The Government of the Hong Kong Special Administrative Region
Department of Health

Invitation for Submitting Proposal for the
Elderly Health Assessment Pilot Programme

Application Form

Applicant’s Declaration

1. Having read the Invitation Documents, I agree to be bound by the terms and conditions as stipulated therein.

2. I hereby offer to provide the services for the elderly as set out in the Operation Proposal submitted together with this application form subject to and in accordance with the Agreement.

3. I understand that applicants who do not receive any notification by 28 June 2013 shall assume that their applications are not successful.

4. I undertake to provide additional information as requested by the Government Representative to facilitate the assessment of this application.

5. The name of the NGO is ..............................................................................................................

6. The registered office of the NGO is situated at .............................................................................Hong Kong.

7. Name of the person authorized to sign on behalf of the NGO:
............................................................................................................................................................

8. Name, post title, telephone number and email address of the contact person to whom enquiries related to the Application may be directed:
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9. I declare that all information provided in this application is true, correct and not misleading.

Signature: ...........................................................................................................................................

Dated this .................................................................. day of ...................................................... 2013

NGO Chop
Notes to Applicants:

1. All the particulars required in this form must be provided. To be acceptable as an application, this form, properly completed in duplicate and enclosed in a sealed plain envelope marked “Application for Enrolment in the Elderly Health Assessment Pilot Programme” and addressed to the Chairperson of the Application Assessment Panel, must reach the Health Care Voucher Unit of the Department of Health, 1/F Central District Health Centre, 1 Kau U Fong, Central, Hong Kong, before 12:00 noon on 24 April 2013. Late applications will not be accepted. In case a black rainstorm warning or a tropical cyclone warning signal number 8 or above is in force for any duration between 9:00 a.m. and 12:00 noon on the Application Closing Date, it will be extended to 12:00 noon the next working day which does not have either of the above warnings in Hong Kong in force at any time between 9:00 a.m. and 12:00 noon.

2. The Invitation Documents can be downloaded from the website of the Food & Health Bureau [www.fhb.gov.hk] and the Health Care Voucher Scheme of the Department of Health [www.hcv.gov.hk]. Applicants can also obtain a set of Invitation Documents in duplicate from the Health Care Voucher Unit of the Department of Health, 1/F Central District Health Centre, 1 Kau U Fong, Central, Hong Kong.

3. Applicants are strongly advised to read the full details of the Invitation Documents carefully before submitting their applications.

4. To answer enquiries from the Applicants on the Invitation Documents, a briefing session will be held on 4/F, Argyle Street Jockey Club School Dental Clinic, 147 J Argyle Street, Kowloon on 27 March 2013 with details as stipulated at clause 11 of the Terms of Invitation.

5. Applicants should make use of the Checklist for Submission of Application at Appendix 3 to ensure their submissions are completed as required. Incomplete information will render an application invalid and the application will not be further considered.
Definitions

1. In these Invitation Documents, unless the context otherwise requires, the following words and expressions shall have the following respective meanings:

“Agreement” means the agreement made between the Government and the Selected NGO in relation to the provision of the Approved Services comprising (a) Definitions, (b) Terms of Agreement: Part 1 - General Conditions; Part 2 - Services Provided under the Pilot Programme and Part 3 - Principles and Rules of Subvention, (c) Schedule – (i) “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings” (ii) Checklist of preventive care activities for an older adult at different stages; and (iii) Recommended strategies for opportunistic screening of various functional disabilities, (d) the Operation Proposal prepared by the Selected NGO in accordance with Appendix 1 – Information to be Provided with the Operation Proposal, and (e) the letter/fax of acceptance and any other clarifications, correspondences or documents which are expressly stated as forming part of the agreement;

“Agreement Period” means the period specified in clause 1 of the General Conditions;

“Applicant” means an NGO which submits an application for enrolment in the Pilot Programme in response to the Invitation Documents;

“Application Closing Date” means 24 April 2013;

“Approved Services” means those services, tasks and objectives to be performed or achieved by the Selected NGO for such quota of Service User
allocated by the Government under the Pilot Programme and for which a Subvention is approved by the Government;

“day” means calendar day;

“dietitian” means a dietitian with post-graduate Diploma in Dietetics or a Bachelor of Science Degree in Dietetics, inclusive of an internship, or equivalent;

“eHealth System” means the computer application system designated and provided by the Government from time to time for use of the Approved Services by the Service Users and other purposes relating to the Pilot Programme;

“Government” means the Government of the Hong Kong Special Administrative Region of the People’s Republic of China, and shall include its assigns, successors-in-title and any persons deriving title under it;

“Government Representative” means the Director of Health or any officer authorized to act on her behalf for the purposes of the Agreement;

“HK$” means Hong Kong dollars, the lawful currency of Hong Kong;

“Invitation Documents” means the documents as specified in clause 1 of the Terms of Invitation; and any addendum issued prior to the Application Closing Date under clause 15.2 of the Terms of Invitation;

“NGO” means non-governmental organization which is a bona-fide non-profit-making organization and exempt from tax under section 88 of the Inland Revenue Ordinance (Chapter 112 of the laws of Hong Kong);

“Operation Proposal” has the meaning ascribed to it in clause 6.1(b) of the Terms of Invitation;
“Pilot Programme” means the Elderly Health Assessment Pilot Programme referred to in clause 1.2 of Part 2 of the Terms of Agreement - Services Provided under the Pilot Programme;

“registered dentist” means a dentist registered under the Dentists Registration Ordinance (Chapter 156 of the laws of Hong Kong) who holds a valid practising certificate issued under that Ordinance;

“registered medical practitioner” means a medical practitioner registered under the Medical Registration Ordinance (Chapter 161 of the laws of Hong Kong) who holds a valid practising certificate issued under the Ordinance;

“registered nurse” means a nurse registered under the Nurses Registration Ordinance (Chapter 164 of the laws of Hong Kong) who holds valid practising certificate issued under the Ordinance;

“registered physiotherapist” means a physiotherapist registered under the Supplementary Medical Professions Ordinance (Chapter 359 of the laws of Hong Kong) who holds a valid practising certificate issued under the Ordinance;

“registered occupational therapist” means an occupational therapist registered under the Supplementary Medical Professions Ordinance (Chapter 359 of the laws of Hong Kong) who holds a valid practising certificate issued under the Ordinance;

“Selected NGO” means the successful Applicant whose application under the Pilot Programme is accepted by the Government under clause 9 of the Terms of Invitation;

“Service User” means a person aged 70 or above in the relevant calendar year who holds a valid Hong Kong Identity Card within the meaning...
of the Registration of Persons Ordinance (Chapter 177 of the laws of Hong Kong) or a valid Certificate of Exemption within the meaning of the Immigration Ordinance (Chapter 115 of the laws of Hong Kong) and who uses the services provided by the Selected NGO under the Pilot Programme;

“Subvention” means the fund provided to the Selected NGO for the provision of the Approved Services in accordance with the Agreement; and

“working day” means any day other than a Saturday, a public holiday or a gale warning day or a black rainstorm warning day as defined in section 71(2) of the Interpretation and General Clauses Ordinance (Chapter 1 of the laws of Hong Kong).

2. In the Invitation Documents, unless the context otherwise requires, the following rules of interpretation shall apply:

(a) references to a statute or statutory provision shall include reference to the statute or statutory provision as replaced, amended, modified or enacted from time to time by any subsequent enactment, order, regulation or instrument; and shall include all subordinated legislation made under those statutes;

(b) words importing the singular include the plural and vice versa; words importing a gender shall mean every gender; reference to a person shall include reference to an individual, a firm, a body corporate or unincorporate (wherever established or incorporated);

(c) clause headings are inserted for convenience of reference only and shall not in any way vary, limit or extend the construction of the Invitation Documents;

(d) reference to time and date in the Invitation Documents shall be construed as Hong Kong time and date; and

(e) any word or expression to which a specific meaning has been attached
in a particular document of the Invitation Documents shall bear such meaning whenever it appears in other documents of the Invitation Documents.

3. All rights and powers of the Government under the Agreement may be exercised by the Government Representative acting on behalf of the Government.
Terms of Invitation

1. Invitation Documents

The Invitation Documents identified as Invitation Ref: [DH HCVU/10-5/4] for inviting submission of Operation Proposal for provision of services under the Pilot Programme consist of the following:

(a) Application Form
(b) Definitions
(c) Terms of Invitation
(d) Terms of Agreement:
   Part 1 General Conditions
   Part 2 Services Provided under the Pilot Programme
   Part 3 Principles and Rules of Subvention
   Schedule (i) “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings”; (ii) Checklist of preventive care activities for an older adult at different stages; (iii) Recommended strategies for opportunistic screening of various functional disabilities
(e) Appendix 1 Information to be Provided with the Operation Proposal
   Appendix 1A Template for Operation Proposal for the Elderly Health Assessment Pilot Programme
(f) Appendix 2 Assessment Criteria
(g) Appendix 3 Checklist for Submission of Application
(h) Appendix 4 Reply Slip for the Briefing Session

2. Invitation for Submitting Proposal

Applicants are invited to submit proposals for the provision of all of the services set out in Part 2 of the Terms of Agreement during the Agreement Period subject to and in accordance with the Invitation Documents.
3. **Application Preparation**

3.1 An application for provision of a portion but not all of the services set out in Part 2 of the Terms of Agreement will not be considered.

3.2 Applicants shall not make any changes to the Invitation Documents.

3.3 Figures provided in an application should not be altered or erased unless it is effected by striking through the incorrect figures, inserting the correct figures in ink above the original figures and the Applicant initialling the amendments in ink.

3.4 The Application Form and all accompanying documents should be completed in ink or typescript in English and submitted in the manner specified in clause 5.

3.5 The Government Representative may request an Applicant to supply such missing document, additional information, documentary proof or clarification on or before such date as the Government Representative may in his absolute discretion specify. Failure to comply with such request may render the application disqualified without further notice.

4. **Mandatory Requirements**

4.1 The Applicant must be an NGO operating medical clinic which provides health assessment or other clinic service by registered medical practitioner for the elderly.

