

The Hong Kong Council of Social Service
Service Development (Family & Community)
Network on IFSCs
Recommendations for IFSC Review

Rationale

Family-focused has been defined as the key direction of IFSC, in which the emphasis of intervention is to strengthen the family function. Thus, the focus of IFSC is on identifying and removing obstacles that interfere with the capacities of family members, and empowering them by mobilizing their strengths and potentialities.¹ The uniqueness of IFSC should be the expertise in dealing with the “**needs of families in the community**”. And the core business of IFSC should be related to various kinds of family relationship difficulties such as couple, parent-child, in-law and kinship, and related personal impediments. Based on the guiding principle of early identification, IFSC should put effort to identify families at risk for **early intervention**. Upon professional assessment, those families in need of specific support and service on top of familial issues should be referred to receive other specialized service as well, while IFSC will take up the role of **case manager** in coordinating efforts from involved professionals.

Major Recommendations

1. Handling of Housing Assistance Case

According to the service statistics of NGO IFSCs, 5014 cases with housing needs are handled in 2008-09, representing 18% of all cases handled. However, only 8.6% of those housing assistance cases had been subsequently engaged for continuous service to work on other problem natures. The figures reflect the fact that most of the cases with its main focus concerning housing needs, but not other family or welfare needs. As a corollary, the **professional manpower in family service (i.e. social worker) is not utilized appropriately**.

Furthermore, the existing practice is **not cost-effective** in handling housing assistance case. The principle of early identification can hardly be actualized due to the demand for dual while rather conflicting roles of social worker from the very start; especially if the role of social worker is perceived as housing unit administrator. Besides, it is not cost effective to handle the cases by different agencies without standardized mechanism.

¹ HKU Consultant Team. Report on the Review of Family Services in Hong Kong - Meeting the Challenge: Strengthening Families (June 2001)

Recommendation 1

It is strongly suggested all cases with presenting problem mainly as public housing tenancy or other administrative issues should be directly handled by the corresponding government department, i.e. **Housing Department**. This will imply that the Department ought to enhance its assessment mechanism and effectiveness. While other housing assistance cases involving social assessment should be intake by **specialized pools of social workers** under streamlined administration and standardized assessment mechanism to meet the users' needs in a more cost-effective way. While addressing the housing needs, cases with other welfare needs identified could be referred to IFSC for social work intervention.

2. Handling of New Spousal Abuse Case

At the formation stage of IFSC, manpower at both SWD and NGO IFSCs was aligned according to serving population size. In past few years, all additional resources allocated to IFSCs, centres of SWD & NGO are weighted equal. However, the existing practice in handling new spousal abuse case is **inconsistent among SWD and NGO IFSCs**.

Recommendation 2

It is suggested that the guideline of referral should be aligned among SWD and NGO IFSCs. That means all new spousal abuse cases should be **intake by FCPSUs for immediate protection work**. **IFSC should be a supportive service** to receive those cases with counseling needs referred from FCPSUs after the problem of spouse battering is subsided. Such unified handling procedure will definitely convey a clear message of the professional roles of IFSC to the public.

3. Backup Service for Specialized Target Groups

Service integration addressing the various needs of the entire family in a holistic manner should be emphasized, so as to avoid service fragmentation and delay of intervention. However, it should not necessarily imply doing all the work under the same roof. Instead, IFSCs should play the role as "**Community Clinic**", the first contact point for needy families, to whom early intervention should be rendered. In addition, **preventive and developmental work** should be the focus in IFSCs in order to align with the role of strengthening family.

Recommendation 3

It is suggested that **case management** approach should be adopted by IFSCs to serve the users with various specialized service needs. By acting as the case manager, IFSCs should bridge the users with appropriate community resources. There should call for **well-coordinated interfacing** between IFSCs and other established services like DECC, ICYSC, SSW, MSW, FCPSU, etc, to ensure service seamlessness while to avoid duplication. Effective interfacing across services and organizations should be enforced, with effective mechanism for practice and also

with adequate community resources to meet the needs.

Recommendation 4

Other **specialized services** should be called for backing-up IFSCs in serving the special needs of designated target groups, for instance, the mentally-ill, substance abuser, cross-border family, ethnic minority, and family violence victims. There should be a mechanism to examine new trends in needs of families so that appropriate specialized services can be introduced to provide timely support to families, before the problems become uncontrollable.

4. Service Output Planning

With the service direction of **community-based**, IFSCs had put much effort in strengthening ties with community organizations and government departments. Joint planning and programme with community partners has become part of the core business of IFSCs. Moreover, influx of enquiries upon implementation of different types of district programmes is always an effective process to early identify problems. However, those efforts can hardly be reflected in the existing **funding and service agreement (FSA)**.

Recommendation 5

It is suggested that the **performance indicators** should be re-examined so as to truly reflect the function and workload of IFSCs. For example, purely counting the “Total number of new and reopened cases handled” could never truly reflect the IFSC caseload. Output indicator should be **more flexible, inclusive and interchangeable**.

Recommendation 6

Flexibility of FSA should be allowed in addressing the various service needs of different communities. Room (e.g. 10-20%) should be allowed for adjustment in FSA depending on districts characteristics.

5. Manpower and Service Planning

Since the formation of IFSC, the service needs have been changing rapidly. The existing **manpower structure** basically remained unchanged since its formation. In order to ensure the quality service of IFSC, it is necessary to re-examine the manpower structure including the clinical supervisory support and supporting staff provision. On the other hand, a well established mechanism listing out reference criteria (e.g. population size, quality of population mix, complexity of social problems, distinct deprived or isolated estates, etc) for **service planning** is also essential to monitor the ever-changing service needs and adjust service provision accordingly.

Recommendation 7

It is suggested that **clinical supervisory support** of IFSCs should be strengthened in response to the rising complexity of intensive counseling cases, say a full time clinical supervisor and another supervisor responsible for administration and networking is more reasonable. Besides, **program staff** (in the rank of Welfare Worker) and **clerical staff** should be provided at IFSC in meeting the service needs at the first tier or other supportive services.

Recommendation 8

It is recommended that there should be provision to hire **relief workers** to help tide-over shortages due to sick-leave, maternity leave and study leave. Besides, team work and service planning is important for the operation of IFSC. Thus, there should be allowance for centers to close for annual evaluation, reflection and planning.

Recommendation 9

As IFSCs are expected to run community-based programmes and projects in response to community needs and issues, additional resources for **programme expenses** should be considered.

Recommendation 10

It is also suggested that **regular service review** of IFSC should be conducted for every 3 to 5 years, with the aim to re-assess the service needs and demand. Accordingly, the provision of IFSCs should be re-examined with resource implication.

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