
2017 Annual Report on Justices of Peace Visits

**Administration Wing
of the Chief Secretary for Administration's Office**

JUSTICES OF THE PEACE VISITS

2017 Annual Report

This Annual Report provides an account of the work of Justices of the Peace (JPs) in the year 2017. The JPs visited designated institutions under the JP visit programme, handled complaints from persons in custody, inmates and detainees, and made suggestions and comments to institutions of their visit.

THE JP SYSTEM

2. The Justices of the Peace Ordinance (the Ordinance) (Cap. 510) provides the statutory basis for the operation of the JP system, including appointment, resignation and revocation of appointment, the powers and functions of JPs, and for matters incidental thereto or connected therewith. JPs are appointed by the Chief Executive under section 3(1) of the Ordinance. For administrative purpose, JPs appointed by virtue of their holding of certain offices in the public service are often referred to as Official JPs while others as Non-official JPs.

3. In 2017, 40 and 69 persons were appointed as Official and Non-official JPs respectively. As at 31 December 2017, there were 312 Official JPs and 1 394 Non-official JPs. An up-to-date list of JPs is available in the JP website (<http://www.info.gov.hk/jp>).

FUNCTIONS OF JPs

4. The main functions of JPs, as provided for in section 5 of the Ordinance, are as follows –

- (a) to visit custodial institutions and detained persons;
- (b) to take and receive declarations and to perform any other functions under the Oaths and Declarations Ordinance (Cap. 11);
- (c) in the case of a Non-official JP, to serve as a member of any advisory panel; and

- (d) to perform such other functions as may be conferred or imposed on him/her from time to time by the Chief Executive.

5. The primary role of a JP is to visit various institutions, such as prisons, detention centres, hospitals and remand/probation homes. The objective of the visits is to ensure that the rights of the inmates in the institutions are safeguarded through a system of regular visits by independent visitors.

JP VISIT PROGRAMME

6. In 2017, there were 112⁽¹⁾ institutions under the JP visit programme. Statutory visits to 39 institutions were conducted on a fortnightly, monthly or quarterly basis while visits to 73 institutions were arranged on an administrative basis once every quarter or every six months. The list of institutions under JP visit programme in 2017 is at **Annex A**.

7. In 2017, JPs conducted 723 visits to 112 institutions. On average, Non-official JPs⁽²⁾ each conducts one visit per annum while each Official JP conducts three to four visits each year.

VISIT ARRANGEMENTS

8. JP visits to custodial institutions are conducted under the respective legislation. For example, visits to prisons of the Correctional Services Department (CSD) are provided under the Prison Rules (Cap. 234A), visits to psychiatric hospitals are provided under the Mental Health Ordinance (Cap. 136), visits to detention centres of ICAC and Immigration Department (ImmD) are provided under the Independent Commission Against Corruption (Treatment of Detained Persons) Order (Cap. 204A) and Immigration (Treatment of Detainees) Order (Cap. 115E) respectively, and visits to remand/probation homes of Social Welfare Department (SWD) are provided under the Probation of Offenders Ordinance (Cap. 298) and Juvenile Offenders Ordinance (Cap. 226). Statutory visits are conducted on a fortnightly, monthly or quarterly basis. Furthermore, visits to hospitals of the Hospital Authority (HA), institutions for drug abusers operated by Non-governmental Organisations (NGOs) under the purview of Department of Health (DH), welfare institutions under the purview of SWD, and charitable organisation providing social services under the purview of

⁽¹⁾ The number of institutions in the JP visit programme increased from 111 in 2016 to 112 in 2017 as North Lantau Hospital has been added since January 2017.

⁽²⁾ Excluding those who are exempted from visiting duties because of old age, health or other reasons.

Home Affairs Department (HAD) are arranged on an administrative basis on a quarterly or half-yearly interval.

9. To ensure effective monitoring of the management of institutions under the JP visit programme, all JP visits are unannounced. The exact date and time are not made known to the institutions beforehand and JPs may conduct their visits at any reasonable time during their tour of duty. They may request to pay additional visits outside their tour of duty to follow up on or look into specific complaints if they so wish. Usually, two JPs are appointed to visit each institution according to the prescribed frequency. Non-official JPs may choose to pair with either an Official JP or a Non-official JP for the purpose of JP visits.

10. To help JPs focus on issues that require their attention during the visits, they are provided, before their visits, with checklists drawn up by the concerned departments which highlight the key areas that JPs may wish to cover when visiting different types of institutions. In addition, the JP Secretariat provides the visiting JPs with reports on outstanding complaints made by inmates of the institutions concerned so that the JPs may follow up on those complaints or other issues during their visits.

11. Upon arrival at CSD institutions, the visiting JPs usually receive from CSD staff a general briefing on the correctional institution and any requests for interviews that have been made by the persons in custody. During the visit, JPs have the opportunity to see all persons in custody within the institution and are free to speak to any of them. JPs may request CSD staff to provide other information about the correctional institution, such as the number of persons in custody in the institution at that moment, whether there are any persons in custody who have been temporarily transferred to other locations (e.g. for medical appointment at a hospital outside the institution or court attendance) on the visit day, etc.

12. Each year, the JP Secretariat organises a briefing to familiarise newly appointed JPs with the JP visit system as well as functions and duties of JPs. The last briefing was held in October 2017. 72 newly appointed JPs attended the briefing and heard from representatives of CSD, SWD and HA about their responsibilities as visiting JPs to institutions under the Department/Authority's management.

HANDLING OF COMPLAINTS/REQUESTS/ENQUIRIES

13. One of the important functions of JPs conducting visits to institutions is to ensure that complaints lodged by inmates are handled in a

fair and transparent manner. In the interest of privacy, visiting JPs may choose to speak to inmates in private. In such cases, the institution management will make necessary arrangements to facilitate the interview with inmates in private and render assistance to the JPs as required. The visiting JPs can either conduct investigations themselves by making personal inquiries into the inmates' complaints (such as seeking background information from staff of the institutions and examining relevant records and documents) or refer the complaints to the institutions concerned for investigations. In the latter cases, the institutions concerned will carry out investigations and report to the JPs the outcome of their investigations in writing.

14. Complaints that concern treatment of persons in custody in CSD institutions are generally referred to the Complaints Investigation Unit⁽³⁾ (CIU) for full investigation. For check and balance, the Correctional Services Department Complaints Committee⁽⁴⁾ (CSDCC) is vested with the authority to examine the outcomes of investigation conducted by CIU. If CSDCC is not satisfied with the investigation results, it will direct CIU to re-investigate the case. CIU will notify the complainant if its investigation results are endorsed by CSDCC. The CSD will also report to the relevant JPs the investigation results in writing. If a person in custody is not satisfied with the investigation results of CIU, he/she may appeal to the Correctional Services Department Complaints Appeal Board⁽⁵⁾ (CSDCAB) within 14 days. CSDCAB will handle appeals against the findings endorsed by CSDCC and make final decision on the appeal cases.

15. CSD will inform JPs of the outcome of all complaints in writing after the cases have been concluded (i.e. after the completion of investigation by the institution management or CIU and any appeal process thereafter). If the JPs are not satisfied with the investigation results and/or the follow-up actions taken, they may refer the case to other parties (e.g. The Ombudsman or the Police) for investigation as appropriate. In cases where the complaint has been referred to The Ombudsman, the Office of The Ombudsman will contact the complainant directly. CSD will inform the JPs of the investigation outcome if the complaint is related to CSD. For cases referred to the Police, CSD will inform the JPs of the investigation outcome of the Police in writing when it is available to CSD.

⁽³⁾ The Complaints Investigation Unit is responsible for conducting full investigation into complaints received by or referred to CSD concerning the treatment of persons in custody according to the complaints handling mechanism.

⁽⁴⁾ The CSD Complaints Committee is chaired by the Civil Secretary of CSD (a civilian staff), with the Assistant Commissioner (Quality Assurance), a Chaplain and four senior officers in the CSD Headquarters as members.

⁽⁵⁾ At present, 14 out of 18 non-official members of CSDCAB are Non-official JPs.

16. Other requests or enquiries made to JPs by inmates of the institutions are normally referred to the management of the institutions for consideration, and the relevant JPs are then informed of the actions taken by the management.

17. For other institutions, if the JPs are not satisfied with the investigation results and/or the follow-up actions taken, they may direct the institution concerned or refer the case to other parties (e.g. The Ombudsman or the Police) for investigation as appropriate. JPs are free to conduct any further visit or investigation personally as they consider necessary. They are also encouraged to discuss with the institution management and staff members, and inspect the complaint registers as appropriate to satisfy themselves that the management have handled previous complaints/requests/enquiries properly.

COMPLAINTS RECEIVED

18. In 2017, 245 complaints were received during JP visits, as compared with 192 received in 2016. Majority of these complaints⁽⁶⁾ were related to services provided by the institution (31%) and treatment and welfare (24%). Having conducted on-site inquiry during their visits, the JPs who received the complaints directed that no further action be taken on 132 of the 245 complaints. 73 complaints were referred by the JPs to the institution management for investigations or follow-up actions, and all were resolved through improvement measures or explanations given to the complainants. As for the remaining 40 complaints, 37 were referred to the CIU of the CSD for investigation and three were referred to other relevant government departments for their handling. 80 (71%) of the 113 complaints that required further action were followed up within one month⁽⁷⁾ (as compared to 84% in 2016). A summary of the statistics is at Table 1 below.

