable to a fine and imprisonment for 6 months on conviction.

Date : _____

Signature : _____

Name : _____

^{Note 2} Drug dependent person means a person who –

- (a) is suffering from the psychophysical state in which the usual or increasing dose of a dangerous drug (as defined in the Dangerous Drugs Ordinance (Cap. 134)) or a specified substance are required to prevent the onset of withdrawal symptoms; or
- (b) has completed treatment for drug dependence and is undergoing rehabilitation at a treatment centre.
-

* Delete where appropriate

Employees Record

Name of treatment centre : _____

Address : _____

Date of reporting : _____

Name (in English)	Name (in Chinese)	Sex	HKIC No.	Date of commencement of employment	Post Held	Working Hours (per day / per month)	Working Time (e.g. 9 a.m. – 5 p.m.)	Qualification

Signature _____
Name of reporting staff ()

Skeleton Volunteers Record

Name of treatment centre : _____

Address : _____

Date of reporting : _____

Name (in English)	Name (in Chinese)	Sex	HKIC No.	Date of commencement of service	Post Held	Hours of Service (per day / per month)	Time of Service (e.g. 9 a.m. – 5 p.m.)	Qualification

Signature _____
Name of reporting staff ()

Drug Dependent Persons Treatment And Rehabilitation Centres (Licensing) Ordinance (Chapter 566)

藥物倚賴者治療康復中心(發牌)條例 (香港法例第五六六章)

Licence Number
牌照編號

Licence of Treatment Centre

治療中心牌照

1. This licence is issued under section 6(2)(a) / 9(3)(a) * of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance in respect of the under-mentioned treatment centre –
茲證明下述治療中心已根據《藥物倚賴者治療康復中心(發牌)條例》第6(2)(a)條／第9(3)(a)條*獲發牌照 –
2. Particulars of the treatment centre –
治療中心資料 –
 - (a) Name: (in English) _____ Name: (in Chinese) _____
名稱: (英文) _____ 名稱: (中文) _____
 - (b) Address: _____
地址: _____
 - (c) Premises of operation:
可開設治療中心的處所: _____
as more particularly shown and described on Plan Number _____ deposited with and approved by me.
其詳情見於圖則第 _____ 號，該圖則現存本人處，並經本人批准。
 - (d) Maximum number of residents that the treatment centre is capable of accommodating is
治療中心可收納入住者的最多人數
3. Particulars of the specified operator to whom this licence is issued –
獲發上述治療中心牌照指明營辦者的資料 –
 - (a) Name: (in English) _____ Name: (in Chinese) _____
姓名: (英文) _____ 姓名: (中文) _____
 - (b) Address: _____
地址: _____
4. The person/company named in paragraph 3 above is authorized to operate or exercise control over the management of this treatment centre.
第3段所述的人士／公司已獲批准營辦上述治療中心或對上述治療中心的管理行使控制權。
5. This licence is valid for _____ months effective from the date of issue to cover the period from _____ to _____ inclusive.
本牌照由簽發日期起生效，有效期為 _____ 個月，由 _____ 至 _____ 止，首尾兩天計算在內。
6. This licence is issued subject to the following conditions –
本牌照附有下列條件 –

7. In the event of a breach of or a failure to perform any of the conditions set out in paragraph 6 above, this licence may be cancelled in exercise of the powers vested in me under section 14(c) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.
倘若上述治療中心違反或未能履行以上第6段所列的任何條件，本人可行使《藥物倚賴者治療康復中心(發牌)條例》第14(c)條賦予本人的權力，撤銷本牌照。

(Signed)

(簽署) (_____)

Date 日期

Director of Social Welfare
Hong Kong Special Administrative Region
香港特別行政區社會福利署署長

WARNING : Licensing of a treatment centre under the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance does not release the operator or any other person from compliance with any requirement of the Buildings Ordinance or any other Ordinance relating to the premises, nor does it in any way affect or modify any agreement or covenant relating to any premises in which the treatment centre is operated.