4.2 An application will not be considered if the Applicant fails to meet the requirements specified in clause 4.1.

5. **Submission of Application**

5.1 Completed application consisting of the documents and information set out in clause 6.1 shall be placed inside a sealed envelope marked in the manner as specified in clause 5.2 and deposited in the manner as specified in the “Notes to Applicants” in the Application Form. Each application shall contain the original signature of the duly authorized representative of the Applicant and shall be affixed with the Applicant’s organization chop and dated.
5.2 An application should be enclosed in a sealed envelope marked as follows:

| The Chairperson, Application Assessment Panel  |
| Department of Health                         |
| Health Care Voucher Unit, 1/F Central District Health Centre, |
| 1 Kau U Fong, Central, Hong Kong             |

| Invitation Ref.: | [DH HCVU/10-5/4] |
| Invitation Subject: | Application for Enrolment in the Elderly Health Assessment Pilot Programme |
| Application Closing Date and Time: | 12:00 noon on 24 April 2013 |

6. Contents of Proposal

6.1 Each application must contain two sets of:

(a) Application Form

The Application Form must be duly completed, signed, affixed with the organization chop of the Applicant and dated; and

(b) Operation Proposal

The Operation Proposal must contain the information set out in Appendix 1 of the Invitation Documents and must be duly signed, affixed with the organization chop of the Applicant and dated. It must also be accompanied with all relevant documents and information to enable the Government to assess the application.

6.2 All information provided in an application should be typed and printed in English with font size 12 and font type New Times Roman. Submission by email or facsimile will NOT be considered. Applications may not be considered if information given is not complete or if any information requested is not furnished in full. Failure to comply with the requirements in this clause may render the application invalid and the Government is not obliged to consider such application.
7. Application Closing Date and Time

7.1 All applications must be submitted before **12:00 noon** on the Application Closing Date. Late applications will NOT be considered.

7.2 In case a black rainstorm warning or tropical cyclone warning signal number 8 or above is issued or hoisted on the Application Closing Date at any time between 9:00 a.m. and 12:00 noon, the application closing time will be extended to 12:00 noon on the next working day which does not have either of the above warnings in Hong Kong in force at any time between 9:00 a.m. and 12:00 noon on such day.

8. Application to Remain Open

Applications submitted shall remain valid and open for acceptance by the Government on the terms and conditions set out in the Agreement until **28 June 2013**.

9. Acceptance

The successful Applicants will receive a notice of acceptance by facsimile or letter. Applicants who do not receive any notification by **28 June 2013** may assume that their applications have not been accepted.

10. Negotiation and Requests for Further Information

10.1 The Government may, but is not obliged to, negotiate with an Applicant the details of its Operation Proposal with a view to adjusting or varying the proposals contained in the Operation Proposal whenever necessary and may require an Applicant to submit any missing or further information in case of doubt.

10.2 An Applicant shall within three working days or such longer period as may be specified submit such clarification, information or document requested by the Government. If complete information is not provided as requested within the time allowed, the Government may refuse to consider the application or,
depending on the importance of the missing information or document to the Government, disqualify the application, or proceed to evaluate the application on an as is basis.

11. Applicants’ Enquiries

11.1 A briefing session will be held on 4/F, Argyle Street Jockey Club School Dental Clinic, 147 J Argyle Street, Kowloon on 27 March 2013 at 3:30 p.m. to answer enquiries from the interested NGOs on the Invitation Documents. In case a black rainstorm warning or a tropical cyclone warning signal number 8 or above is hoisted or in force at or after 12:00 noon on 27 March 2013, the briefing session will be cancelled and the Government will notify the arrangement of the next briefing session to the Applicants who have submitted the reply slip.

11.2 Each interested NGO may register three representatives for the briefing session. For enrolment, an NGO shall complete and return the reply slip in Appendix 4 of the Invitation Documents to the Department of Health by fax at 3582 4115 on or before 5:00 p.m. on 26 March 2013. Late registration will not be entertained.

11.3 Any enquiries from the interested NGOs with the Government concerning the Invitation Documents shall be in writing and shall be sent on or before 19 April 2013 to:

Nursing Officer (Health Care Voucher)
Health Care Voucher Unit of the Department of Health,
1/F Central District Health Centre,
1 Kau U Fong, Central, Hong Kong
[Fax : 3582 4115]

12. Cost of Application

The Government shall not be liable to any Applicant for any costs it has or may have incurred in its preparation, submission or presentation of an application under the Pilot Programme, or in explaining or clarifying the application, or in any communications with the Government in relation to the application, whether before, on or after the Application Closing Date.
13. **Documents of Unsuccessful Applicants**

Documents of unsuccessful Applicants will not be returned and may be destroyed six months after the Application Closing Date.

14. **Cancellation of Invitation**

Where there are changes in the assessment criteria or in the Pilot Programme after the Application Closing Date which are considered necessary by the Government due to operational reasons or any other reasons, the Government is not bound to accept any application which complies with the original assessment criteria and shall reserve the right to withdraw the invitation for submitting proposal under the Pilot Programme before the changes.

15. **Other Terms**

15.1 Any statement, oral or written, and any action made or taken by any Government officer in response to an enquiry made by an Applicant shall be for guidance and reference purposes only. Unless the Government otherwise specifies in writing, such statement shall not form part of these Invitation Documents and such statement or action shall not amplify, alter, negate, waive or otherwise vary any of the terms or conditions set out in the Invitation Documents.

15.2 The Government may issue addenda in respect of the terms and conditions of the Invitation Documents. Applicants shall acknowledge receipt of these addenda which, if comprising an amendment, clarification or adjustment to any provisions of the Invitation Documents, shall form part of the Invitation Documents and shall vary the Invitation Documents to the extent they amend, clarify or adjust the provisions of the Invitation Documents. Failure by any Applicant to acknowledge receipt as aforesaid may be considered as withdrawal of its Application.

15.3 The Government gives no warranty, representation or undertaking that (a) any information provided in the Invitation Documents is sufficient, accurate, complete, suitable or timely for any purpose whatsoever; or (b) there will be acceptance of any Operation Proposal from and/or any grant of Subvention to any Applicants. To the extent permitted by relevant and applicable laws, the
Government does not accept any liability or responsibility for (i) any claim, legal proceeding, liability, loss (including any direct or indirect loss, any loss of revenue, profit, business, contract or anticipated saving), (ii) any damages (including any direct, special, indirect or consequential damages of whatsoever nature) or (iii) any cost or expense, suffered or incurred by any Applicant arising from the use of, or reliance on, any information provided in the Invitation Documents.

15.4 Applicants acknowledge that the Government may elect at its sole discretion to accept all or any part of the Applicants’ Operation Proposals.
1. Agreement Period

The Agreement Period shall be the period as specified in the notice of acceptance issued by the Government under clause 9 of the Terms of Invitation, subject to any suspension or early termination of the Agreement as provided for in the Agreement.

2. Responsibilities of the Selected NGO

The Selected NGO shall provide the Approved Services in accordance with the Agreement.

3. Subvention and Terms of Payment

3.1 In consideration of the provision of the Approved Services in accordance with the terms and conditions of the Agreement, and subject to clause 8 hereof, the Government shall provide the Selected NGO a Subvention of such an amount calculated in accordance with clause 3.2.

3.2 The Government shall provide a subsidy in the sum of HK$1,200 for each Service User for obtaining the Approved Services. The amount of Subvention to be provided to a Selected NGO shall be calculated by multiplying HK$1,200, namely the amount of subsidy for each Service User, by the quota of Service User that the Government allocates to the Selected NGO.

3.3 The Subvention shall be apportioned in the following manner:

(a) health assessment part - 95% of the Subvention shall be used for provision of baseline health assessment and one or two episodes(s) of follow-up consultations as stipulated in Part 2 of the Terms of Agreement; and

(b) health promotion part - 5% of the Subvention shall be used for delivering health promotion sessions to Service Users as stipulated in Part 2 of the Terms of Agreement.
3.4 The Subvention shall be paid to the Selected NGO by five instalments. The first instalment of 20% of the health assessment part of the Subvention will be disbursed within 14 days after the start date of Agreement Period as specified in clause 1. The second, third and fourth instalments will be disbursed respectively within 14 days after the submission of the second, third and fourth progress report referred to in clause 7.10 of Part 2 of the Terms of Agreement. The amount to be disbursed for each instalment will be calculated by multiplying 90% of the health assessment part of the subsidy for each Service User (i.e. $1,200 x 95% x 90% = $1,026) with the cumulative number of Service Users who have completed the baseline health assessment and one or two episodes(s) of follow-up consultations as reported in the respective progress report, deducting the amount of Subvention already paid by the Government to the Selected NGO. The final instalment of the remaining amount of the health assessment part of the subsidy in respect of the Service Users who have completed the baseline health assessment and one or two episodes(s) of follow-up consultations as well as the health promotion part of the Subvention will be disbursed upon the submission of all the documents specified in clause 7.10 of Part 2 and clause 6.1 of Part 3 of the Terms of Agreement as well as the confirmation that the Approved Services have been completely delivered to the satisfaction of the Government and in accordance with the quota of Service User allocated. For the avoidance of doubt, under no circumstances shall the Selected NGO be entitled to any interest or compensation or relief of whatever nature against the Government by reason of any late payment or abstention from payment of the Subvention for any reasons whatsoever.

3.5 The Government shall have no obligation to disburse to the Selected NGO the full amount of Subvention under the following circumstances:

(a) if the number of Service Users who have received the baseline health assessment and follow-up consultations during the Agreement Period is less than the quota allocated to the Selected NGO;

(b) if the Selected NGO fails to conform to the required quality standards for conducting the baseline health assessment and follow-up consultations; and

(c) if the number of health promotion sessions delivered during the Agreement Period is less than what is required under Part 2 of the Terms of Agreement, or if the health promotion sessions delivered during the
Agreement Period are not in compliance with the requirements set out in Part 2 of the Terms of Agreement, the amount not to be disbursed shall be a pro-rata portion of the health promotion part of the Subvention which falls short of the relevant requirements.

3.6 The Subvention is inclusive of all fees, costs, charges, insurance premium and salaries incurred by the Selected NGO in the provision of the Approved Services. No price level adjustment shall be made to the Subvention.