⁽⁶⁾ CSD classifies as complaints any verbal or written expression of dissatisfaction, whereas requests are made to obtain assistance from the Department.

⁽⁷⁾ In view of the nature and complication involved in 33 complaints (representing 29% of the 113 cases that required follow-up action) received during JP visits in 2017 (relating to the conduct of staff, unfair treatment, etc.), the departments have to seek inputs from various parties to conduct investigation. Hence, they have taken more than one month to follow up the complaints.

Table 1 – Number and category of complaints received in 2017

Category of complaints	Number of complaints in 2017	(%)
(i) Services provided by the institution (e.g. inadequate medical care, insufficient daily necessities, poor quality of food/catering services, etc.)	77	(31%)
(ii) Treatment and welfare (e.g. unfair assignment of work, improper handling of complaints/requests, etc.)	59	(24%)
(iii) Complaints against other departments/organisations	37	(15%)
(iv) Staff attitude and conduct (e.g. unnecessary or excessive use of force, use of impolite language, etc.)	32	(13%)
(v) Disciplinary action (e.g. unfair disciplinary proceedings, improper award of punishments, etc.)	14	(6%)
(vi) Facilities and equipment provided by the institution (e.g. inadequate toilet facilities, poor maintenance of equipment, etc.)	11	(5%)
(vii) Others	15	(6%)
Total :	245	

REQUESTS/ENQUIRIES RECEIVED

19. In 2017, 271 requests/enquiries were received during JP visits, as compared with 237 received in 2016. Majority of these requests were for assistance related to early discharge (50%) and improvement on services provided by the institution (18%). All requests/enquiries (as compared to 99% in 2016) were followed up within one month. A summary of the statistics is at Table 2 below.

Table 2 – Number and category of requests/enquiries received in 2017

Category of requests/enquiries	Number of requests/enquiries in 2017	(%)
(i) Request for early discharge from institution/home leave/release on recognisance	135	(50%)
(ii) Services provided by the institution (e.g. request for more medical attention, request for more choices of food, etc.)	50	(18%)
(iii) Treatment and welfare (e.g. request for making additional phone calls, change of work assignment, transfer to another institution, etc.)	40	(15%)
(iv) Matters in relation to other departments/organisations (e.g. application for legal aid, application for disabilities allowances, request for provision of housing after discharge, etc.)	21	(8%)
(v) Facilities and equipment provided by the institution (e.g. request for more recreational facilities, etc.)	19	(7%)
(vi) Others	6	(2%)
Total :	271	

SUGGESTIONS/COMMENTS MADE BY JPs

20. In addition to receiving complaints/requests/enquiries, the visiting JPs are required to record in the JP Visit Logbook their assessments as well as their suggestions/comments on the facilities and services provided at the institutions concerned at the end of each visit. Their suggestions/comments were mostly about the physical environment, facilities and equipment, and service quality of the institutions. JPs' assessments, suggestions and comments made in the JP Visit Logbooks help institutions focus on areas requiring improvement, and keep track of the general conditions of the facilities and improvements made. The JP Visit Logbooks have recently been revised to facilitate visiting JPs in recording the complaints/requests/enquiries they receive, the follow-up actions taken and the suggestions made by them during the visit.

21. As reflected in the Visit Logbooks, JPs were generally satisfied with the overall facilities and services provided by the institutions. In 2017, JPs made 182 suggestions/comments, as compared with 147 in 2016. 70% of suggestions/comments (as compared to 64% in 2016) were followed up within one month⁽⁸⁾. A summary of the statistics is at Table 3 below.

Table 3 – Number and category of suggestions/comments made in 2017

Category of suggestions/comments	Number of suggestions/comments in 2017	(%)
(i) Physical environment, facilities and equipment (e.g. need for refurbishment of the premises, replacement of old computers, etc.)	84	(46%)
(ii) Service quality (e.g. improvement of meal service, regular review of service need, etc.)	34	(19%)
(iii) Training programmes and recreational activities (e.g. provision of market-oriented vocational training, arrangement of more activities, etc.)	26	(14%)
(iv) Manpower planning (e.g. provision of staff training, measures to reduce staff wastage, etc.)	15	(8%)
(v) Others	23	(13%)
Total :	182	

22. Detailed statistics on the number of visits, complaints, requests/enquiries received and suggestions/comments made by JPs in the past three years are at **Annex B**.

23. Detailed statistics and information by groups of institutions, including those showing how complaints/requests/suggestions were received and handled by JPs and the effectiveness of JPs' recommendations are set out at **Annex C**.

⁽⁸⁾ Some JPs have made suggestions/comments relating to the redevelopment/large-scale renovation of institutions. In view of the scale of renovation work involved, the departments have taken more than one month to follow up with some of the suggestions/comments.

CONCLUSION

24. The Government attaches great importance to the JP visit system which serves as an effective channel, in addition to other established mechanisms, for inmates of custodial and other institutions to lodge their complaints and requests. The unannounced nature of JP visits facilitates the effective monitoring of the management of institutions under the JP visit programme. The rights of the inmates are safeguarded through this system of independent regular visits by JPs. Institutions concerned will look into complaints and report to JPs the investigation outcomes in writing. JPs are also free to conduct any further visit or investigation personally as they consider necessary or refer the case to other parties (e.g. The Ombudsman or the Police) for investigation as appropriate. In addition to ensuring that complaints lodged by inmates are handled in a fair and transparent manner, the JP visit system also provides an opportunity for JPs to make comments and suggestions on ways to improve the management of facilities and quality of services provided by the institutions. The Government will continue to keep the JP visit system under review and ensure its effectiveness.

Administration Wing
Chief Secretary for Administration's Office
October 2018

List of Institutions under JP Visit Programme in 2017

I. Statutory Visits

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
A. Prisons/correctional institutions for adults			
1.	Custodial Ward of Queen Elizabeth Hospital ⁽¹⁾	Fortnightly	CSD
2.	Custodial Ward of Queen Mary Hospital ⁽²⁾	Fortnightly	CSD
3.	Hei Ling Chau Correctional Institution ⁽³⁾	Fortnightly	CSD
4.	Lai Chi Kok Reception Centre ⁽¹⁾	Fortnightly	CSD
5.	Lo Wu Correctional Institution	Fortnightly	CSD
6.	Pak Sha Wan Correctional Institution	Fortnightly	CSD
7.	Pelican House ⁽⁴⁾	Monthly	CSD
8.	Pik Uk Prison	Fortnightly	CSD
9.	Shek Pik Prison	Fortnightly	CSD
10.	Siu Lam Psychiatric Centre	Fortnightly	CSD
11.	Stanley Prison	Fortnightly	CSD
12.	Tai Lam Centre for Women ⁽⁵⁾	Fortnightly	CSD
13.	Tai Lam Correctional Institution	Fortnightly	CSD
14.	Tong Fuk Correctional Institution	Fortnightly	CSD
15.	Tung Tau Correctional Institution	Fortnightly	CSD
B. Correctional institutions for young offenders			
16.	Bauhinia House ⁽⁵⁾	Fortnightly	CSD
17.	Cape Collinson Correctional Institution	Monthly	CSD
18.	Lai King Correctional Institution ⁽¹⁾	Fortnightly	CSD
19.	Phoenix House ⁽⁴⁾	Monthly	CSD

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
20.	Pik Uk Correctional Institution	Fortnightly	CSD
21.	Sha Tsui Correctional Institution ⁽⁶⁾	Fortnightly	CSD
22.	Tai Tam Gap Correctional Institution ⁽²⁾	Fortnightly	CSD
C. Institution for drug addicts			
23.	Hei Ling Chau Addiction Treatment Centre ⁽⁷⁾	Fortnightly	CSD
24.	Lai Sun Correctional Institution ⁽⁷⁾	Fortnightly	CSD
25.	Nei Kwu Correctional Institution ⁽³⁾	Fortnightly	CSD
D. Rehabilitation centres			
26.	Chi Lan Rehabilitation Centre ⁽¹⁾	Fortnightly	CSD
27.	Lai Chi Rehabilitation Centre ⁽⁶⁾	Fortnightly	CSD
28.	Lai Hang Rehabilitation Centre ⁽⁴⁾	Monthly	CSD
29.	Wai Lan Rehabilitation Centre ⁽⁵⁾	Fortnightly	CSD
E. Detention centres of ICAC and ImmD			
30.	Castle Peak Bay Immigration Centre	Fortnightly	ImmD
31.	Independent Commission Against Corruption Detention Centre	Fortnightly	ICAC
32.	Ma Tau Kok Detention Centre	Quarterly	ImmD
F. Psychiatric hospitals			
33.	Castle Peak Hospital	Monthly	HA
34.	Kowloon Psychiatric Observation Unit of Kowloon Hospital	Monthly	HA
35.	Kwai Chung Hospital	Monthly	HA
36.	New Territories East Psychiatric Observation Unit of Tai Po Hospital	Monthly	HA
37.	Pamela Youde Nethersole Eastern Psychiatric Observation Unit of the Pamela Youde Nethersole Eastern Hospital	Monthly	HA

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
	G. Remand home, places of refuge, probation home and reformatory school of SWD		
38.	Po Leung Kuk Wing Lung Bank Golden Jubilee Sheltered Workshop and Hostel	Quarterly	SWD
39.	Tuen Mun Children and Juvenile Home	Monthly	SWD

Notes:

- (1) The Custodial Ward of Queen Elizabeth Hospital (No. 1) and Lai Chi Kok Reception Centre (No. 4) used to be jointly visited by JPs. To better utilise resources, JPs have been conducting joint visits to the Custodial Ward of Queen Elizabeth Hospital (No. 1), Lai King Correctional Institution (No. 18) and Chi Lan Rehabilitation Centre (No. 26) since 1 July 2017. Meanwhile, Lai Chi Kok Reception Centre (No. 4) has become a standalone institution for JP visits.
- (2) The Custodial Ward of Queen Mary Hospital (No. 2) and Tai Tam Gap Correctional Institution (No. 22) are to be jointly visited.
- (3) Hei Ling Chau Correctional Institution (No. 3) and Nei Kwu Correctional Institution (No. 25) are to be jointly visited.
- (4) Pelican House (No. 7), Phoenix House (No. 19) and Lai Hang Rehabilitation Centre (No. 28) are to be jointly visited.
- (5) Tai Lam Centre for Women (No. 12), Bauhinia House (No. 16) and Wai Lan Rehabilitation Centre (No. 29) are to be jointly visited.
- (6) Sha Tsui Correctional Institution (No. 21) and Lai Chi Rehabilitation Centre (No. 27) are to be jointly visited.
- (7) Hei Ling Chau Addiction Treatment Centre (No. 23) and Lai Sun Correctional Institution (No. 24) are to be jointly visited.