警告: 治療中心根據《藥物倚賴者治療康復中心(發牌)條例》獲發給牌照，並不表示其經營者或任何其他人士毋須遵守《建築物條例》或任何其他與該處所有關的條例的規定，亦不會對與開設該治療中心的處所有關的任何合約或租約條款有任何影響或修改。

Drug Dependent Persons Treatment And Rehabilitation Centres (Licensing) Ordinance (Chapter 566)

藥物倚賴者治療康復中心(發牌)條例 (香港法例第五六六章)

Certificate Number
證明書編號

Certificate of Exemption of Treatment Centre
治療中心豁免證明書

1. This certificate of exemption is issued under section 48(3)(a) / 9(3)(a) * of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance in respect of the under-mentioned treatment centre –
茲證明下述治療中心已根據《藥物倚賴者治療康復中心(發牌)條例》第8(3)(a)條／第9(3)(a)條*獲發豁免證明書 –
2. Particulars of the treatment centre –
治療中心資料 –
 - (a) Name: (in English) _____ Name: (in Chinese) _____
名稱: (英文) _____ 名稱: (中文) _____
 - (b) Address: _____
地址: _____
 - (c) Premises of operation:
可開設治療中心的處所: _____
as more particularly shown and described on Plan Number _____ deposited with and approved by me.
其詳情見於圖則第 _____ 號, 該圖則現存本人處, 並經本人批准。
 - (d) Maximum number of residents that the treatment centre is capable of accommodating is
治療中心可收納入住者的最多人數
3. Particulars of the specified operator to whom this certificate of exemption is issued –
獲發上述治療中心豁免證明書指明營辦者的資料 –
 - (a) Name: (in English) _____ Name: (in Chinese) _____
姓名: (英文) _____ 姓名: (中文) _____
 - (b) Address: _____
地址: _____
4. The person/company named in paragraph 3 above is authorized to operate or exercise control over the management of this treatment centre.
第3段所述的人士／公司已獲批准營辦上述治療中心或對上述治療中心的管理行使控制權。
5. This certificate of exemption is valid for ____ months effective from the date of issue to cover the period from _____ to _____ inclusive.
本豁免證明書由簽發日期起生效, 有效期為 _____ 個月, 由 _____ 至 _____ 止, 首尾兩天計算在內。
6. This certificate of exemption is issued subject to the following conditions –
本豁免證明書附有下列條件 –

7. In the event of a breach of or a failure to perform any of the conditions set out in paragraph 6 above, this certificate of exemption may be cancelled in exercise of the powers vested in me under section 14(c) of the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance.
倘若上述治療中心違反或未能履行以上第6段所列的任何條件, 本人可行使《藥物倚賴者治療康復中心(發牌)條例》第14(c)條賦予本人的權力, 撤銷本豁免證明書。

(Signed)
(簽署)

Date 日期

(_____)

Director of Social Welfare
Hong Kong Special Administrative Region
香港特別行政區社會福利署署長

WARNING : The issue of a certificate of exemption to a treatment centre under the Drug Dependent Persons Treatment and Rehabilitation Centres (Licensing) Ordinance does not release the operator or any other person from compliance with any requirement of the Buildings Ordinance or any other Ordinance relating to the premises, nor does it in any way affect or modify any agreement or covenant relating to any premises in which the treatment centre is operated.

警告: 治療中心根據《藥物倚賴者治療康復中心(發牌)條例》獲發給豁免證明書, 並不表示其經營者或任何其他人士毋須遵守《建築物條例》或任何其他與該處所有關的條例的規定, 亦不會對與開設該治療中心的處所有關的任何合約或租約條款有任何影響或修改。

Notification of Convictions

I, _____ (name), holder of Hong Kong Identity
Card number _____ and the post of _____ (post) in

(name of
treatment centre), hereby notify the Director of Social Welfare that –

- (a) I have been convicted of criminal offence(s) ^{Note 1} in Hong Kong or elsewhere on
_____ (date).