3.7 Except for the Subvention under clause 3.2, the Government shall not be obliged to provide any remuneration, reimbursement or any other payment whatsoever to the Selected NGO for the provision of the Approved Services.

3.8 The Government is entitled to withhold or refuse the payment of any part of the Subvention in the event that any service of the Approved Services is not provided to the satisfaction of the Government or that the Government has any reasonable ground to withhold or refuse such payment.

3.9 Notwithstanding any provision herein, if the Government certifies at any time that the Government has overpaid the Selected NGO, the Government may:

(a) deduct such overpaid amount from any sums which may thereafter be payable by the Government to the Selected NGO; and

(b) direct the Selected NGO to forthwith repay the Government the amount overpaid on a date specified by the Government.

3.10 The Selected NGO shall not transfer in whatever manner any surplus, if any, arising from the provision of the Approved Services to its sponsoring body, if any, or any other person or organization. Such surplus shall only be used to improve the standard of the Approved Services, including the facilities for and the quality of staff employed in the provision of the Approved Services.

4. Co-payment by Service User

4.1 Each Service User is entitled to receive any services of the Approved Services provided by a Selected NGO on payment of HK$100 to the Selected NGO. The Selected NGO shall only use such payments collected to provide the Approved Services or improve the standard of the Approved Services, including the facilities for and the quality of staff employed in the provision of the Approved Services.
4.2 The payment of HK$100 will be waived in case of the following Service Users:

(a) Service Users who are Comprehensive Social Security Assistance (CSSA) recipients; and

(b) Service Users under the medical fee waiver mechanism of the medical social services unit of the public hospital or clinic; or the Integrated Family Service Centres or Family & Child Protective Services Unit of the Social Welfare Department.

4.3 The Government shall reimburse to the Selected NGO the waived payment specified in clause 4.2 upon confirmation by the Selected NGO that all the Approved Services have been completely delivered during the Agreement Period to the satisfaction of the Government. The performance and delivery of the Approved Services by the Selected NGO will be monitored by the Government in accordance with clause 7 of Part 2 and clause 6 of Part 3 of the Terms of Agreement.

5. **Representations, Warranties and Undertakings**

The Selected NGO represents, warrants and undertakes that:

(a) the Approved Services shall be performed and delivered in an impartial, timely and diligent manner and that the Selected NGO itself and every person it employs or engages for the provision of the Approved Services and the discharge of all its duties and obligations under this Agreement shall use or maintain such skill, care, diligence and attention as is expected of a person with the relevant expertise in services of such a nature as that of the Approved Services;

(b) all information supplied and all statements and representations made by or on behalf of the Selected NGO in its application for enrolment in the Pilot Programme and in its provision of the Approved Services, and in any reports or deliverables required to be provided to the Government under this Agreement are true, accurate, complete and not misleading;

(c) it shall comply, and shall ensure every person it employs or engages for the provision of the Approved Services and the discharge of all its duties and obligations under this Agreement shall comply, with all applicable enactments, laws, ordinances, rules and regulations in the provision of the Approved Services;

(d) it shall secure, obtain and maintain throughout the Agreement Period all
governmental or regulatory authorisations, approvals, consent, permits or licences which may be required or necessary for and the provision of the Approved Services or discharge of its obligations under the this Agreement;

(e) it has duly authorized, executed and delivered this Agreement; its performance of this Agreement does not and will not conflict with or contravene any judicial order or obligations under any contracts with third parties to which it is a party; and this Agreement constitutes a legal, valid and binding agreement to which it is a party; and

(f) it is and shall remain at all times throughout the Agreement Period a lawful and valid NGO, institution or trust of a public character operating medical clinic(s) and is exempt from tax under section 88 of the Inland Revenue Ordinance (Chapter 122 of the laws of Hong Kong).

6. **Indemnity**

6.1 The Selected NGO shall fully and effectively indemnify and keep indemnified the Government against:

(a) any claims, actions, investigations, demands, proceedings threatened, brought or instituted against the Government where such claims, actions, investigations, demands, proceedings arise out of or in relation to:

(1) any damage to property, personal injury or death caused to any person in connection with or in the course of or as a result of the provision of the Approved Services by the Selected NGO or its officers, employees, agents or contractors;

(2) the breach by the Selected NGO of any provision in this Agreement; or

(3) any act, omission or default of the Selected NGO or of any its officer, employee, agent, or contractor in the provision of the Approved Services.

(b) any liabilities, damages, losses, interests, costs, charges and expenses which the Government may sustain or incur as a result of the claims, actions, investigations, demands, proceedings in paragraph (a).

6.2 The provisions of this clause shall survive the suspension, expiry or termination of this Agreement and shall continue in full force and effect notwithstanding such suspension, expiry or termination.
7. **Equipment and Tools**

7.1 The Selected NGO shall ensure that all equipments, tools and vehicles used in the provision of the Approved Services are clean, hygienic, safe, of good working condition and properly maintained and used, and that, where surplus of the Subvention is used for procuring equipment, tools, vehicles and/or other services used in connection with the provision of the Approved Services, such equipments, tools, vehicles and/or other services are procured in a transparent, fair and cost-effective manner, having regard to the prevailing procurement policy and guidelines of the Government.

7.2 The Government shall not be liable to the Selected NGO for any loss and damages arising from or in connection with the use of any equipments, tools and vehicles in the provision of the Approved Services.

8. **Liability and Policy of Insurance**

8.1 The Government shall not be responsible or liable to the Selected NGO for any loss, costs, charges, damages or claims arising from or in connection with the provision of the Approved Services.

8.2 The Selected NGO shall at its own costs effect and maintain a valid policy of insurance against all claims, demand and liability, in particular the liability to its staff and Service Users, in relation to the provision of the Approved Services, with an insurance company authorised under the Insurance Companies Ordinance (Chapter 41 of the laws of Hong Kong) during the Agreement Period.

8.3 The necessary insurance policies shall include, without limitation:

(a) employees compensation insurance as required under the Employees’ Compensation Ordinance (Chapter 282 of the laws of Hong Kong) for staff involved in the provision of the Approved Services;

(b) an all-risks insurance which covers the equipment purchased or hired in relation to the provision of the Approved Services;

(c) a public liability insurance policy which covers the Pilot Programme; and

(d) where necessary, motor vehicle insurance as required by the Motor Vehicle Insurance (Third Party Risks) Ordinance.
The Selected NGO shall ensure that any liability for loss and damages relating to personal injury, death, loss and damage of property that may arise from or relates to the provision of the Approved Services are adequately covered by the insurance policy.

8.4 The Selected NGO shall provide free of charge a copy of the insurance policy referred to in clauses 8.2 and 8.3 to the Government upon the Government’s request.

8.5 The Selected NGO shall report any accident and claim arising from or in connection with the provision of the Approved Services and provide relevant information to the Government as soon as possible but not later than seven days after they are identified and shall report such accident and claim to the insurance company as may be required under the insurance policy referred to in clause 8.3.

8.6 The Selected NGO shall ensure that the healthcare professionals engaged for the provision of the Approved Services are sufficiently protected by insurance policy throughout the Agreement Period against any liability arising from their professional practice provided in connection with the Approved Services.

9. Suspension or Termination of Approved Status

9.1 The Government may at any time suspend the Agreement or terminate the Agreement by giving a Selected NGO thirty days’ prior written notice.

9.2 Without prejudice to its rights and actions against a Selected NGO, the Government may suspend or terminate the Agreement forthwith upon giving written notice to the Selected NGO if the Selected NGO or in respect to of the Selected NGO:

(a) fails to commence or provide the Approved Services with due care and diligence in accordance with the Agreement;

(b) fails to observe or is in breach of any of the terms, conditions, representations, warranties or undertakings of the Agreement or, where any of such failure capable of being remedied, fails to remedy the same to the satisfaction of the Government within seven working days (or such longer period as the Government may in its sole discretion allow) after the issue by the Government to the Selected NGO of a written notice requiring the Selected NGO to rectify the failure or breach;
(c) goes into liquidation, or a petition is being filed for the bankruptcy or the winding up of its services (other than a voluntary liquidation for the purpose of amalgamation or reconstruction previously approved by the Government in writing), or becomes insolvent or makes any composition or arrangement with its creditors or threatens to do any of the above or any judgment related to its provision of health assessment or other clinical service is made by any court against it or any similar occurrence under any jurisdiction that affects it, or a receiver has been appointed over any of its assets;

(d) is found to have submitted to the Government incomplete, incorrect, or misleading information required to be provided at the time of application for enrolment in the Pilot Programme or during the Agreement Period;

(e) is found to have failed to make any payment of any sums due to the Government under the Agreement;

(f) assigns, sub-contracts, transfers, licenses, disposes of or otherwise deals with the Agreement or any part thereof otherwise than in accordance with clause 12 or purports to do the aforesaid;

(g) fails to exercise reasonable and prudent financial management;

(h) fails to conform to the required service quality standards as stipulated in Part 2 of the Terms of Agreement – Services Provided under the Pilot Programme, and the relevant requirements as specified in the Schedule to the Terms of Agreement and fails to improve after repeated warnings from the Government;

(i) fails to ensure compliance, in all material aspects, of the requirements specified in any agreements, guidelines, notes, instructions or documents which may be issued by the Government Representative from time to time in connection with the Approved Services; or

(j) contravenes, or any of its directors, officers, members, employees, agents, contractors, if any, or any other personnel who are in any way involved in the provision of the Approved Services contravenes, the Prevention of Bribery Ordinance (Chapter 201 of the laws of Hong Kong) in connection with or in the fulfilment of its obligations under the Agreement.
10. **Consequence of Suspension and Termination**

10.1 In the event of suspension or early termination of the Agreement for whatever reason, the Government shall not be obliged to pay the Selected NGO any outstanding amount of the Subvention. If any amount of the Subvention has been made in advance by the Government to the Selected NGO, the Selected NGO shall refund the Government within fourteen days of the suspension or early termination a pro-rata portion of the Subvention for provision of such services under the Approved Services which are required to be provided but not provided.

10.2 No compensation whatsoever shall be payable by the Government to the Selected NGO for any suspension or early termination of the Agreement. The Government shall not be responsible for any loss, charges, costs or expenses suffered or incurred by the Selected NGO due to suspension or early termination of the Agreement.