Key :

- CSD – Correctional Services Department
ImmD – Immigration Department
ICAC – Independent Commission Against Corruption
HA – Hospital Authority
SWD – Social Welfare Department

II. Non-statutory Visits

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
A. Institutions for drug abusers of Non-governmental Organisations (NGOs)			
1.	The Society for the Aid and Rehabilitation of Drug Abusers Adult Female Rehabilitation Centre	Half-yearly	DH
2.	The Society for the Aid and Rehabilitation of Drug Abusers Au Tau Youth Centre	Half-yearly	DH
3.	The Society for the Aid and Rehabilitation of Drug Abusers Shek Kwu Chau Treatment and Rehabilitation Centre	Quarterly	DH
4.	The Society for the Aid and Rehabilitation of Drug Abusers Sister Aquinas Memorial Women's Treatment Centre	Quarterly	DH
B. Hospitals with accident and emergency services			
5.	Alice Ho Miu Ling Nethersole Hospital	Half-yearly	HA
6.	Caritas Medical Centre	Quarterly	HA
7.	Kwong Wah Hospital	Quarterly	HA
8.	North District Hospital	Half-yearly	HA
9.	North Lantau Hospital ⁽⁸⁾	Half-yearly	HA
10.	Pamela Youde Nethersole Eastern Hospital	Quarterly	HA
11.	Pok Oi Hospital	Half-yearly	HA
12.	Prince of Wales Hospital	Quarterly	HA
13.	Princess Margaret Hospital	Quarterly	HA
14.	Queen Elizabeth Hospital	Quarterly	HA
15.	Queen Mary Hospital	Quarterly	HA
16.	Ruttonjee Hospital ⁽⁹⁾	Half-yearly	HA
17.	St. John Hospital	Half-yearly	HA
18.	Tseung Kwan O Hospital	Half-yearly	HA
19.	Tuen Mun Hospital	Quarterly	HA

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
20.	United Christian Hospital	Quarterly	HA
21.	Yan Chai Hospital	Quarterly	HA
C. Psychiatric hospital			
22.	Siu Lam Hospital	Half-yearly	HA
D. Other hospitals			
23.	Bradbury Hospice	Half-yearly	HA
24.	Cheshire Home, Chung Hom Kok	Half-yearly	HA
25.	Cheshire Home, Shatin	Half-yearly	HA
26.	The Duchess of Kent Children's Hospital at Sandy Bay	Half-yearly	HA
27.	Grantham Hospital	Half-yearly	HA
28.	Haven of Hope Hospital	Half-yearly	HA
29.	Hong Kong Buddhist Hospital	Half-yearly	HA
30.	Hong Kong Eye Hospital	Half-yearly	HA
31.	Kowloon Hospital	Quarterly	HA
32.	MacLehose Medical Rehabilitation Centre	Half-yearly	HA
33.	Our Lady of Maryknoll Hospital	Half-yearly	HA
34.	Shatin Hospital	Half-yearly	HA
35.	Tai Po Hospital	Half-yearly	HA
36.	Tang Shiu Kin Hospital ⁽⁹⁾	Half-yearly	HA
37.	Tung Wah Eastern Hospital	Half-yearly	HA
38.	Tung Wah Group of Hospitals Fung Yiu King Hospital	Half-yearly	HA
39.	Tung Wah Group of Hospitals Wong Tai Sin Hospital	Half-yearly	HA
40.	Tung Wah Hospital	Half-yearly	HA
41.	Wong Chuk Hang Hospital	Half-yearly	HA

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
E. Children's homes of NGOs			
42.	Caritas-Hong Kong – Caritas Pelletier Hall	Half-yearly	SWD
43.	Hong Kong Juvenile Care Centre – Bradbury Hostel	Half-yearly	SWD
44.	Hong Kong Student Aid Society – Holland Hostel	Half-yearly	SWD
45.	Hong Kong Student Aid Society – Island Hostel	Half-yearly	SWD
46.	Sisters of the Good Shepherd – Marycove Centre	Half-yearly	SWD
47.	Society of Boys' Centres – Chak Yan Centre ⁽¹⁰⁾	Half-yearly	SWD
48.	Society of Boys' Centres – Cheung Hong Hostel	Half-yearly	SWD
49.	Society of Boys' Centres – Shing Tak Centre	Half-yearly	SWD
50.	Society of Boys' Centres – Un Chau Hostel	Half-yearly	SWD
51.	Tung Wah Group of Hospitals – Wing Yin Hostel	Half-yearly	SWD
F. Day and residential units for people with disabilities of SWD/NGOs			
52.	Caritas-Hong Kong – Caritas Jockey Club Lai King Rehabilitation Centre	Half-yearly	SWD
53.	Evangelical Lutheran Church Hong Kong – Kwai Shing Hostel	Half-yearly	SWD
54.	Fu Hong Society – Fu Hong Society Rehabilitation Centre	Half-yearly	SWD
55.	Haven of Hope Christian Service – Haven of Hope Hang Hau Care and Attention Home for Severely Disabled	Half-yearly	SWD
56.	Hong Kong Society for the Blind – Jockey Club Centre for the Blind	Half-yearly	SWD
57.	Hong Kong Society for the Blind – Jockey Club Tuen Mun Home for the Aged Blind	Half-yearly	SWD
58.	New Life Psychiatric Rehabilitation Association – New Life Building Long Stay Care Home	Half-yearly	SWD

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
59.	New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home ⁽¹¹⁾	Half-yearly	SWD
60.	Po Leung Kuk – Y C Cheng Centre	Half-yearly	SWD
61.	The Mental Health Association of Hong Kong – Jockey Club Building	Half-yearly	SWD
62.	The Salvation Army – Cheung Hong Community Day Rehabilitation and Residential Service	Half-yearly	SWD
63.	Tung Wah Group of Hospitals Ho Yuk Ching Workshop cum Hostel	Half-yearly	SWD
64.	Tung Wah Group of Hospitals – Jockey Club Rehabilitation Complex	Half-yearly	SWD
65.	Tung Wah Group of Hospitals – Wong Cho Tong Integrated Vocational Rehabilitation Centre cum Hostel ⁽¹²⁾	Half-yearly	SWD
G. Residential care homes for the elderly of NGOs			
66.	Caritas-Hong Kong – Caritas Li Ka Shing Care and Attention Home	Half-yearly	SWD
67.	Heung Hoi Ching Kok Lin Association – Buddhist Li Ka Shing Care and Attention Home for the Elderly	Half-yearly	SWD
68.	Heung Hoi Ching Kok Lin Association – Buddhist Po Ching Home for the Aged Women	Half-yearly	SWD
69.	Hong Kong Sheng Kung Hui Welfare Council Limited – Hong Kong Sheng Kung Hui Li Ka Shing Care and Attention Home for the Elderly	Half-yearly	SWD
70.	Sik Sik Yuen – Ho Yam Care and Attention Home for the Elderly	Half-yearly	SWD
71.	Tung Wah Group of Hospitals – Wong Cho Tong Care and Attention Home ⁽¹²⁾	Half-yearly	SWD
72.	Yan Chai Hospital – Chinachem Care and Attention Home	Half-yearly	SWD

No.	Name of institution	Frequency of JP visit	Responsible department/organisation
H. Charitable organisation providing social services			
73.	Po Leung Kuk	Quarterly	HAD

Notes:

- (8) North Lantau Hospital (No. 9) has been included under the JP visit programme since January 2017.
- (9) Ruttonjee Hospital (No. 16) and Tang Shiu Kin Hospital (No. 36) are to be jointly visited.
- (10) JP visits to Society of Boys' Centres – Chak Yan Centre (No. 47) were temporarily suspended from October 2017 to June 2018 due to renovation at the Centre. The Centre has been re-opened for JP visits in July 2018.
- (11) JP visits to New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home (No. 59) were temporarily suspended from May 2015 to January 2017 due to renovation at the Home. The Home has been re-opened for JP visits in February 2017.
- (12) Tung Wah Group of Hospitals – Wong Cho Tong Integrated Vocational Rehabilitation Centre cum Hostel (No. 65) and Tung Wah Group of Hospitals – Wong Cho Tong Care and Attention Home (No. 71) are to be jointly visited.