Details of the convicted offence(s) and sentence(s) * are as follows –

Date(s) of
conviction(s)

Offence(s)

Place(s) of
conviction(s)

Sentence(s)

- (b) A signed authorization form to Hong Kong Police is attached.

Signature : _____

Name : _____ Date: _____

Responsible Person of the body corporate / partnership *

(if the specified operator/applicant is a body corporate or partnership)

Name _____ Signature _____

Company / Organization * Chop
(if applicable)

* Delete as appropriate _____

^{Note 1} Criminal convictions to be reported are convictions in Hong Kong of any offence specified in Schedule 1 of the Organized and Serious Crimes Ordinance (Cap.455), and convictions elsewhere of any offence constituted by an act or omission that, if it had occurred in Hong Kong, would have constituted an offence specified in the said Schedule.

CONFIDENTIAL 機密

AUTHORIZATION

I _____ hereby authorize the Commissioner of Police, or his representative, to release full particulars of any and all criminal convictions recorded against me to Social Welfare Department. I also agree to my fingerprint impressions being taken by the Police in connection with this application, if required for the purpose of verifying my criminal record. My personal particulars are as follows -

Name _____
Date of Birth _____
HK Identity Card No. _____
Passport No. _____
Chinese Commercial Code Nos. _____
(as recorded on the applicant's HK
Identity Card - where applicable) _____ / _____ / _____
Place of Birth _____

(Signature of applicant)

Date _____

Witnessed by ^{Note 1} _____ Designation _____

HKID Card No. _____

Note 1 The witness must be an official of the Social Welfare Department.

CONFIDENTIAL 機密

LODTC 5

Special Incident Report

(this shall be submitted within 3 calendar days, including public holiday(s), after the incident)

Note: please tick as appropriate and submit the supplementary sheet/a customised report with relevant information together with this form.

To: Licensing Office of Drug Dependents Treatment Centres (Note 1)
(Fax no.: 2119 9057 and email: lodtcenq@swd.gov.hk)
(Enquiry no.: 3184 0812)

[Attn: _____ (Name of responsible social worker)]

Name of treatment centre _____

Name of supervisor _____ Contact no. _____

Date of incident _____

Type of Special Incident

(1) Unusual death/repeated injuries of a resident; or other incident resulting in death/serious injury of a resident

☐ incident happened in the treatment centre and the resident concerned was sent to hospital for treatment/ died after being taken to hospital

please specify: _____

☐ the resident committed/attempted suicide in the treatment centre and was sent to hospital for treatment/ died after being taken to hospital

☐ other unusual death/injury, please specify: _____

☐ receiving a summons issued by the Coroner's Court to attend the inquest to give evidence (please attach a copy of the summons and provide details on the supplementary sheet)

(a) ☐ has not/ ☐ has reported the case to the police

reporting date and reference no.: _____

(b) police inspection date and time (if applicable): _____

(2) Missing of a resident requiring police assistance

☐ the resident left the treatment centre unnoticed

☐ the resident was found missing during activities outside the treatment centre

☐ during home leave ☐ going out on his/her own ☐ during activities organised by the treatment centre

date of reporting to the police and reference no.: _____

(a) ☐ resident was found on _____ (dd/mm/yyyy)

☐ resident is not yet found and has been missing for _____ days since the missing day

(b) please specify the medical history of resident: _____

(3) Established/suspected abuse or infringement of a resident

☐ physical abuse

☐ psychological abuse (Note 2)

☐ neglect

☐ financial abuse

☐ abandonment

☐ sexual abuse/indecent assault

☐ others (please specify: _____)