10.3 Upon the termination of the Agreement, the Government shall cease to have any obligation under the Agreement.

10.4 Any termination or suspension of this Agreement howsoever occasioned shall not affect any accrued rights or liabilities of the Government or the Selected NGO under the Agreement.

10.5 The Selected NGO shall be liable for all expenses incurred by the Government as a result of the termination of the Agreement under clause 9.2.

11. **Confidentiality**

11.1 The Selected NGO undertakes not to disclose to any person any confidential information furnished by or on behalf of the Government in connection with the Pilot Programme or the Approved Services, or any records, database and materials developed, collected, created or compiled by the Selected NGO in carrying out, or otherwise for the purposes of, the Pilot Programme and the Approved Services (collectively “Confidential Information”), provided that this clause shall not apply:

   (a) in circumstances where such disclosure is necessary for the performance of its duties and obligations under this Agreement;

   (b) where the Confidential Information is already known to the recipient as a result of the provision of the Approved Services by the Selected NGO;
(c) where the Confidential Information has come into public domain;

(d) where disclosure is required pursuant to any applicable law or regulations or order of a court of Hong Kong; or

(e) where prior consent in writing of the Government has been obtained.

11.2 Without limiting the generality of clause 6, the Selected NGO shall indemnify and keep the Government fully and effectively indemnified against all actions, costs, claims, demands, expenses, loss, damage and liabilities whatsoever which the Government may suffer, incur or sustain as a result of its breach of this clause or breach of this clause by any person it employs or engages for the provision of the Approved Services.

11.3 The provisions of this clause shall survive the suspension, expiry or termination of this Agreement and shall continue in full force and effect notwithstanding such suspension, expiry or termination.

12. Assignment and Sub-contracting

The Selected NGO shall not assign, sub-contract, license, dispose of or otherwise transfer any of its interests, benefits, rights and obligations under the Agreement or any part, share or interest therein without the written consent of the Government. The Government may at any time assign, sub-contract, license, dispose of or otherwise transfer any or all of its interests, benefits, rights or obligations under the Agreement without the Selected NGO’s consent.

13. Compliance with Laws and Regulations

The Selected NGO shall at all times observe and comply, and shall ensure that every person employed or engaged by the Selected NGO for the purpose of discharging its duties and obligations under the Agreement observes and complies with all laws, by-laws, regulations and ordinances concerning employment, occupational safety and health, engagement of registered healthcare professionals and any other matters that may arise in the provision of the Approved Services.

14. Consent to Disclose

The Government shall have the power to disclose whenever it considers appropriate information concerning the Selected NGO and/or the Pilot Programme to a third party, including the details of the Approved Services.
provided by the Selected NGO, without any consultation with or consent from the Selected NGO if the disclosure is made under any one of the following circumstances:

(a) the disclosure of any information to any public officer or public body, as defined in the Interpretation and General Clauses Ordinance (Chapter 1 of the laws of Hong Kong) or any other person employed or engaged by the Government (including agents, advisers, contractors and consultants);

(b) the disclosure of any information already known to the third party;

(c) the disclosure of any information which is or becomes public knowledge; or

(d) the disclosure of any information in circumstances where such disclosure is required or permitted pursuant to any law or regulation of Hong Kong, or an order of a court of Hong Kong or a tribunal with competent jurisdiction.

15. Notices

15.1 Notices, demands or other communications given or made under this Agreement shall be in writing and delivered or sent to the relevant party at, in the case of the Government, Health Care Voucher Unit of the Department of Health, 1/F Central District Health Centre, 1 Kau U Fong, Central, Hong Kong or fax: 3582 4115 and, in the case of the Selected NGO, at the address or fax as provided in its Operation Proposal (or such other address or facsimile number as the addressee has by five days’ prior written notice specified to the other party).

15.2 Notices, demands or other communications as provided in clause 15.1 shall be deemed to have been duly given or made as follows:

(i) if sent by personal delivery, upon delivery at the address of the relevant party;

(ii) if sent by post, two working days (for local post) and five working days (for overseas post) after the date of posting; and

(iii) if sent by facsimile, when despatched with confirmed receipt as evidenced by the transmission report generated at the end of the transmission of such facsimile by the facsimile machine used for such transmission.
16. **Personal Data**

The personal data of any individual provided by the Selected NGO to the Government whether in the application for enrolment in the Pilot Programme or from time to time thereafter in connection with this Agreement (collectively, “Personal Data”) may be used by the Government for the purposes of administering and monitoring the implementation of the Pilot Programme, monitoring the delivery of the Approved Services, enforcing its rights under this Agreement, enhancing primary care for the elderly, research and all other purposes arising from or incidental to the aforementioned purposes.

17. **Variations**

Save in the situation as provided under clause 21, no amendment or supplement to the provisions of this Agreement shall be valid unless made and duly signed by the Government and the Selected NGO.

18. **Severability**

If any provision of this Agreement is or becomes illegal, invalid or unenforceable in any respect, such illegality, invalidity or unenforceability shall not affect the legality, validity or enforceability of the remaining provisions of this Agreement which shall remain in full force and effect.

19. **Relationship of the Parties**

The Selected NGO enters into this Agreement with the Government as a grantee of the Subvention under the Pilot Programme. The Selected NGO or any person it employs or engages for the provision of the Approved Services shall not represent itself as an employee, servant, agent or partner of the Government. Nothing in this Agreement or in the arrangements contemplated by it shall create a partnership or joint venture between the Government and the Selected NGO.

20. **Saving**

Nothing in this Agreement shall be taken to restrict, derogate from or otherwise interfere with any powers, discretions or duties, or the exercise or performance of any powers, discretions or duties, conferred or imposed by or under any law upon the Government, any Government bureau or department or any public officer or other person in the employ of the Government.
21. **Changes to the Pilot Programme**

The Government may withdraw the Pilot Programme or make changes of a fundamental nature to the operation of the Pilot Programme owing to change of circumstances or other reasons that the Government may consider appropriate. The Government is not obliged to pay the Selected NGO any compensation as a result of such withdrawal or changes.

22. **Governing Law and Jurisdiction**

This Agreement shall be governed by and construed in accordance with the laws of Hong Kong. The Government and the Selected NGO shall irrevocably submit to the exclusive jurisdiction of the courts of Hong Kong.
Part 2 - Services Provided under the Pilot Programme

1. Background

1.1 As pledged in the 2011-12 Policy Address, the Government will jointly implement with voluntary agencies a pilot project to provide health screening services for the elderly to enhance preventive care.

1.2 The Government has accordingly devised the Elderly Health Assessment Pilot Programme under which subvention will be granted to Selected NGO for providing health screening services for the elderly. The objective of the Pilot Programme is to promote healthy ageing and enhance primary care services for the elderly through a voluntary and protocol-based subsidized health assessment programme.

2. Aim

The Pilot Programme aims to facilitate early identification of Service Users’ health problems/risk factors which will then be followed up with timely and targeted interventions.

3. Service Users

The Service Users of the Pilot Programme are persons aged 70 or above in the relevant calendar year who hold valid Hong Kong Identity Card within the meaning of the Registration of Persons Ordinance (Chapter 177 of the laws of Hong Kong) or a valid Certificate of Exemption within the meaning of the Immigration Ordinance (Chapter 115 of the laws of Hong Kong) and who use the Approved Services provided by a Selected NGO under the Pilot Programme.

4. Approved Services to be provided by the Selected NGO

4.1 The Selected NGO will receive the Subvention from the Government for delivering the following health services to the Service User:
(a) Baseline health assessment ("Baseline Health Assessment");
(b) One or two episode(s) of follow-up consultations; and
(c) Health promotion sessions.

4.2 The selected NGO shall provide the Approved Services under the Pilot Programme based on a protocol developed by the NGO in accordance with (i) the “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings” ("Reference Framework"); (ii) Checklist of preventive care activities for an older adult at different stages; (iii) Recommended strategies for opportunistic screening of various functional disabilities appended in the Schedule. The Reference Framework provides common reference to healthcare professionals for the provision of continuing, comprehensive and evidence-based care for older adults in the community.

4.3 The Selected NGO shall employ sufficient qualified healthcare professionals and administrative staff to ensure the effective delivery of the Approved Services under the Pilot Programme. The health care professionals engaged in providing health services under the Pilot Programme shall be enrolees of the Elderly Health Care Voucher Scheme, if applicable.

4.4 The Selected NGO shall deploy a registered medical practitioner who is a Fellow of the Hong Kong Academy of Medicine (Family Medicine) or of the Hong Kong Academy of Medicine (Medicine) to be the clinical advisor ("Clinical Advisor") of the Pilot Programme. The Clinical Advisor shall have the following responsibilities:

(a) oversee the planning and implementation of the Pilot Programme within or by the Selected NGO;
(b) liaise with the Government Representative for the effective implementation of the Pilot Programme;
(c) monitor the progress of the Pilot Programme;
(d) plan and carry out quality assurance activities; and
(e) supervise and provide training and coaching to the health care professionals who deliver the Approved Services to the Service Users.
Baseline Health Assessment

4.5 The Baseline Health Assessment aims to systematically review and properly document the level of function and risk profile of a Service User such that a personalized preventive care plan can be delineated. The Baseline Health Assessment shall be built on existing information about the Service User, which should include physical, psychological and social factors.

4.6 The Baseline Health Assessment comprises the following components:

(a) History taking;
(b) Focused physical examination; and
(c) Investigations.

4.7 The Baseline Health Assessment shall be conducted by a registered medical practitioner. Where appropriate, the registered medical practitioner responsible for the Baseline Health Assessment may delegate tasks such as completing questionnaire for history taking or taking measurements for the physical examination (e.g. taking BP, pulse, etc.) to registered nurse or other healthcare workers under the supervision of registered nurse or registered medical practitioner.

4.8 In conducting the Baseline Health Assessment, a registered medical practitioner shall make reference to the Reference Framework and the checklist of preventive care activities for an older adult at different stages and recommended strategies for opportunistic screening of various functional disabilities appended in the Schedule; and shall take note of the Reference Framework’s “Statement of Intent”.