Key :

- DH – Department of Health
HA – Hospital Authority
HAD – Home Affairs Department
SWD – Social Welfare Department

**Statistics on Complaints, Requests/Enquiries Received and
Suggestions/Comments Made by JPs
from 2015 to 2017**

Institutions	No. of institutions under JP visit programme			No. of JP visits conducted			No. of complaints made to JPs			No. of requests/enquiries made to JPs			No. of suggestions/comments made by JPs		
	2015	2016	2017	2015	2016	2017	2015	2016	2017	2015	2016	2017	2015	2016	2017
Institutions of Correctional Services Department	30	29 ⁽¹⁾	29	431	426	426	115	162	209	65	41	48	23	26	36
Hospitals of Hospital Authority	41	41	42 ⁽²⁾	154	152	154	20	20	20	150	107	96	49	57	67
ICAC Detention Centre	1	1	1	25	24	24	0	0	0	0	3	0	0	1	1
Detention Centres of Immigration Department	2	2	2	28	28	28	3	10	15	42	86	126	5	5	6
Po Leung Kuk	1	1	1	4	4	4	0	0	0	0	0	0	0	0	2
Institutions for Drug Abusers operated by Non-governmental Organisations under the purview of Department of Health	4	4	4	10	12	12	0	0	0	0	0	0	10	9	12
Institutions of Social Welfare Department/ Non-governmental Organisations	33	33 ⁽³⁾	33 ⁽⁴⁾	70	74	75	0	0	1	0	0	1	57	49	58
Total :	112	111	112	722	720	723	138	192	245	257	237	271	144	147	182

(1) Excluding Ma Hang Prison which was closed in January 2015.

(2) North Lantau Hospital has been included under the JP visit programme since January 2017.

(3) JP visits to New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home were temporarily suspended from May 2015 to January 2017 due to renovation of the Home. The Home has been re-opened for JP visits in February 2017.

(4) JP visits to Society of Boys' Centres - Chak Yan Centre were temporarily suspended from October 2017 to June 2018 due to renovation at the Centre. The Centre has been re-opened for JP visits in July 2018.

Detailed Information on JP Visits to Individual Institutions

(from 1 January 2017 to 31 December 2017)

I. Institutions of the Correctional Services Department (CSD)

A. Statistics on complaints, requests/enquiries and suggestions/comments

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
1.	Cape Collinson Correctional Institution	12	0	0	0
2.	Custodial Ward of Queen Elizabeth Hospital/Lai Chi Kok Reception Centre ^{♦^}	12	3	5	4
3.	Hei Ling Chau Addition Treatment Centre/Lai Sun Correctional Institution [♦]	22	1	0	0
4.	Hei Ling Chau Correctional Institution/Nei Kwu Correctional Institution [♦]	22	3	0	4
5.	Lai Chi Kok Reception Centre [^]	12	8	2	8
6.	Lai King Correctional Institution/Chi Lan Rehabilitation Centre ^{♦^}	12	0	0	1
7.	Lai King Correctional Institution/Chi Lan Rehabilitation Centre/Custodial Ward of Queen Elizabeth Hospital ^{o^}	12	0	0	1
8.	Lo Wu Correctional Institution	24	31	10	0
9.	Pak Sha Wan Correctional Institution	24	0	2	0
10.	Phoenix House/Pelican House/Lai Hang Rehabilitation Centre ^o	12	0	0	2
11.	Pik Uk Correctional Institution	24	0	0	1
12.	Pik Uk Prison	24	0	0	1
13.	Sha Tsui Correctional Institution/Lai Chi Rehabilitation Centre [♦]	24	0	0	1
14.	Shek Pik Prison	24	15	1	1
15.	Siu Lam Psychiatric Centre	23	72	14	2

♦ Denotes visits covering two institutions.

[^] The Custodial Ward of Queen Elizabeth Hospital and Lai Chi Kok Reception Centre used to be jointly visited by JPs. To better utilise resources, JPs have been conducting joint visits to the Custodial Ward of Queen Elizabeth Hospital, Lai King Correctional Institution and Chi Lan Rehabilitation Centre since 1 July 2017. Meanwhile, Lai Chi Kok Reception Centre has become a standalone institution for JP visits.

^o Denotes visits covering three institutions.

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
16.	Stanley Prison	24	52	5	4
17.	Tai Lam Centre for Women/Bauhinia House/Wai Lan Rehabilitation Centre [○]	24	13	3	1
18.	Tai Lam Correctional Institution	24	5	1	2
19.	Tai Tam Gap Correctional Institution/Custodial Ward of Queen Mary Hospital [♦]	23	0	0	0
20.	Tong Fuk Correctional Institution	24	1	1	1
21.	Tung Tau Correctional Institution	24	5	4	2
	Total :	426	209	48	36

B. Statistics on satisfactory ratings given by JPs on the facilities and services provided*

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities [†]		Overall grading on services [†]	
			S	U	S	U
1.	Cape Collinson Correctional Institution	12	12	0	12	0
2.	Custodial Ward of Queen Elizabeth Hospital ^{△^}	12	12	0	12	0
	Lai Chi Kok Reception Centre ^{△^}		12	0	12	0
3.	Hei Ling Chau Addiction Treatment Centre [△]	22	22	0	22	0
	Lai Sun Correctional Institution [△]		22	0	22	0
4.	Hei Ling Chau Correctional Institution [△]	22	22	0	22	0
	Nei Kwu Correctional Institution [△]		22	0	22	0

Key : S – Satisfactory
U – Unsatisfactory

[○] Denotes visits covering three institutions.

[♦] Denotes visits covering two institutions.

^{*} During the visits, JPs looked at the facilities (such as facilities of the hospital, living accommodation, kitchen and general state of the premises) and assessed the services (including training programmes, recreational activities and management services) provided by the institutions concerned.

[△] Separate reports were completed by JPs for the specific institution.

[^] The Custodial Ward of Queen Elizabeth Hospital and Lai Chi Kok Reception Centre used to be jointly visited by JPs. To better utilise resources, JPs have been conducting joint visits to the Custodial Ward of Queen Elizabeth Hospital, Lai King Correctional Institution and Chi Lan Rehabilitation Centre since 1 July 2017. Meanwhile, Lai Chi Kok Reception Centre has become a standalone institution for JP visits.

[†] The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities ⁺		Overall grading on services ⁺	
			S	U	S	U
5.	Lai Chi Kok Reception Centre [^]	12	12	0	12	0
6.	Lai King Correctional Institution/ Chi Lan Rehabilitation Centre [^]	12	12	0	12	0
7.	Lai King Correctional Institution/ Chi Lan Rehabilitation Centre ^{Δ^}	12	12	0	12	0
	Custodial Ward Queen Elizabeth Hospital ^{Δ^}		12	0	12	0
8.	Lo Wu Correctional Institution	24	24	0	24	0
9.	Pak Sha Wan Correctional Institution	24	24	0	24	0
10.	Phoenix House/Pelican House/Lai Hang Rehabilitation Centre	12	12	0	11	0
11.	Pik Uk Correctional Institution	24	24	0	24	0
12.	Pik Uk Prison	24	24	0	24	0
13.	Sha Tsui Correctional Institution/ Lai Chi Rehabilitation Centre	24	24	0	24	0
14.	Shek Pik Prison	24	24	0	24	0
15.	Siu Lam Psychiatric Centre	23	23	0	23	0
16.	Stanley Prison	24	24	0	24	0
17.	Tai Lam Centre for Women ^Δ	24	24	0	24	0
	Bauhinia House/Wai Lan Rehabilitation Centre ^Δ		24	0	24	0
18.	Tai Lam Correctional Institution	24	24	0	24	0
19.	Tai Tam Gap Correctional Institution ^Δ	23	23	0	23	0
	Custodial Ward of Queen Mary Hospital ^Δ		23	0	23	0
20.	Tong Fuk Correctional Institution	24	24	0	24	0
21.	Tung Tau Correctional Institution	24	24	0	24	0
Total :		426	541	0	540	0

Key : S – Satisfactory
U – Unsatisfactory

[^] The Custodial Ward of Queen Elizabeth Hospital and Lai Chi Kok Reception Centre used to be jointly visited by JPs. To better utilise resources, JPs have been conducting joint visits to the Custodial Ward of Queen Elizabeth Hospital, Lai King Correctional Institution and Chi Lan Rehabilitation Centre since 1 July 2017. Meanwhile, Lai Chi Kok Reception Centre has become a standalone institution for JP visits.

^Δ Separate reports were completed by JPs for the specific institution.