(a)	<input type="checkbox"/> established case <input type="checkbox"/> suspected case
(b)	identity of abuser/suspected abuser/perpetrator <input type="checkbox"/> staff <input type="checkbox"/> resident <input type="checkbox"/> visitor <input type="checkbox"/> others (please specify: _____)
(c)	<input type="checkbox"/> has/ <input type="checkbox"/> has not referred to social worker please specify the referral date and respective service unit if referral is made: _____
(d)	<input type="checkbox"/> has/ <input type="checkbox"/> has not reported the case to police reporting date and reference no.: _____
(4)	Dispute in the treatment centre requiring police assistance <input type="checkbox"/> between residents <input type="checkbox"/> between resident(s) and staff <input type="checkbox"/> between resident(s) and visitor(s) <input type="checkbox"/> between staff <input type="checkbox"/> between staff and visitor(s) <input type="checkbox"/> between visitors <input type="checkbox"/> others (please specify: _____) date of reporting to police and reference no.: _____
(5)	Serious medical/drug incident <input type="checkbox"/> resident(s) is/are admitted to hospital for examination or treatment after taking wrong drug(s) <input type="checkbox"/> resident(s) is/are admitted to hospital for examination or treatment after missing a dose or an overdose <input type="checkbox"/> resident(s) is/are admitted to hospital for examination or treatment after taking proprietary/non-prescription drug(s) <input type="checkbox"/> others (please specify: _____)
(6)	Other special incidents affecting the operation of the treatment centre/residents <input type="checkbox"/> suspension of power <input type="checkbox"/> building defects or structural problems <input type="checkbox"/> fire outbreak <input type="checkbox"/> suspension of water supply <input type="checkbox"/> flood/landslip/unknown gas leakage/other natural disasters <input type="checkbox"/> others (e.g. serious incidents involving staff), please specify: _____
(7)	Others (e.g. serious data breach or incidents that may draw media attention) <input type="checkbox"/> please specify: _____

Information of the Resident and his/her Family Members/the Staff Concerned

Name of resident _____	Age/Sex _____	Room and/or bed no. _____
<input type="checkbox"/> the guardians/family members/relatives/staff concerned/referring worker/other residents or persons involved contacted (Note 3) (One or more could be reported)		
name(s) and relationship(s) _____		
date and time _____		
respective staff and post _____		
<input type="checkbox"/> No guardians/family members/relatives/staff concerned/referring worker/other residents or persons involved contacted		
reason(s) _____		

Signature of informant _____	Post _____
Name _____	Date _____

Note 1

Please inform the following service units of the Social Welfare Department (SWD) at the same time according to the type of treatment centre:

- (i) Subvented by the SWD
Subventions Section (fax no.: 2575 5632 and email: suenq@swd.gov.hk); and
Youth Section (fax no.: 2838 7021 and email: youthenq@swd.gov.hk)
- (ii) Self-financing and non-profit making (not-subvented by the SWD)
Youth Section (fax no.: 2838 7021 and email: youthenq@swd.gov.hk)

Note 2

Psychological abuse is the pattern of behaviour and/or attitudes towards victims of abuse that endangers or impairs their psychological health, including acts of insult, scolding, isolation, causing fear to them for a long duration, intrusion into their privacy and unnecessary restriction of their freedom of access and movement.

Note 3

The residents/family members/staff concerned or other parties involved should be informed of the “special incident” on the premise that personal privacy is addressed.

Special Incident Report (Supplementary Sheet)

(this supplementary sheet/a customised report with relevant information shall be submitted
with the Special Incident Report)

Name of treatment centre			
Date of incident		Time of incident	
Name of resident concerned		HKIC no.	
Medical history of the resident concerned (if applicable)			

Details/Occurrence of the Special Incident

Follow-up Actions Taken by the treatment centre [including but not limited to making relevant treatment arrangements, conducting multi-disciplinary case conferences, formulating care plans for the resident(s) concerned, adopting measures to protect other residents, responding to concerns/ enquiries of outside parties (e.g. concern groups, District Councils, Legislative Council, etc.)] and/or Suggestions or Measures to Prevent the Recurrence of Similar Incidents

Signature of informant		Post	
Name		Date	