4.9 History taking shall include, without limitation, the following:

(a) past medical history;
(b) family history of significant illnesses;
(c) current medications (including over-the-counter medicines and herbal remedies) and any medications that may cause dry mouth as a side effect;
(d) lifestyle behaviour including smoking and drinking habit, diet pattern and physical activities;
(e) dental health problems (e.g. difficulty in chewing or brushing teeth) and dry mouth;
(f) vaccination history (especially seasonal influenza vaccination and
pneumococcal vaccination);
(g) psychological status, e.g. mood and emotion status;
(h) social history such as marital status, home environment, financial support, family support and social network;
(i) functional status: current level of mobility, e.g. independent, walk with aids; current ability and needs in terms of activities of daily living, and any recent deterioration;
(j) any significant change in lifestyle and mood; and
(k) history of fall.

4.10 **Focused physical examination** shall include, without limitation, the following:

(a) check height, weight, body mass index and waist circumference;
(b) measure blood pressure and check pulse;
(c) assess patient’s cognitive function to see if there is any clinical suspicion of dementia based on direct observation, with due consideration of information obtained by way of patient reports and concerns raised by family members, friends, caretakers or others if any;
(d) functional status as indicated: hearing, vision, mobility, cognition, mood; and
(e) obtain other measurements deemed appropriate based on medical and psycho-social history.

4.11 The Selected NGO shall provide the following examination items wherever the registered medical practitioner responsible for the Baseline Health Assessment considers it necessary after making reference to the relevant reference frameworks:

(a) Fasting blood glucose
(b) Total cholesterol and HDL-cholesterol
(c) Faecal occult blood
(d) Cervical Smear
(e) Triglyceride and LDL-cholesterol
(f) Renal function test
(g) HbA1c
(h) Urine for routine and microscopy
(i) Uric acid; and
(j) Resting ECG.
Note:

(i) For early identification of diabetes mellitus, hyperlipidaemia, colorectal cancer and cervical cancer. See the details in the “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings”.

(ii) For Service User with known hypertension. Checking of uric acid is indicated if on diuretic. Resting ECG is indicated for newly diagnosed hypertensive patients to exclude left ventricular hypertrophy. See the details in modules 4 and 8 of “Hong Kong Reference Framework for Hypertension for Adults in Primary Care Settings”.

(iii) For Service User with known diabetes mellitus. See the details in the “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings” and chapter 8.3, modules 5, 8 and 9 of “Hong Kong Reference Framework for Diabetes Care for Adults in Primary Care Settings”.

4.12 Registered medical practitioner engaged in the Pilot Programme shall exercise his professional judgement, make reference to the following reference frameworks (all accessible at www.pco.gov.hk/english/initiatives/frameworks.html) and discuss with the Service User the pros and cons when considering arranging the examination items set out in clause 4.11 for a Service User:

(a) “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings”;

(b) “Hong Kong Reference Framework for Hypertension for Adults in Primary Care Settings”; and

(c) “Hong Kong Reference Framework for Diabetes Care for Adults in Primary Care Settings”.

Follow–up consultation

4.13 The Selected NGO shall provide one or two episode(s) of follow-up consultations described in clauses 4.14, 4.15 and 4.16. The costs for the medication prescribed in the follow-up consultations will not be covered by the Subvention.
First episode

4.14 The first consultation is mandatory and should normally be conducted within two months after the Baseline Health Assessment. It shall be conducted by a registered medical practitioner who will:

(a) discuss the findings of the Baseline Health Assessment and the preventive care plan\(^1\) formulated with the Service User;

(b) provide health advice or counselling as appropriate;

(c) make appropriate referral and coordinate the health care services for the best interest of the Service User; and

(d) order further examination as necessary\(^2\).

4.15 The registered medical practitioner who conducts the Baseline Health Assessment is required to provide a written copy of the Baseline Health Assessment report and the preventive care plan to the Service User.

Second episode

4.16 The second consultation is subject to clinical indications based on the Baseline Health Assessment results and should normally be conducted within four months after the first consultation. It shall be conducted by a registered medical practitioner, a registered dentist, a registered physiotherapist, a registered occupational therapist, a dietitian or a registered nurse depending on the health problems of the Service User. The purpose of the second consultation is to follow up the health problems identified through the Baseline Health Assessment.

Health promotion sessions

4.17 The Selected NGO shall provide at least 3 health promotion sessions for

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\(^1\) The registered medical practitioners should refer to the “Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings” and the checklist of preventive care activities for an older adult at different stages and recommended strategies for opportunistic screening of various functional disabilities appended in the Schedule for guidance on formation of the preventive care plan.

\(^2\) If further examination items fall within the list set out in clause 4.11, the costs for such further examination will be covered by the Pilot Programme.
every 125 Service Users on any topics relevant to lifestyle modification or chronic disease management preferably at the centres where the Baseline Health Assessment services are provided and the number of sessions required to be delivered during the Agreement Period shall be calculated on a pro-rata basis according to the quota allocated to the Selected NGO. The aim of these health promotion sessions is to empower the elderly in managing their health problems. Suggested topics include but are not limited to:

(a) physical activity;
(b) healthy diet and nutrition;
(c) weight control;
(d) smoking cessation;
(e) alcohol and drinking;
(f) fall prevention;
(g) mental well-being;
(h) oral hygiene; and
(i) chronic disease management (e.g. hypertension or diabetes support group).

4.18 The health promotion sessions shall be delivered by registered medical practitioner, registered dentist, registered nurse, registered physiotherapist, registered occupational therapist or dietitian.

5. Publicity

5.1 The Selected NGO shall publicize the Pilot Programme to the elderly by their own means in the district where the Approved Services are to be provided, paying special attention to elders who have not obtained health assessment services before, who live alone or who are hard to be reached by other health assessment services. The Government will provide printed materials regarding the Pilot Programme to the Selected NGO for publicity purpose.

5.2 If the Selected NGO prepares other publicity materials relating to the Approved Services in which the Government’s involvement is directly or indirectly mentioned or implied, it shall submit all those materials to the Government Representative for prior approval before publication.

6. Laboratory services

6.1 The Hong Kong Laboratory Accreditation Scheme (“HOKLAS”) is a scheme
to accredit laboratory's capability to perform specific medical tests according to accreditation criteria and requirements for maintaining the quality. The Selected NGO shall ensure that the following medical test results are issued as HOKLAS - endorsed reports, or reports endorsed by equivalent accreditation scheme:

(a) Fasting blood glucose;
(b) Total cholesterol, HDL-cholesterol, LDL-cholesterol, Triglyceride;
(c) Renal function test;
(d) HbA1c;
(e) Urine for routine and microscopy;
(f) Uric acid/urate; and
(g) Cervical Smear.

6.2 Information about the laboratories accredited for performing the medical test in clause 6.1 in accordance with HOKLAS is available at the following link and the lists of such laboratories are under the medical testing “Chemical pathology” and “Gynaecological cytology”. The Selected NGO may obtain the relevant information at the link below for reference:


6.3 For the stool occult blood test, the Selected NGO shall use the immunochemical test (iFOBT) and conduct two separate iFOBTs on two stool samples collected from two separate bowel motions for each Service User. The iFOBT results are preferably to be issued as HOKLAS - endorsed reports, or reports endorsed by equivalent accreditation scheme.

7. Monitoring and Records

7.1 The Selected NGO shall keep a record for each Service User, including those information on individual Service User related to the Approved Services as required by the Government.

7.2 The Selected NGO shall make use of the eHealth System as the platform for checking a person’s eligibility for participation in the Pilot Programme and inputting all information required in the eHealth System.

7.3 The Government Representative will monitor the progress of the Approved Services and may from time to time issue to the Selected NGO such instructions or directions in writing relating to the operation of the Pilot
Programme which have to be followed and complied with by the Selected NGO. The Government will not be responsible for any costs not covered by the Subvention that may be incurred by the Selected NGO in following those instructions or directions.

7.4 Notwithstanding the instructions or directions in writing issued by the Government to the Selected NGO from time to time, the Selected NGO acknowledges that neither the Government, nor its employees, agents or advisers shall in any way be or be held or be deemed to be responsible for the direction or conduct of the affairs of the Selected NGO. In the absence of specific designation in writing as a directive of the Government, any advice, suggestions, comments or other indication given voluntarily by the Government or its employees, agents or advisers shall be deemed in all respects to be given on a purely personal basis and not as reflecting the view or position of the Government in any way and the Selected NGO shall accept and respond to any such advice, suggestion, comments or other indications entirely at its own discretion and risk for which the Government or its employees, agents or advisers shall not assume any liabilities.

7.5 The Government shall be entitled to conduct site inspection and visits upon giving prior reasonable notice by the Government Representative to the Selected NGO.

7.6 The Selected NGO shall attend monitoring / review meetings and provide returns and information as requested by the Government Representative.

7.7 The Selected NGO shall promptly notify the Government Representative of any matter, incident or change of circumstances that might affect its provision of the Approved Services.

7.8 The Selected NGO shall collect and provide all necessary statistics and information related to its provision of the Approved Services as required by the Government Representative on a regular basis or at such time and in such a manner as specified by the Government Representative. Such information includes but is not limited to service utilization and new health problem detection of individual Service User on anonymous basis, quality assurance activities, publicity actions, complaints received and handled and other relevant indicators for monitoring and evaluating the performance of the Selected NGO under the Pilot Programme as well as for research purposes. The Selected NGO shall ensure that the reported statistics are both accurate and timely.
7.9 The Selected NGO shall keep and maintain relevant service and financial records and other relevant records relating to its participation in the Pilot Programme for a period of not less than 7 years, including relevant form for obtaining consent of individual Service User on the use of the Approved Services as well as the purposes of collecting the necessary personal data.

7.10 The Selected NGO shall prepare and submit to the Government progress reports by the end of the 4th, 7th, 13th and 19th calendar month as from the start date of the Agreement Period in a format to be agreed by the Government. The Selected NGO shall also submit a final report within three months after the expiry of the Agreement Period in a format to be agreed by the Government. The progress reports and final report shall be supported with a self-certifying statement signed by the senior management of the Selected NGO that the Approved Services covered by the reports are in compliance with the relevant requirements specified in all agreements, guidelines, notes, instructions, etc. issued by the Government from time to time in relation to the provision of the Approved Services.