⁺ The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. Summary of follow-up actions taken in respect of complaints made to JPs

209 complaints⁽¹⁾ in the following categories were made to JPs during their visits to institutions under the management of CSD –

Category of complaints	Number of complaints in 2017	(%)
(i) Services provided by the institution (e.g. inadequate medical care, insufficient daily necessities, poor quality of food/catering services, etc.)	64	(31%)
(ii) Treatment and welfare (e.g. unfair assignment of work, improper handling of complaints/requests, etc.)	57	(27%)
(iii) Complaints against other departments/organisations	35	(17%)
(iv) Staff attitude and conduct (e.g. unnecessary or excessive use of force, use of impolite language, etc.)	22	(10%)
(v) Disciplinary action (e.g. unfair disciplinary proceedings, improper award of punishments, etc.)	14	(7%)
(vi) Facilities and equipment provided by the institution (e.g. accommodation conditions and facilities, etc.)	9	(4%)
(vii) Others	8	(4%)
Total :	209	

Upon receipt of complaints, JPs sought background information from individual institutions, and examined the facilities, environment, services, treatment and relevant arrangements as well as the relevant records where applicable. A summary of the actions taken in response to the complaints made to JPs is tabulated below –

Category of complaints	Actions	Number of complaints in 2017	(%)
Complaints against other departments/	- No further action taken as directed by JPs after on-site enquiry	29	(14%)

⁽¹⁾ Among these 209 complaints, 122 cases were raised by five complainants, accounting for 58% of all complaints.

Category of complaints	Actions	Number of complaints in 2017	(%)
organisations (total: 35)	- Referred to institution management for follow-up and explanations given to complainants	3	(1%)
	- Referred to other government departments for handling	3	(1%)
Complaints against CSD (total: 173)	- No further action as directed by JPs (six due to incoherent nature of the complaints, 65 due to lack of solid information for further investigation, and 14 due to the fact that the JPs were satisfied the complaints had already been addressed or dealt with by the institutions before the JP visits)	85	(41%)
	- Referred to institution management for investigation or follow-up (all cases resolved by improvement measures made or explanations given, which both JPs and complainants found satisfactory)	51	(24%)
	- Referred to the Complaints Investigation Unit (CIU) of CSD for investigation (14 cases referred by CIU to institution management for follow-up and they were resolved by institution management; 15 found unsubstantiated after investigation by CIU; no further action could be	37	(18%)

Category of complaints	Actions	Number of complaints in 2017	(%)
	taken for three cases as the complainants declined to provide any information on the alleged matters to CIU; JPs were duly informed of and satisfied with the above investigation results. Five cases were still under CIU's investigation as of the date of issue of this Annual Report)		
Complaint related to the complainant's personal issue (total: 1)	- Referred to institution management for follow-up action (case resolved by improvement measure made, which both JPs and complainant found satisfactory)	1	(1%)
Total :		209	

Of the 209 complaints, 35 were related to category (iii): complaints against other departments/organisations, including complaints against court order, criminal investigation or legal aid application, etc. The JPs who received the complaints directed that no further action be taken on 29 cases after conducting on-site inquiry, given that the complainants had either gone through the appeal channels under the current legal system, or the complaints involved criminal investigations under the jurisdiction of other law enforcement agencies. The JPs referred three complaints to the institution management for follow-up, and directed the institutions to provide explanations to the complainants of these cases⁽²⁾. The remaining three complaints were referred to the Complaints Against Police Office (CAPO) for handling⁽³⁾. The JPs concerned were duly informed of the actions taken by the institutions, and they were satisfied and gave no further directive.

⁽²⁾ These three complaints were related to the investigation by the Police and the Office of The Ombudsman as well as legal aid application for review of sentence. The institution management had followed up the complaints by ensuring the complaint form of the Office of The Ombudsman had been sent out properly, keeping in view development of the case, and approaching the Police and the Legal Aid Services Council for up-to-date position of the Police investigation result and legal aid application.

⁽³⁾ These three complaints were related to the investigation outcome of a complaint case in 2012, use of unnecessary force by Police in an unidentified incident which took place before a complainant's imprisonment and the Police's slow handling of a case in which a complainant was a victim. The cases had been referred to CAPO for handling as per the JPs' directives.

Apart from the above-mentioned 35 complaints against other departments/organisations, there were 173 complaints against CSD, which were handled according to the circumstances of each case. The JPs concerned suggested no follow-up actions for 85 of these complaints, of which 65 were made without solid information provided by the complainants to support further investigation while six were made incoherently by the complainants. Regarding the remaining 14 complaints⁽⁴⁾, the JPs were satisfied that the allegations had already been addressed or dealt with by the institutions before the JP visits.

As for the remaining 88 complaints against CSD, 51 were related to medical care and treatment, dissatisfaction about the punishments imposed by Adjudicating Officer, handing-in/out articles from/to visitors, handling of mails, meal arrangement, facilities of institutions and grudges amongst persons in custody, etc. The institution management had looked into all 51 cases. While improvement measures had been carried out by the institutions for the complaints related to handing-in/out articles and institution maintenance works had been conducted in response to the complaints related to facilities, the JPs concerned requested the relevant institutions to handle the remaining complaints by explaining to the complainants their established mechanisms. The complainants were satisfied with the actions taken by the institution management after listening to the explanations. As regards those complaints related to medical care and treatment, the institutional medical officers (MOs) had provided suitable medical treatments and explanations to the complainants. JPs were also informed of the follow-up actions taken by institutions without raising further inquiries. All of the 51 complaints were thus resolved.

The remaining 37 complaints against CSD were referred by the JPs concerned to CIU of CSD for action. The allegations normally involved more complicated circumstances such as alleged staff misconduct and use of unnecessary force, etc. The complaints were handled according to the established complaints handling mechanism. Amongst the 37 complaints referred to CIU, 14 were related to the operation of the institutions and had thus been referred to the institution management for follow-up action. All of the 14 complaints were resolved by the institution management eventually and the JPs concerned were duly informed of the follow-up actions taken without raising further inquiries. As for the 23 complaints investigated by CIU, three complaints could not be followed

⁽⁴⁾ Two were on medical treatment which had either been handled by the institutional MOs or referred to Department of Health for follow-up before the JP visits; one was related to staff's handling procedure of a complainant's emotional outburst of which the complainant had already lodged written complaints to the Police, The Ombudsman and the Office of the Chief Executive before the JP visits. The remaining 11 cases had been addressed and dealt with by the institutions concerned in accordance with established mechanism, i.e. four out of 11 cases were on treatment related issues such as handling of mails and searching arrangement; four were on services provided by the institutions such as shower arrangement and food provision; the remaining three were on workshop facilities, disturbance by other persons in custody during prayer and the noise nuisance caused by staff during patrol at night.

up further as the complainants concerned declined to provide any information on the alleged matters. These complainants made no other complaint or request thereafter. The relevant JPs were duly informed of the cases and gave no further directive. 15 of the complaints investigated by CIU were found not substantiated⁽⁵⁾. All complainants were informed of the investigation outcomes without raising further complaint or request. There had been no appeal lodged to Correctional Services Department Complaints Appeal Board (CSDCAB) concerning the 15 complaints found not substantiated after CIU's investigation. The relevant JPs were also duly informed of the investigation results, and they were all satisfied and gave no further directives. The remaining five complaints, which had all been raised by one person in custody, were still under investigation by CIU.

Of the 209 complaints, one case was neither against CSD nor other departments/organisations, but about a complainant's recurrent toothache and her request for an earlier dental appointment at an outside hospital. The JPs concerned understood that the complainant's dental condition has all along been under close monitoring of the MO as well as the visiting dentist from the Department of Health (DH) with appropriate care and treatment rendered. They recommended the institution management to follow up the case accordingly and continue to render assistance to the complainant as appropriate. The complainant showed appreciation for the actions so taken by the institution management⁽⁶⁾. The JPs were informed of the follow-up actions taken by the institution. They were satisfied and raised no further inquiries.

⁽⁵⁾ In considering the investigation outcome of one of these complaints, Correctional Services Department Complaints Committee (CSDCC) made a comment that "Injury Report" should be compiled in a timely manner upon receipt of complaint. Heads of Institutions were subsequently reminded of the said observation.

⁽⁶⁾ Upon on-site enquiry, the JPs understood that before their visit to the institution, the complainant's recurrent toothache had already been referred to a specialist at an outside hospital with an appointment scheduled and the appointment had been advanced once by the specialist having considered the referral made by the MO. The JPs directed that the case be followed up by institution management according to the established mechanism. After the JP visit, the MO attended to the complainant and prescribed her with different medication to relieve her toothache. Besides, the complainant had also been arranged for an earlier consultation by a visiting dentist.

D. Summary of follow-up actions taken in respect of requests/enquiries made to JPs

48 requests/enquiries in the following categories were made to JPs during their visits to institutions under the management of CSD –

Category of requests/enquiries		Number of requests/enquiries in 2017	(%)
(i)	Treatment and welfare (e.g. request for making additional phone calls, change of work assignment, etc.)	20	(42%)
(ii)	Matters in relation to other departments/organisations (e.g. application for legal aid, etc.)	15	(31%)
(iii)	Request for early discharge from institution	6	(13%)
(iv)	Services provided by the institution (e.g. request for more medical attention, request for more choices of food, etc.)	5	(10%)
(v)	Facilities and equipment provided by the institution (e.g. request for gaining access to personal computer, etc.)	2	(4%)
Total :		48	

The 20 requests made under category (i): treatment and welfare and the five requests made under category (iv): services provided by the institution were related to diet, making of phone calls to family and lawyers, medical consultations, having a new pair of sandals to replace the one in use and assignment of dayroom/workshops, etc. Having examined the nature of the requests, the JPs concerned directed the institutions to provide explanations and/or assistance to the persons in custody as appropriate. The requests relating to medical care and treatments had been referred to MOs for assessment and recommendation. The persons in custody concerned were satisfied with the explanations and assistance rendered by the institution management. The JPs concerned were duly informed of the actions taken. They were satisfied and gave no further directive.

