CASE SUMMARY

Complaint against the Social Welfare Department (SWD) for: (a) the unreasonable procedures in the review of the Disability Allowance payable to the complainant, and (b) the unfriendly manner of the caseworker.

The Complaint

Mr. A, acting on behalf of his aged mother, Madam B, lodged a complaint against SWD. Madam B, over 80 years old, was granted a Disability Allowance (DA) for the period between 9 April 1997 and 8 April 1999 after a medical assessment of her hearing disability in 1997. At the interview with the caseworker on 3 March 1999 when the case was brought up for review, Madam B was told that she had to undergo another medical assessment to determine her eligibility for the DA payment after April 1999. Owing to the heavy schedule of appointments at the specialist clinic, Madam B had to wait a few months for her medical assessment. Meanwhile, she would only be paid the Old Age Allowance (OAA) after 8 April, pending the outcome of such assessment.

2. On 5 March 1999, Mr A telephoned the caseworker, to inquire about the case. He was allegedly told in an unfriendly manner that such cases would normally be brought up for review some 40 days before the expiry date of the eligibility period. Pending assessment, only the Old Age Allowance (OAA) would be paid. Back payments up to the full rate of the DA would be arranged to Madam B if the medical assessment confirmed her eligibility.
3. Mr A considered the review system bureaucratic. In his view, his aged mother suffered from permanent hearing disability and there was little possibility of her condition being cured. Also his mother had not been made aware of the need for re-assessment when she was granted the DA two years ago in 1997. As a result of her case being reviewed at such a late stage and the long waiting time for an appointment at the specialist clinic, payment of DA to his mother would be disrupted.

4. In the course of arranging the assessment, Mr A requested the SWD caseworker to communicate with the Hospital Authority staff to see whether approval of DA could be granted on a permanent basis or for a longer period. However, the caseworker rejected his request. He therefore lodged a complaint to The Ombudsman.

Observations and Conclusions
Complaint point (a)

5. According to the Social Security Manual of Procedures (SSMP) para. 4160,

(1) Cases are normally brought up for review 40 days before the expiry date of cash assistance.

(2) DA cases which require medical re-assessment should be brought up six months before the payment expiry date in order that a timely medical assessment can be made before the expiry of payment and that payment will not be disrupted.

In this case, SWD staff had mistakenly followed sub-paragraph (1) instead of sub-paragraph (2) in the process of review. Investigation also revealed that as a result of staff mistake, Madam B missed an initial appointment for re-assessment originally scheduled for 7 April 1999. Later after attending the clinic on 10 May 1999, she was certified as profoundly deaf and on a permanent basis. SWD authorized DA payment to her on 25 May 1999, with retrospective effect to 9 April 1999. This Office finds that the staff of the
Social Security Field Unit should have followed internal guideline stipulated under para. 4160(2) of the SSMP. Coupled with this mistake, the original appointment form for medical re-assessment had been misplaced thereby resulting in a delay in the medical re-assessment. This Office therefore finds this complaint point is substantiated.

Complaint point (b)

6. In view of the nature of his mother’s disability and her advanced age, Mr A requested the SWD caseworker to ask the specialist doctor to assess and accord Madam B a permanent disability status. However, the request was turned down on the basis that this was not a matter within the professional expertise of SWD staff. On the other hand, the SWD caseworker thought that Mr. A was querying the Department for failing to grant his mother permanent disability status in the first instance. In the absence of any evidence on the telephonic exchange of conversation between Mr A and the caseworker, this Office could not judge whether the caseworker had been unfriendly and/or unhelpful and therefore finds this complaint point cannot be substantiated.

7. However, given the circumstances of this case, this Office considered that a request from an over-80 years old client could have been handled more sympathetically. In particular, this Office considers that caseworkers could assist aged and disabled clients by forwarding their reasonable requests/suggestions to doctors and medical social workers for consideration, despite the fact that clients are free to make their own views/comments known to the attending doctor at re-assessment sessions.

8. Overall, The Ombudsman concludes that this complaint is partially substantiated.

Recommendations

9. This Office is pleased to note that a work improvement team had been set up immediately after the incident to examine how the flow of
incoming documents at the registry could be further improved. In addition, all staff have been reminded to follow SSMP para. 4160 closely and to bring up those cases 6 months ahead for review where it is likely that the bookings of appointments would take a few months. Nevertheless, The Ombudsman recommends for consideration of the Director of Social Welfare that:

(a) the Department should offer an apology to Madam B for the delay in the review of the payment of DA to her;

(b) for cases where payment of the DA covers only a period of time, and the clients’ subsequent eligibility will be subject to further medical assessment of their disability conditions, a notification to this effect, oral and in writing, should be passed on to the clients well in advance to alert them of the arrangement; and

(c) under special circumstances, and for reasonable requests that the aged and disabled clients may put forth for the consideration of the medical staff, the caseworkers should assist by relaying such personal views to the doctors and medical social workers for consideration while the clients should be requested to put forth their own views/comments to the doctors in person when they attend the clinic sessions.

Comments from the Social Welfare Department

10. The Director of Social Welfare considered the conclusions generally acceptable and agreeable, and reported progress on the implementation of the recommendations as follows:

(i) They had issued a letter of apology to Madam B;

(ii) They had introduced standard notification letters, followed by oral explanation if necessary, to be sent to clients of DA cases who have not been medically certified to be permanently
disabled, to inform them of the need for medical re-assessment at the expiration of the validity period of the current medical assessment; and

(iii) They had agreed that caseworkers would assist the aged and disabled clients by including their reasonable requests in the covering memoranda when issuing the medical assessment forms to the doctors/medical social workers for arrangement of medical assessment.

Final Remarks

11. The Ombudsman is pleased to note SWD’s positive stance towards this complaint and the remedial/improvement measures taken with immediate effect to improve the quality of service of the Department.

Office of The Ombudsman
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