7.11 If the Selected NGO fails to conform to the required service quality standards as stipulated herein and the relevant requirements as specified in the Reference Framework stipulated in the clause 4.12 and the checklist and recommended strategies appended in the Schedule to the Terms of Agreement, it has to provide an explanation to the Government Representative and work out a plan to improve its services within a time frame to be agreed with the Government Representative. If the Selected NGO fails to improve after repeated warnings from the Government, the Government is entitled to reduce or withdraw such amount of the Subvention it considers appropriate.

8. Financial Management

The Selected NGO is responsible for operating an effective and sound financial management system, including budget planning, projection, accounting, internal control system and auditing for the provision of the Approved Services. It shall maintain books and records and supporting documents on income and expenditure for a period of not less than 7 years and make them available for inspection by the Government Representative as requested. It shall also submit financial reports and statements as required under clause 6 of Part 3 of the Terms of Agreement.
9. **Management Support**

9.1 The Selected NGO shall provide management support to staff involved in the provision of the Approved Services.

9.2 The Selected NGO shall put in place an internal control system to safeguard the proper and effective delivery of the Approved Services and shall notify the Government of any major medical incidents or irregularities as soon as possible but not later than seven days after they are identified, and forward a report on the results of any investigation and action taken to rectify the irregularities and any proposed measures to prevent recurrence of such irregularities by a time to be stipulated by the Government.

9.3 The Selected NGO shall establish proper procedures to safeguard against misuse and abuse of the Subvention.

9.4 The Selected NGO shall make arrangement to follow up with those Service Users who fail to turn up for an appointment for any service of the Approved Services with a view to enhancing their attendance and participation.

10. **Quality Assurance**

The Selected NGO shall have in place quality assurance measures to monitor the service quality of the Approved Services. The measures shall be developed and implemented in consultation with the Government Representative, and shall include, without limitation, the following actions:

(a) put in place a suggestion / complaint mechanism, provide a proper channel for Service Users and inform them of the right persons they can approach if they have any comments, suggestions or complaints concerning the delivery of the Approved Services;

(b) arrange clinical audits with an aim to improve the Approved Services;

(c) provide suitable guidance, supervision and training to health care professionals; and

(d) organize regular meeting to review and improve the Approved Services.
11. **Contingency Plan**

The Selected NGO should have in place a contingency plan for:

(a) handling critically ill Service User at their centre by trained personnel with appropriate skills and medical equipment; and

(b) the management of abnormal laboratory results which may warrant urgent medical attention.

12. **Evaluation**

The Government will conduct an evaluation on the Pilot Programme which may include, without limitation, the study of routine statistics and conduct of quantitative and qualitative studies. Other research projects related to the implementation of the Pilot Programme may also be conducted. The Selected NGO shall provide the information and support as requested by the Government Representative, either during or after the Agreement Period, to facilitate the conduct of such evaluation and research projects.

13. **Value-added Services**

The Selected NGO should provide as far as possible any value-added services to enhance the operation of the Pilot Programme.
Part 3 - Principles and Rules of Subvention

1. Basis of Subvention

The Selected NGO can use the Subvention for the provision of the Approved Services as it considers proper in accordance with the Agreement. The Government has no obligation to bail out the Selected NGO in case it runs into deficit by providing the Approved Services or participating in the Pilot Programme.

2. Payment of Subvention

Payment of the Subvention under the Pilot Programme will be made to the Selected NGO in accordance with clause 3 of Part 1 of the Terms of Agreement.

3. Anti-corruption Procedures

3.1 The Selected NGO is required to observe prevailing corruption prevention and anti-bribery laws and probity requirements such as avoidance and declaration of conflict of interest, restrictions of acceptance of advantage, and proper handling of confidential information as set out in the “Best Practice Checklist on Governance and Internal Control in Non-Governmental Organisations” issued by the Independent Commission Against Corruption (ICAC) in December 2010. It is the responsibility of the Selected NGO to ensure that its management and staff conform with the requirements of the Prevention of Bribery Ordinance (Chapter 201 of the laws of Hong Kong) and make reference to the relevant best practices drawn up by the ICAC.

3.2 The Commissioner of the ICAC or his authorized representative may examine the management and control procedures in the Selected NGO with a view to providing corruption prevention advice. The Selected NGO is expected to heed the advice given by the ICAC and to take such remedial actions as are appropriate.
4. **Financial Management**

4.1 The Selected NGO is responsible for operating an effective and sound financial management system, including budget planning, projection, accounting, internal control system and auditing, for the provision of the Approved Services.

4.2 The Selected NGO should always ensure that adequate internal control is in place having regard to the nature and size of its organization and the services provided, and should conduct compliance checks of its internal control systems regularly.

5. **Periodic progress reporting**

The Selected NGO shall submit the reports in accordance with the requirements stipulated in clause 7.10 of Part 2 of the Terms of Agreement.

6. **Reporting and auditing**

6.1 The Selected NGO shall submit the following documents in relation to the provision of the Approved Services at its own costs to the Government Representative within six months after the end of each financial year and within three months after the expiry of the Agreement Period:

(a) the latest audited annual financial statements of the Selected NGO as a whole;

(b) audited financial report including balance sheet, income statement, cash flow statement, and accounting policies and explanatory notes, details of inventories and surplus, if any, in respect of the Approved Services, actual number of Service Users joining the service and the necessary amount to be reimbursed, including the amount to be reimbursed under clause 4.3 of Part 1 of the Terms of Agreement; and

(c) a self-certifying statement signed by the senior management of the Selected NGO that they have conducted compliance checks of the internal control systems for the Approved Services.

6.2 The financial report in clause 6.1(b) above should be signed by the senior management of the Selected NGO certifying that the Subvention is used only for the Approved Services.
6.3 The Selected NGO must employ external auditors to audit the financial statements and financial report under clauses 6.1(a) and 6.1(b) in accordance with standards issued by the Hong Kong Institute of Certified Public Accountants. The auditors should be professional accountants registered under section 22 of the Professional Accountants Ordinance (Chapter 50 of the laws of Hong Kong). The Selected NGO shall provide the auditors with copy of all agreements, guidelines, notes, instructions, etc. issued by the Government from time to time in relation to the provision of the Approved Services and other relevant internal minutes and circulars within the Selected NGO.

6.4 In relation to the audited financial report of the Approved Services under clause 6.1(b), the auditors should express an opinion in the auditors’ report as to whether the Selected NGO has complied with the relevant requirements specified in all agreements, guidelines, notes, instructions, etc. issued by the Government from time to time in relation to the provision of the Approved Services.

6.5 The auditors should also prepare a management letter to report any findings during the course of audit, including any material irregularities, weaknesses in the internal control system or cases, which reveals that the Subvention is not expended in accordance with the guidelines or instruction of the Government issued in relation to the provision of the Approved Services.

7. Access to records and accounts

7.1. The Government Representative and the Director of Audit should have unhindered access to the records and accounts of the Selected NGO prepared for or in connection with the Pilot Programme. When so requested by the Government Representative or the Director of Audit, the Selected NGO is obliged to explain to them or their authorized representatives any matters relating to the receipt, expenditure or custody of any money derived from public funds.

7.2. The Director of Audit or other Government Representatives may carry out such examination he thinks fit into the provision of the Approved Services by the Selected NGO for the purpose of ensuring the economy, efficiency and effectiveness in the use of the Subvention by the Selected NGO.

8. Controlling Officer

8.1. Under the Public Finance Ordinance (Chapter 2 of the laws of Hong Kong), the controlling officer is responsible and accountable for the proper use of public
funds under his/her control. The controlling officer has to satisfy himself or herself that an appropriate system of cost control and monitoring is in place for overseeing the spending of public money by the Selected NGO, having regard to the economy, efficiency and effectiveness in the delivery of public service and use of public funds.

8.2. The controlling officer of the Subvention granted to the Selected NGO under the Pilot Programme is the Director of Health. He/she has the right to issue directions on all matters in relation to the Pilot Programme which shall be complied with by the Selected NGO in its provision of the Approved Services.

9. **Administration**

9.1 The principles and rules herein on allocation of Subvention to the Selected NGO for provision of the Approved Services will be monitored by the Government on a continual basis and may be revised from time to time in accordance with prevailing needs.

9.2 In its provision of the Approved Services, the Selected NGO shall observe the general principle of openness, fairness and transparency, and shall comply with all agreements, guidelines, notes, instructions or documents which may be issued by the Government Representative from time to time on new or revised policies and procedures.
1. **Hong Kong Reference Framework for Preventive Care for Older Adults in Primary Care Settings**

1.1 accessible at

2. **Checklist of preventive care activities for an older adult at different stages and recommended strategies for opportunistic screening of various functional disabilities**

2.1 **Table 1. Checklist of preventive care activities for an older adult at different stages**

<table>
<thead>
<tr>
<th>Preventive care activities</th>
<th>Independent with no known chronic diseases</th>
<th>Independent with chronic diseases</th>
<th>Older adults with disabilities</th>
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<tbody>
<tr>
<td><strong>Vaccination</strong></td>
<td>Influenza &amp; Pneumococcal vaccinations</td>
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<tr>
<td><strong>Promotion of healthy lifestyle</strong></td>
<td>Smoking</td>
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<td>Drinking</td>
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<td>Physical activity</td>
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<td>Diet and nutrition</td>
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<td>Oral health</td>
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<td><strong>Screening for overweight and underweight</strong></td>
<td>BMI +/- waist circumference</td>
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<td></td>
<td>Monitor body weight and assess risk of malnutrition</td>
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<tr>
<td><strong>Screening for HT</strong></td>
<td>Blood pressure and pulse</td>
<td></td>
<td></td>
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<tr>
<td><strong>Screening for DM</strong></td>
<td>Fasting blood sugar</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Screening for hyperlipidaemia</strong></td>
<td>Total cholesterol and high-density lipoprotein cholesterol (HDL-C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Cancer screening: Cervical and colorectal cancer</strong></td>
<td>Cervical cytology test</td>
<td></td>
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<tr>
<td></td>
<td>Faecal occult blood test (FOBT)</td>
<td></td>
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</tr>
<tr>
<td><strong>Opportunistic screening of functional impairment</strong></td>
<td>Hearing</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Vision</td>
<td></td>
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<tr>
<td></td>
<td>Incontinence</td>
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<tr>
<td></td>
<td>Falls</td>
<td></td>
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<tr>
<td></td>
<td>Dental</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depression</td>
<td>Dementia#</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social isolation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Terms of Agreement**