The 15 requests under category (ii): matters in relation to other departments/organisations were about the decisions made or services provided by other departments/organisations. Examples include withdrawing money from a bank, getting back money from a government department, enquiring about the reason for postponing the date of appeal hearing by an appeal board, requesting advancement of dental appointment date at public hospital and referring of cases

to other law enforcement agencies, etc.

The six requests under category (iii) were about requests for early discharge. Having examined the nature of the requests, the JPs concerned directed the institutions to provide explanations on the existing mechanism and/or medical assistance (for the requestors with mental illness and health concern) to the persons in custody as appropriate. The persons in custody concerned were satisfied with the explanations and/or assistance rendered by the institution management. The JPs concerned were duly informed of the actions taken. They were satisfied and gave no further directive.

The remaining two requests under category (v): facilities and equipment provided by the institution were about installing an additional fan inside a dormitory and gaining access to personal computer. Regarding the former request, the JPs concerned had conducted site inspection to the dormitory and were satisfied with the facilities therein. Regarding the request for gaining access to personal computer, the institution management had explained to the JPs concerned about the prevailing guidelines and procedures on access to computer. After listening to the explanation provided by the institution management, the JPs were satisfied and requested no further action.

E. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made 36 suggestions/comments in the following categories during their visits to institutions under the management of CSD –

Category of suggestions/comments		Number of suggestions/comments in 2017	(%)
(i)	Physical environment, facilities and equipment (e.g. need for refurbishment of ageing facilities and premises, etc.)	16	(45%)
(ii)	Service quality (e.g. improvement of library service, promotion of no-smoking culture, etc.)	13	(36%)
(iii)	Training programmes and recreational activities (e.g. provision of market-oriented vocational training)	3	(8%)
(iv)	Manpower planning (e.g. recruitment of retirees)	1	(3%)
(v)	Others	3	(8%)
Total :		36	

Nearly half of the suggestions were made under category (i): physical environment, facilities and equipment. Some JPs suggested conducting repair/maintenance works for worn-out facilities, expediting renovation works or re-development project for ageing premises, and improving the overcrowded environment in some institutions. As some of the institutions were not purpose-built and had been in use for decades, CSD had been adopting different measures to improve and replace some of the ageing facilities as well as alleviate the overcrowding situation. The redevelopment project of Tai Lam Centre for Women was completed and the institution had commenced operation in January 2017 with 128 additional penal places available to alleviate the overcrowding problem of high security risk female persons in custody. CSD would continue to work in collaboration with the relevant departments on the regular maintenance of worn-out and ageing facilities and premises in the institutions. CSD would also reshuffle resources in response to changing penal population.

For category (ii): service quality, some JPs suggested improving the rehabilitation services for persons in custody such as inviting rehabilitated persons to share their experiences with persons in custody, enhancing psychotherapy services to persons in custody in need, and providing more psychological support to young persons in custody and residents at halfway houses with regard to the influence of the Internet and information technology. CSD has all along been arranging rehabilitated persons to provide rehabilitation services to persons in custody regularly, such as sharing their experience with the persons in custody to strengthen their determination in turning over a new leaf after release. CSD would continue to offer appropriate programmes for persons in custody to facilitate their rehabilitation. Besides, CSD had implemented a pioneer initiative to integrate psychotherapy into the existing Drug Abuse Rehabilitation Programme at Nei Kwu Correctional Institution since mid 2017, and the feedback from participants had been positive. CSD would consider extending the programme to other persons in custody in need subject to the satisfactory result of the initiative and availability of resources. Concerning JPs' suggestions of providing more psychological support to young persons in custody and residents at halfway houses with regard to the influence of the Internet and information technology, the institution management has rendered appropriate support to the young persons in custody and residents through organising "Moral Education – Advantages and Disadvantages of Using Internet" and "Risk of Internet Addiction" counselling sessions and/or pre-release reintegration orientation course. The institutions concerned would review their rehabilitation programmes from time to time to cater for the rehabilitative needs of the young persons in custody and residents, and to facilitate their reintegration into society after release.

Some JPs suggested providing more reading materials in greater diversity of languages for persons in custody of different nationalities. In fact, CSD had

all along taken various measures to increase the quantity of reading materials of languages other than Chinese and English so as to cater for the needs of persons in custody of other nationalities, including direct procurement, accepting donations from stakeholders like consulates, borrowing from public libraries, etc. Currently, the total number of books available for persons in custody stands at nearly a hundred thousand.

Some JPs suggested extending the concept of no-smoking institution to other correctional facilities. CSD is committed to ensuring a secure, safe, humane, decent and healthy custodial environment. For the health of persons in custody, CSD has actively supported the Government's anti-smoking policy and promotes no-smoking culture among persons in custody through various anti-smoking measures including education, propaganda, counselling and smoking cessation courses. In addition to assigning Tung Tau Correctional Institution as the first "No-smoking Correctional Facility" on 1 January 2013, Pak Sha Wan Correctional Institution was assigned as another "No-smoking Correctional Facility" on 1 December 2014 to accommodate adult persons in custody who do not smoke. To further promote the culture, CSD has also set up "no-smoking zones" in other institutions including Stanley Prison and Lo Wu Correctional Institution. In the long run, CSD would make use of available resources and consider all viable measures to encourage more persons in custody who smoke to join the smoking cessation counselling programme and quit smoking. For instance, CSD plans to install the "Quit Smoking Mobile App" launched by the Tobacco Control Office under DH on tablets for use by newly admitted adult persons in custody and those who participate in the smoking cessation counselling programme, with a view to deepening their understanding of the harmful effects of smoking.

For category (iii): training programmes and recreational activities, while some JPs suggested enhancing construction-related vocational training programmes, others recommended more market-oriented vocational training programmes for persons in custody. CSD is committed to providing appropriate and diversified market-oriented vocational training courses to persons in custody with due consideration to their skill levels, rehabilitation programmes as well as the security and operational concerns of the institutions. In 2017, 40 market-oriented vocational training courses, with over 1 400 places, were provided for adult persons in custody due for discharge within three to 24 months to enrol on voluntary basis. These courses covered different fields including construction, business, food and beverage, retail, beauty care and logistics sectors, etc. As for young persons in custody under the age of 21, CSD organised a compulsory half-day education and half-day vocational training covering construction, business and service industries to guide them to better understand future directions and develop interests, so that they could choose to work or further their education after release. Arrangement had also been made to enable the enrolled persons in custody to sit for relevant examinations so as to obtain recognised qualifications,

thereby enhancing their employability and facilitating their smooth reintegration into society after release.

For category (iv): manpower planning, JPs suggested allowing retirees of CSD to be re-employed on contract term to relieve staff wastage situation. Since 2016, the Post-retirement Service Contract Scheme has been adopted in CSD under which a pool of retired staff had been re-employed to take up posts in correctional institutions.

For category (v): others, some JPs recommended drawing to the attention of the JPs visiting Phoenix House, Pelican House and Lai Hang Rehabilitation Centre that their visits might be arranged after normal office hours so that the JPs could meet more of the persons in custody who would return from their outside work after normal office hours. In fact, the arrangement had been set out in the prevailing “Guidelines for Visiting Justices”. The JPs concerned were subsequently informed of such and they were satisfied and raised no further inquiries. Some JPs enquired about CSD’s handling procedures in response to the allegations about maltreatment towards persons in custody. CSD had explained to the JPs concerned that CIU would carry out a fair, impartial and thorough investigation into each and every allegation raised by any persons in custody or refer those allegations to other law enforcement agencies for follow-up where appropriate. Some JPs suggested referring a person in custody’s case to the Mental Health Review Tribunal for review and the institution management had followed up accordingly as per the JPs’ suggestion. The JPs concerned were satisfied and raised no further inquiries.

II. Hospitals of the Hospital Authority (HA)

A. *Statistics on complaints, requests/enquiries and suggestions/comments*

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
1.	Alice Ho Miu Ling Nethersole Hospital	2	0	0	1
2.	Bradbury Hospice	2	0	0	0
3.	Caritas Medical Centre	4	0	0	1
4.	Castle Peak Hospital	12	1	3	1
5.	Cheshire Home, Chung Hom Kok	2	0	0	2
6.	Cheshire Home, Shatin	2	0	0	1
7.	The Duchess of Kent Children's Hospital at Sandy Bay	2	0	0	1
8.	Grantham Hospital	2	0	0	2
9.	Haven of Hope Hospital	2	0	0	0
10.	Hong Kong Buddhist Hospital	2	0	0	0
11.	Hong Kong Eye Hospital	2	0	0	1
12.	Kowloon Hospital	4	0	0	1
13.	Kowloon Psychiatric Observation Unit of Kowloon Hospital	12	0	18	9
14.	Kwai Chung Hospital	12	0	3	7
15.	Kwong Wah Hospital	4	0	0	1
16.	MacLehose Medical Rehabilitation Centre	2	0	0	2
17.	New Territories East Psychiatric Observation Unit of Tai Po Hospital	12	5	32	5
18.	North District Hospital	2	0	0	0
19.	North Lantau Hospital [□]	2	0	0	0
20.	Our Lady of Maryknoll Hospital	2	0	0	0
21.	Pamela Youde Nethersole Eastern Hospital	4	0	0	1
22.	Pamela Youde Nethersole Eastern Psychiatric Observation Unit of Pamela Youde Nethersole Eastern Hospital	12	14	40	2
23.	Pok Oi Hospital	2	0	0	1

[□] North Lantau Hospital has been included under the JP visit programme since January 2017.