### Risk assessment of chronic diseases
- Perform risk assessment for secondary and tertiary prevention for diabetes and hypertension (if any)*

### Review use of medications
- Screen for problems related to medication use and polypharmacy

### Assess abilities on self care and daily living
- Screen for daily living problems by Basic Activities of Daily Living (ADL) and Instrumental ADL
- Assess Basic ADL and Instrumental ADL

### Assess social network and carer support
- Assess social network
- Assess the need of social and carer support
- Screen for carer stress

### End-of-life care
- End-of-life planning if deemed necessary

# Primary care providers should assess cognitive function whenever cognitive impairment or deterioration is suspected.

### 2.2 Table 2. Recommended strategies for opportunistic screening of various functional disabilities

<table>
<thead>
<tr>
<th>Functional disabilities</th>
<th>Preliminary screening</th>
<th>Further evaluation and corresponding actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inabilities on self-care or daily living</td>
<td>Check if the patient: 1. need any assistive devices for walking or 2. need assistance for daily activities of any kinds</td>
<td>- For any positive response, assess Basic Activities of Daily Living (ADL) and Instrumental ADL  - Determine underlying causes for the inability if any  - Explore potential for reversibility in function and institute appropriate medical, social or environmental interventions if necessary  - Consider the need of rehabilitation and further assessment if low score in Basic ADL and Instrumental ADL</td>
</tr>
<tr>
<td>Fall risk</td>
<td>Ask about history of falls within 6 months OR Presence of clinical conditions (e.g. stroke, Parkinson’s disease, osteoarthritis) that leads to either weakness of the lower limb, balance and/or gait impairment. The performance of One Leg Balance Test can provide additional information on the risk of injurious fall.</td>
<td>- For any positive response, proceeds for Timed Up and Go Test  - Consider referral to allied health professionals for direct assessment of the lower limb muscle power and balance and gait functions if appropriate  - High risk groups (e.g. presented with acute fall, with two or more falls within 6 months, Timed Up and Go Test &gt;14 seconds, demonstrate abnormalities of gait and/or balance) should be referred for a more comprehensive fall assessment and for consideration of multifactorial intervention</td>
</tr>
<tr>
<td>Impaired vision</td>
<td>Ask the patient, ‘Do you have difficulty in reading or doing any of your daily activities because of your eyesight?’ (even with</td>
<td>- If positive response, check visual acuity by Snellen Chart together with pinhole, as well as Amsler Grid Test  - Can consider referrals to health professionals (e.g.</td>
</tr>
<tr>
<td>Condition</td>
<td>Assessment</td>
<td>Actions</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Impaired hearing | Ask the patient, ‘Do you or your family think that you may have hearing loss?’               | - If positive response, can further assess the patient by whispered voice test or using an audioscope  
- If hearing impairment is suspected and affect activities of daily living, further clinical evaluation should be arranged and managed as appropriate  
- Patients with chronic otitis media or sudden hearing loss, or who have their daily activities affected by hearing impairment should be referred to an otolaryngologist for further assessment     |
| Incontinence | Ask standard questions, ‘Do you ever lose your urine or get wet?’                            | - If positive response, patients should be assessed to determine the diagnostic category as well as underlying aetiology. This can usually be determined on the basis of history, physical examination and urinary culture and microscopy  
- If surgery is indicated or disabling incontinence which refractory to conservative treatment, referral to specialists should be considered     |
| Depression    | Ask the patient, ‘Over the past 2 weeks, have you felt down, depressed, or hopeless?’ AND ‘Over the past 2 weeks, have you felt little’ | - For any positive response, proceed to the 15-item Geriatric Depression Scale (GDS-15) or Patient Health Questionnaire-9 (PHQ-9)  
- Individuals who score 8 or more points in GDS-15 or 5 or more     |
<table>
<thead>
<tr>
<th>Interest or pleasure in doing things?* Or use 4-item Geriatric Depression Scale (GDS-4)</th>
<th>Points in PHQ-9 should have full diagnostic interviews that use standard criteria (Diagnostic and Statistical Manual of Mental Disorders 4th edition, DSM IV) and further management as appropriate. - Patients with suicidal risk should be managed immediately</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral health</td>
<td>Ask the patient if any feeling of dry mouth, chewing problem or problem with brushing teeth. - Oral health Assessment Tool</td>
</tr>
<tr>
<td>Malnutrition</td>
<td>Monitor body weight and ask for any history of weight loss during the past 6 months. - Unintentional weight loss of 5% over the previous 1 month or 10% over the past 6 months should trigger for assessment of malnutrition risk and look for underlying causes. - Consider malnutrition assessment tools, i.e. Malnutrition Universal Screening Tool for Hong Kong Chinese (HKC-MUST), Chinese Nutritional Screening Tool (CNS) or Mini-Nutritional Assessment (MNA) for institutionalised older adults. - Consider a thorough nutritional assessment which includes medical history, medications review, dietary evaluation, oral problems, gastrointestinal disorders, neurological disorders, psychiatric disorders, social aspects, anthropometry, together with initial laboratory work up (e.g. albumin, RFT, LFT, and CBP with lymphocyte count) for those with high risk of malnutrition. - Management of malnutrition in older adults requires a</td>
</tr>
</tbody>
</table>
multidisciplinary approach that treats the underlying causes, improved nutritional status and multi-factorial intervention on co-morbidities

<table>
<thead>
<tr>
<th>Dementia</th>
<th><strong>Recommendation:</strong> Primary care providers should assess cognitive function whenever cognitive impairment or deterioration is suspected.</th>
<th><strong>Further evaluation and corresponding actions</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The common clinical presentations of dementia patients include:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. impaired ability to acquire and remember new information as manifested by symptoms such as repetitive questioning or conversations, misplacing personal belongings, forgetting events or appointments, getting lost on a familiar route.</td>
<td></td>
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<tr>
<td></td>
<td>2. impaired reasoning and handling of complex functional tasks to an extent that it interferes with everyday activities e.g. inability to manage finances, poor decision-making ability, inability to plan complex or sequential activities.</td>
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<td></td>
<td>3. language impairment e.g. having difficulty thinking of common words while speaking, hesitations or speech, spelling, and writing errors.</td>
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<td></td>
<td>4. decline in emotional control or motivation e.g. emotional lability, irritability, loss of empathy, loss of drive, social withdrawal, decreased interest in previous activities.</td>
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<td></td>
<td>5. change in personality and behaviour e.g. coarsening of social behaviours</td>
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<td></td>
<td>6. impaired visuospatial abilities e.g. inability to recognize faces or common objects or to find objects in direct view despite good visual acuity, inability to operate simple instruments or orient clothing to the body.</td>
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</tr>
<tr>
<td></td>
<td>- Perform Abbreviated Mental Test (AMT), Mini-Cog Test or Mini-Mental State Examination (MMSE)</td>
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<tr>
<td></td>
<td>- MMSE has additional benefit in assessing the severity of dementia</td>
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<tr>
<td></td>
<td>- Patient with suspected dementia should perform initial laboratory evaluation to rule out potentially reversible causes of dementia</td>
<td></td>
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<tr>
<td></td>
<td>- Neuroimaging and specialist referral should also be considered when dementia is highly suspected</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 1

Information to be Provided with the Operation Proposal

Applicants are required to provide the information listed below in their Operation Proposal stipulated in clause 6.1(b) of the Terms of Invitation. **A template for completing the required information is provided at Appendix 1A.**

Part A    Particulars and Experience of the Applicant

1. Particulars of the Applicant, including the name in both English and Chinese, registered office, nature of business / services, year of establishment, governance structure of medical services, key personnel and number of staff.

2. Documentary proof confirming that the Applicant is a bona fide non-profit making, charitable NGO and is exempt from tax under section 88 of the Inland Revenue Ordinance (Chapter 112 of the laws of Hong Kong).

3. The track record and experience (in terms of years) of the Applicant as at the Application Closing Date in operating medical clinic with provision of health assessment or other clinical services by registered medical practitioner for the elderly with relevant documentation.

4. The track record and experience (in terms of years) of the Applicant as at the Application Closing Date in operating primary care services delivered by registered nurse, registered dentist, registered physiotherapist, registered occupational therapist or dietitian for elderly with relevant documentation.

5. Brochures, pamphlets or any relevant materials setting out the background and details of the Applicant.

6. Any other information of the Applicant relevant to the application under the Pilot Programme.
Part B Details of the Proposal on the Operation of the Pilot Programme

Centre location and service capacity

1. Applicants should state in their Operation Proposal details on:

   (a) the location and settings of the centre(s) where they would like to operate the Pilot Programme;

   (b) the maximum number of Service Users who are expected to receive services under the Pilot Programme at each of the centre within a period of 24 months; and

   (c) provision of suitable facilities and equipment for the delivery of the services under the Pilot Programme.

Health care professional and laboratories

2. Applicants should state in their Operation Proposal:

   (a) the experience and qualification of the Clinical Advisor who will oversee the operation of the Pilot Programme, the required qualification and responsibilities of the Clinical Advisor are set out in clause 4.4 of Part 2 of the Terms of Agreement;

   (b) the number, experience and qualification of health care professionals who will provide services under the Pilot Programme to the Service User; and

3. Applicants should state in their Operation Proposal the details of the laboratory that would be engaged for delivering the laboratory test services, which should include, without limitation, the information on the accreditation of the laboratory under HOKLAS or other equivalent scheme with respect to medical testing, year of establishment of the laboratory and any other relevant information.
Operation Proposal

4. The Applicants should provide detailed description on their proposed plans and measures in respect of the following:

(a) overall strategy in providing services under the Pilot Programme and how the service quota be allocated to Service Users in an open and fair manner;

(b) detailed work plan in delivering the services under the Pilot Programme, including the proposed service protocol as required in clause 4.2 of Part 2 of the Terms of Agreement;

(c) promotion of the Pilot Programme to potential Service Users, in particular seeking to reach out elders who have not obtained health assessment services before, who live alone or who are hard to be reached by other health assessment services;

(d) monitoring and records system;

(e) quality assurance mechanism and actions;

(f) management framework, administration support and logistic for implementing the Pilot Programme;

(g) contingency plan for handling medical emergency at clinics as well as abnormal investigation results which may warrant urgent medical attention; and

(h) any value added services not specifically mentioned in the above and which are in the interest of the Service Users for the delivery of the services under the Pilot Programme.

Others

5. Additional information which may be relevant for the application may be provided by the Applicant
Part C  Signing of the Operation Proposal

Applicants are required to submit the Operation Proposal in duplicate and the last page of which shall include the following information and be duly signed:

- Name of Applicant: ______________________
- Date: ______________________
- Name of the person authorized to sign: ______________________
- Designation: ______________________
- Contact Telephone No.: ______________________
- Fax No.: ______________________

Signature of the person authorized to sign the proposal on behalf of the Applicant (with chop):
Appendix 1A

**Template for Operation Proposal for the Elderly Health Assessment Pilot Programme**

*(Please read “Information to be provided with the Operation Proposal” before completing. Please also provide documentary proof and supplementary information sheets as required.)*

<table>
<thead>
<tr>
<th>Part A</th>
<th>Particulars and Experience of the Applicant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of applicant (English):</td>
<td></td>
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<tr>
<td>(中文):</td>
<td></td>
</tr>
<tr>
<td>Registered office:</td>
<td></td>
</tr>
<tr>
<td>Nature of business/services, year of establishment:</td>
<td></td>
</tr>
<tr>
<td>Governance structure of medical services:</td>
<td></td>
</tr>
<tr>
<td>Key personnel &amp; no. of staff:</td>
<td></td>
</tr>
<tr>
<td>Track record and experience:</td>
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</tr>
<tr>
<td>Other information:</td>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Part B</th>
<th>Details of the Proposal on the Operation of the Pilot Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centre location and service capacity (Please separate the information for each centre):</td>
<td></td>
</tr>
<tr>
<td>Name of centre:</td>
<td></td>
</tr>
<tr>
<td>Location &amp; setting:</td>
<td></td>
</tr>
<tr>
<td>Services provided and capacity:</td>
<td></td>
</tr>
<tr>
<td>Maximum no. of service users expected:</td>
<td></td>
</tr>
<tr>
<td>Facilities &amp; equipment:</td>
<td></td>
</tr>
</tbody>
</table>

**Health care professional and laboratories**

| Name of Clinical Advisor: | |

---

Appendix 1

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<table>
<thead>
<tr>
<th>Experience &amp; qualification of Clinical Advisor:</th>
</tr>
</thead>
<tbody>
<tr>
<td>No., experience &amp; qualification of other health care professionals:</td>
</tr>
<tr>
<td>Details of laboratory engaged:</td>
</tr>
</tbody>
</table>

### Operation Proposal

<table>
<thead>
<tr>
<th>Overall strategy:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detailed work plan:</td>
</tr>
<tr>
<td>Promotion of programme:</td>
</tr>
<tr>
<td>Monitoring &amp; records system:</td>
</tr>
<tr>
<td>Quality assurance mechanism:</td>
</tr>
<tr>
<td>Management framework, administration support &amp; logistic:</td>
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<tr>
<td>Contingency Plan:</td>
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<tr>
<td>Value added services:</td>
</tr>
</tbody>
</table>

### Others

<table>
<thead>
<tr>
<th>Name of Applicant:</th>
<th>Signature of the person authorized to sign the proposal on behalf of the Applicant (with chop):</th>
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<tbody>
<tr>
<td>Date:</td>
<td></td>
</tr>
<tr>
<td>Name of the person authorized to sign:</td>
<td></td>
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<tr>
<td>Designation:</td>
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<tr>
<td>Contact Telephone No.:</td>
<td></td>
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<tr>
<td>Fax No.:</td>
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</table>
Appendix 2

Assessment Criteria

The application assessment will involve three stages which are as follows:

1. **Stage 1: Mandatory Requirement Evaluation Stage**

In Stage 1, Applicants will be assessed if they have complied with all the mandatory requirements ("Mandatory Requirements") set out below. Applicants will be disqualified immediately if they fail to meet any of these Mandatory Requirements.

<table>
<thead>
<tr>
<th>Mandatory Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The Applicant must be a bona-fide non-profit-making NGO and is exempt from tax under section 88 of the Inland Revenue Ordinance (Chapter 112 of the laws of Hong Kong).</td>
</tr>
<tr>
<td>2. The Applicant must be operating medical clinic with provision of health assessment or other clinic service by registered medical practitioner for the elderly at the Application Closing Date.</td>
</tr>
</tbody>
</table>

2. **Stage 2: Quality Criterion Evaluation Stage**

(a) In Stage 2, the Applicants should meet the Stage 1 Mandatory Requirements, and their Operation Proposals submitted will be assessed against the quality criteria below:

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Maximum item score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Background/relevant experience of the Applicant</td>
<td>25</td>
</tr>
<tr>
<td>(a) Background of the Applicant [Appendix 1 Part A(1) (2) (5) (6)]</td>
<td>9</td>
</tr>
<tr>
<td>(b) Experience in operating medical clinic with services provided by registered medical practitioner [Appendix 1 Part A(3)]</td>
<td>8</td>
</tr>
<tr>
<td>(c) Experience in operating other primary care services provided by registered dentist, registered nurse and allied health professionals [Appendix 1 Part A(4)]</td>
<td>8</td>
</tr>
<tr>
<td>Criteria</td>
<td>Maximum item score</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>--------------------</td>
</tr>
<tr>
<td><strong>Quality of the Operation Proposal:</strong></td>
<td>75</td>
</tr>
<tr>
<td>The proposal should show that the Applicant has a good, clear and thorough understanding of the objectives of the Pilot Programme and it has the required capacity and has devised a detailed plan to deliver the services under the Pilot Programme to the Service Users effectively and efficiently.</td>
<td></td>
</tr>
<tr>
<td>(a) (i) Service location, clinic settings and service capacity [Appendix 1 Part B(1)(a)(b)]; and (ii) Provision of suitable facilities and equipments for delivery of services [Appendix 1 Part B (1)(c)]</td>
<td>6</td>
</tr>
<tr>
<td>(b) Experience of the health care professionals [Appendix 1 Part B(2)]: (i) Clinical Advisor; and (ii) Health care professionals other than (i)</td>
<td>6</td>
</tr>
<tr>
<td>(c) Accreditation information and experience of the laboratory/laboratories in provision of medical test services [Appendix 1 Part B(3)]</td>
<td>8</td>
</tr>
<tr>
<td>(d) Overall strategy and work plan in delivering the services under the Pilot Programme [Appendix 1 Part B(4)(a)(b)]</td>
<td>14</td>
</tr>
<tr>
<td>(e) Promotion of the Pilot Programme to potential Service Users [Appendix 1 Part B(4)(c)]</td>
<td>4</td>
</tr>
<tr>
<td>(f) Monitoring and records system [Appendix 1 Part B(4)(d)]</td>
<td>8</td>
</tr>
<tr>
<td>(g) Quality assurance mechanism and actions [Appendix 1 Part B(4)(e)]</td>
<td>6</td>
</tr>
<tr>
<td>(h) Management framework, administration support and logistic [Appendix 1 Part B(5)(f)]</td>
<td>6</td>
</tr>
<tr>
<td>(i) Provision of suitable contingency plan [Appendix 1Part B(4)(g)]</td>
<td>4</td>
</tr>
<tr>
<td>(j) Value added services [Appendix 1 Part B(4)(h)]</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

(b) The maximum quality score is 100 and Applicants must attain the passing score of 50. Applicants who fail to obtain the passing score or fail to obtain half of the maximum score for any of the above quality criteria from 1(a) to (c) and 2(a) to (i) will not be considered further.
3. **Stage 3: Selection of Applicants**

Those Applicants who obtain the passing score will be considered according to the score attained and the volume of Baseline Health Assessment they could provide. Quotas with respect to Service Users are to be allocated to Selected NGOs in proportion to their service capacity as stated in the Operation Proposal, after considering factors such as geographic distribution of the Approved Services.
Appendix 3

Checklist for Submission of Application

Completed application in duplicate including the list of documents below shall be enclosed in a sealed plain envelope marked “Application for Enrolment in the Elderly Health Assessment Pilot Programme” and addressed to the Chairperson of the Application Assessment Panel. Incomplete applications may not be accepted.

- 1. Duly completed Application Form.

- 2. Documentary proof confirming that the Applicant is an NGO, institution or trust of a public character and is exempt from tax under section 88 of the Inland Revenue Ordinance (Chapter 122 of the laws of Hong Kong) and currently operating medical clinic(s).

- 3. A detailed operation proposal in duplicate copy as specified in Appendix 1 – Information to be Provided with the Operation Proposal.
To: Director of Health  
(Attn.: Nursing Officer (Health Care Voucher) )  
Facsimile No.: 3582 4115

**Reply Slip for Briefing Session**  
*(return on or before 5:00 p.m. on 26 March 2013)*

I/we would attend the following briefing session:

- **Date**: 27 March 2013  
- **Time**: 3:30 p.m.  
- **Venue**: 4/F, Argyle Street Jockey Club School Dental Clinic  
  147 J Argyle Street,  
  Kowloon

<table>
<thead>
<tr>
<th>Full name of Attendee(s)</th>
<th>Post/ Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr/ Mrs/ Ms/ Miss</td>
<td></td>
</tr>
<tr>
<td>Mr/ Mrs/ Ms/ Miss</td>
<td></td>
</tr>
<tr>
<td>Mr/ Mrs/ Ms/ Miss</td>
<td></td>
</tr>
</tbody>
</table>

**Name of NGO / Organization:**  
________________________________________

**Telephone No.:**  
________________________________________

**Facsimile No.:**  
________________________________________

**Mobile Phone No.:**  
________________________________________

**E-mail Address:**  
________________________________________