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
24.	Prince of Wales Hospital	4	0	0	2
25.	Princess Margaret Hospital	4	0	0	3
26.	Queen Elizabeth Hospital	4	0	0	3
27.	Queen Mary Hospital	4	0	0	1
28.	Ruttonjee Hospital/Tang Shiu Kin Hospital [♦]	2	0	0	0
29.	Shatin Hospital	2	0	0	1
30.	Siu Lam Hospital	2	0	0	0
31.	St. John Hospital	2	0	0	1
32.	Tai Po Hospital	2	0	0	3
33.	Tseung Kwan O Hospital	2	0	0	2
34.	Tuen Mun Hospital	4	0	0	1
35.	Tung Wah Eastern Hospital	2	0	0	0
36.	Tung Wah Group of Hospitals Fung Yiu King Hospital	2	0	0	3
37.	Tung Wah Group of Hospitals Wong Tai Sin Hospital	2	0	0	0
38.	Tung Wah Hospital	2	0	0	1
39.	United Christian Hospital	4	0	0	3
40.	Wong Chuk Hang Hospital	2	0	0	1
41.	Yan Chai Hospital	4	0	0	3
	Total :	154	20	96	67

♦ Denotes visits covering two institutions.

B. Statistics on satisfactory ratings given by JPs on the facilities and services provided*

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities†		Overall grading on services†	
			S	U	S	U
1.	Alice Ho Miu Ling Nethersole Hospital	2	2	0	2	0
2.	Bradbury Hospice	2	2	0	2	0
3.	Caritas Medical Centre	4	4	0	4	0
4.	Castle Peak Hospital	12	10	0	10	0
5.	Cheshire Home, Chung Hom Kok	2	1	0	1	0
6.	Cheshire Home, Shatin	2	2	0	2	0
7.	The Duchess of Kent Children's Hospital at Sandy Bay	2	2	0	2	0
8.	Grantham Hospital	2	2	0	2	0
9.	Haven of Hope Hospital	2	2	0	2	0
10.	Hong Kong Buddhist Hospital	2	1	1 [‡]	2	0
11.	Hong Kong Eye Hospital	2	2	0	2	0
12.	Kowloon Hospital	4	3	0	3	0
13.	Kowloon Psychiatric Observation Unit of Kowloon Hospital	12	8	0	10	0
14.	Kwai Chung Hospital	12	10	0	12	0
15.	Kwong Wah Hospital	4	1	0	4	0
16.	MacLehose Medical Rehabilitation Centre	2	1	0	2	0
17.	New Territories East Psychiatric Observation Unit of Tai Po Hospital	12	11	1 [‡]	12	0
18.	North District Hospital	2	2	0	2	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as facilities of the ward, outpatient department and general state of the premises) and assessed the services (including patient care and catering/supporting/management services) provided by the institution concerned.

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

‡ The visiting JPs considered the building facilities of the hospital, in particular the palliative ward, could be further upgraded. The hospital staff explained to the JPs concerned that renovation project would commence soon. JPs were satisfied and made no further remarks. Renovation of the palliative ward concerned had been completed in early 2018.

‡ The visiting JPs considered the ward overcrowded. On the JPs' advice, the hospital had submitted a proposal for additional funding to expand the acute psychiatric wards by opening two more gazetted wards to accommodate the same number of beds.

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities†		Overall grading on services†	
			S	U	S	U
19.	North Lantau Hospital [□]	2	2	0	2	0
20.	Our Lady of Maryknoll Hospital	2	2	0	2	0
21.	Pamela Youde Nethersole Eastern Hospital	4	4	0	0	0
22.	Pamela Youde Nethersole Eastern Psychiatric Observation Unit of Pamela Youde Nethersole Eastern Hospital	12	9	0	10	0
23.	Pok Oi Hospital	2	1	0	1	0
24.	Prince of Wales Hospital	4	2	0	2	0
25.	Princess Margaret Hospital	4	3	0	2	0
26.	Queen Elizabeth Hospital	4	2	0	2	0
27.	Queen Mary Hospital	4	1	0	1	0
28.	Ruttonjee Hospital/Tang Shiu Kin Hospital	2	2	0	2	0
29.	Shatin Hospital	2	2	0	2	0
30.	Siu Lam Hospital	2	1	0	2	0
31.	St. John Hospital	2	2	0	2	0
32.	Tai Po Hospital	2	2	0	2	0
33.	Tseung Kwan O Hospital	2	2	0	2	0
34.	Tuen Mun Hospital	4	3	0	2	0
35.	Tung Wah Eastern Hospital	2	2	0	2	0
36.	Tung Wah Group of Hospitals Fung Yiu King Hospital	2	2	0	2	0
37.	Tung Wah Group of Hospitals Wong Tai Sin Hospital	2	0	0	0	0
38.	Tung Wah Hospital	2	1	0	1	0
39.	United Christian Hospital	4	4	0	3	0
40.	Wong Chuk Hang Hospital	2	0	0	1	0
41.	Yan Chai Hospital	4	4	0	4	0
Total :		154	119	2	125	0

Key : S – Satisfactory
U – Unsatisfactory

[□] North Lantau Hospital has been included under the JP visit programme since January 2017.

[†] The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. Summary of follow-up actions taken in respect of complaints made to JPs

20 complaints in the following categories were made to JPs during their visits to hospitals –

Category of complaints		Number of complaints in 2017	(%)
(i)	Staff attitude and conduct (e.g. prolonged restraint by staff, improper attitude of staff, etc.)	9	(45%)
(ii)	Services provided by the institution (e.g. inadequate medical care, insufficient daily necessities, poor quality of food/catering services, etc.)	3	(15%)
(iii)	Facilities and equipment provided by the institution (e.g. inadequate toilet facilities, poor maintenance of equipment, etc.)	1	(5%)
(iv)	Complaints against other departments/organisations	1	(5%)
(v)	Others	6	(30%)
Total :		20	

All of the 20 complaints were lodged by psychiatric patients. 13 of them were found unsubstantiated and related to the patients' hallucination and unstable mental condition. Six patients complained about detention and prolonged restraint. HA confirmed that all detentions had been made according to the Mental Health Ordinance (Cap. 136) with relevant information well documented. Moreover, restraint would only be applied if necessary and all details were logged on the patients' record. The JPs were satisfied with the handling procedures of the hospitals and raised no further questions. One patient complained about failing to receive dental service. It was found that the patient had repeatedly refused to attend in-house dental appointments arranged for him. There were four cases where patients expressed paranoid ideas and two cases where patients claimed they were poisoned by the concerned hospital, all confirmed to be unsubstantiated.

There were four complaints which could not be followed up. Two of them were related to the patients' subjective feelings towards certain hospital staff. No evidence was found nor specific examples were provided supporting the patients' complaints. A patient recalled restraint in another hospital in the past

and hospital staff had explained to her the possible reason for the said restraint. The patient showed her understanding and no follow-up action was required. The remaining case was about disturbance caused by another patient. The hospital had offered to re-arrange the location of the complainant’s bed but he declined. No other follow-up action was required.

One patient complained that the hospital lodged a criminal case against his violent behaviour against a hospital staff, resulting in the possibility of him being imprisoned and having a criminal record. The patient concerned was convicted of “Common Assault” and was fined \$500. No other follow-up action was required.

One patient complained that he was threatened by a staff and he requested to report the case to the Police. The hospital concerned reported the case to the Police after the patient had been seen by his case doctor. The patient was interviewed by the Police in the same afternoon and the case was found unsubstantiated. The hospital concerned also encouraged the patient to communicate with the Patient Relations Officer if he required further assistance.

The last case was about conflicts between patients. One of the patients had been re-assigned to another ward. Hospital staff had explained to the patient the need for separation and reassured the patient of fair treatment to all patients.

D. *Summary of follow-up actions taken in respect of requests/enquiries made to JPs*

96 requests/enquiries in the following categories were made to JPs during their visits to hospitals, all of which came from psychiatric patients –

Category of requests/enquiries		Number of requests/enquiries in 2017	(%)
(i)	Request relating to discharge from institution/home leave/release on recognisance	38	(40%)
(ii)	Services provided by the institution (e.g. request for more medical attention, request for more choices of food, etc.)	22	(23%)
(iii)	Facilities and equipment provided by the institution (e.g. request for more recreational facilities, etc.)	17	(18%)

Category of requests/enquiries		Number of requests/enquiries in 2017	(%)
(iv)	Treatment and welfare (e.g. request for more outdoor activities, request for flexible visiting hours, etc.)	10	(10%)
(v)	Matters in relation to other departments/organisations (e.g. request for provision of housing after discharge, etc.)	3	(3%)
(vi)	Others	6	(6%)
Total :		96	

Of the 38 requests under category (i), 36 requested for discharge/home leave. They were handled in accordance with the relevant provision of the Mental Health Ordinance (Cap. 136). Cases had been reviewed by the case doctors and senior clinical staff. Patients considered clinically not suitable for discharge had been advised of the rights to raise their concerns with the Mental Health Review Tribunal. As for the remaining two cases, patients requested not to be discharged and their views were acknowledged.

For requests under category (ii): services provided by the institution, eight were on food provision, of which six cases relating to enhancing the quality and quantity of food were followed up by the Hospital Catering Department. As for the remaining two cases, one patient claimed that hospital food made him constipate and another sought JPs' assistance to save her from being poisoned by the hospital. Both patients had been interviewed by case doctors and the allegations were found unsubstantiated. Two patients requested haircut and the requests had been followed up by the ward staff. Five patients requested change of medication and another five for more medical attention from non-psychiatric doctors and nurses as well as more dietetic care. Two patients requested change of doctors. All requests had been referred to case doctor/ward management for follow up.

For category (iii): facilities and equipment provided by the institution, eight requests were related to provision of extra recreational facilities, such as table-tennis table, and permission to listen to music at night with the patient's own smartphone while electric cord was considered to have potential hazard in psychiatric ward. Six were related to facilities in ward area, such as provision of warm tap water, stable air-conditioning supply and more rubbish bins, etc. Two were related to clothing. All cases had been followed up by the Hospital Facility

Management Department or ward administration staff. The remaining case was about the mix-ward arrangement, i.e. patients with different severity of psychiatric problems were allocated to the same ward. The hospital concerned had reassured the patient of its “zero tolerance” of bullying, and the enhanced measures adopted in identification of at-risk patients and staff observation to prevent bullying incidents. CCTVs were in place for better surveillance.

For category (iv): treatment and welfare, seven patients requested greater variety of ward activities, such as outdoor activities and practising musical instruments at ward, and flexible bathing time and visiting hours. Two patients requested transfer to another ward/hospital. The hospitals concerned had considered the requests and acceded to them as far as practicable. One patient sought assistance from social worker and the Immigration Department to return to the Mainland, and she was subsequently transferred back for further treatment.

For category (v): matters in relation to other departments/organisations, one patient requested the provision of public housing, and was subsequently referred to medical social workers for follow up. One patient requested waiver from hospital fees and another patient requested more assistance from social worker. All cases were followed up by the social workers.

For category (vi): others, two patients expressed their subjective feelings about their lives to JPs. One patient expressed his views towards global and local current affairs. The patients’ views were acknowledged. One patient requested JPs to look into his case as he was being prosecuted under the Hospital Authority Bylaws (the Bylaws). The purpose of the Bylaws were explained to the patient and he showed his understanding without making further enquiries. One patient requested the hospital to prepare a rehabilitation plan for him. The hospital concerned explained to the JPs that the rehabilitation plan was already in place and had been introduced to patients in need. The remaining patient showed appreciation to ward staff and the message had been conveyed to the staff.

All JPs concerned had been informed of the follow-up actions taken by the institutions. They were satisfied and raised no further questions.

E. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made 67 suggestions/comments in the following categories during their visits to hospitals –

Category of suggestions/comments		Number of suggestions/comments in 2017	(%)
(i)	Physical environment, facilities and equipment (e.g. need for refurbishment of the premises)	35	(53%)
(ii)	Manpower planning (e.g. provision of staff training, measures to reduce staff wastage, etc.)	10	(15%)
(iii)	Training programmes and recreational activities (e.g. provision of post-discharge psychological support, etc.)	8	(12%)
(iv)	Service quality (e.g. use of automation and computerisation, widening of food variety, etc.)	7	(10%)
(v)	Others	7	(10%)
Total :		67	

Regarding JPs' suggestions and comments made concerning category (i): physical environment, facilities and equipment, seven comments received were positive feedback on the environment and facilities of the hospitals. 12 comments were related to hospital expansion/redevelopment. Funding had been secured for some hospital projects while some were still in planning stage. Meanwhile, HA would continue to ensure all hospital premises are maintained properly. There were four comments concerning repair works required for hospital premises and one comment concerning the hygiene of a male psychiatric ward. The Facility Department of the hospital concerned and ward staff had promptly followed up JPs' comments by carrying out urgent repair and cleansing work. Eight comments were related to the replacement/installation of new equipment/facilities, including CCTVs, barrier-free access facilities, replacement of door with vision panel, etc. The hospital management noted JPs' recommendations and had followed up accordingly. Three recommendations were related to enriching the outdoor activities arranged for psychiatric patients. The suggested new elements would be incorporated as far as practicable.

Regarding JPs' comments under category (ii): manpower planning, two were satisfaction expressed towards the manpower status of the hospitals visited, while four concerned staff shortage problem. While staff recruitment would be an on-going process, HA had made efforts to review the remuneration package and consider offering night shift allowance to attract and retain staff. Four recommendations received from JPs were related to recruiting volunteers to help alleviate the workload in wards, such as through collaboration with universities. While most healthcare services should be provided by qualified professionals, the hospitals concerned would explore the possibilities of recruiting volunteers in response to JPs' suggestion.

As regards JPs' comments under category (iii): training programmes and recreational activities, two comments received were related to HA's "Art in Hospital" programme. JPs concerned supported the programme and encouraged HA to extend its scope. Two suggestions were related to the provision of post-discharge psychological support to patients and one was on the provision of newspaper in ward. All comments had been followed up accordingly by ward staff. Three JPs commented that early identification and intervention of psychological problems would be essential and the hospital concerned would work out appropriate health plans for patients.

Positive comments had been made by JPs under category (iv): service quality. JPs were highly impressed by the enthusiasm and professionalism of the staff. In particular, JPs commended the application of information technology and computerisation in ward. Four suggestions were related to the speeding up of automation and computerisation in wards. One JP suggested widening the food variety and another JP suggested providing interpretation service to patients in need. One JP noted the use of improper language by a frontline staff within the hospital premises. The hospital concerned had reminded all frontline staff and put up posters to remind patients and staff to respect others. All comments had been conveyed to the hospital management for follow up.

Comments under category (v): others were largely related to the transportation services to remote hospitals. While significant improvement had been made for one case after the change of the minibus operator, the remaining three cases would be followed up by the hospitals concerned with the Transport Department. Two comments were about improving the grouping of patients in wards. While the hospital concerned explained that the grouping of patients would hinge on the clinical environment, available space and manpower of the ward, the hospital had taken into consideration of JPs' comments and would

review the patient admission process. The last case was about the long waiting time of admission to halfway house and it had been referred to Social Welfare Department for follow up.

III. Independent Commission Against Corruption (ICAC) Detention Centre

A. Statistics on complaints, requests/enquiries and suggestions/comments

Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
ICAC Detention Centre	24	0	0	1

B. Statistics on satisfactory ratings given by JPs on the facilities and services provided*

Name of institution	No. of JP visits	Overall grading on facilities[†]		Overall grading on services[†]	
		S	U	S	U
ICAC Detention Centre	24	23	0	23	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as cells, interview room, search/medical/charge room and general state of the premises) and assessed the services (including food, bedding and management services) provided by the institution concerned.

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made one suggestion/comment in the following category during their visit to ICAC Detention Centre –

Category of suggestion/comment	Number of suggestion/comment in 2017	(%)
(i) Physical environment, facilities and equipment (e.g. improvement of brightness)	1	(100%)
Total :	1	

JPs suggested that the brightness of a cell room should be improved to create better sleeping environment for detainees. Arrangement had been made with the Electrical and Mechanical Services Department to replace an ageing transformer to ensure that the dim light switch of the cell room can function properly.

IV. Detention Centres of the Immigration Department (ImmD)

A. Statistics on complaints, requests/enquiries and suggestions/comments

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
1.	Castle Peak Bay Immigration Centre	24	15	125	2
2.	Ma Tau Kok Detention Centre	4	0	1	4
	Total :	28	15	126	6

*B. Statistics on satisfactory ratings given by JPs on the facilities and services provided**

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
1.	Castle Peak Bay Immigration Centre	24	23	0	24	0
2.	Ma Tau Kok Detention Centre	4	4	0	4	0
	Total :	28	27	0	28	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as dormitories, sanitation and hygiene, security and general state of the premises) and assessed the services (including meal/medical treatment arrangements, custody of detainees' properties and management services) provided by the institution concerned.

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. Summary of follow-up actions taken in respect of complaints made to JPs

15 complaints in the following categories were made to JPs during their visits to Castle Peak Bay Immigration Centre (CIC) –

Category of complaints	Number of complaints in 2017	(%)
(i) Services provided by the institution (e.g. inadequate medical care, insufficient daily necessities, poor quality of food/catering services, etc.)	9	(60%)
(ii) Treatment and welfare (e.g. search operation, etc.)	2	(12%)
(iii) Facilities and equipment provided by the institution (e.g. poor hygiene)	1	(7%)
(iv) Staff attitude and conduct (e.g. unnecessary or excessive use of force)	1	(7%)
(v) Complaints against other departments/organisations	1	(7%)
(vi) Others	1	(7%)
Total :	15	

Majority of the complaints were made under category (i): services provided by the institution (60%). Three detainees complained against the medical treatment received at CIC. According to prevailing arrangement, detainees would receive medical examination provided by MOs upon admission. Based on their medical examination results, MOs would arrange detainees to receive general or specialist treatments provided by public hospitals. CIC had explained to the JPs concerned that appropriate medical services had all along been provided to the detainees. Two detainees complained that they had been kept in the in-centre Sickbay. CIC responded that all detainees who felt sick would be arranged to receive medical examination thereat immediately. In response to the complaints, the MO had reviewed the health condition of the detainees concerned and concluded that they would have to be kept in the in-centre Sickbay in view of their health condition. Two detainees complained about the prescription of medication. The MO explained to JPs that the prescription of medication to detainees had been provided taking into consideration their health condition. The JPs concerned were satisfied and made no further comment. A detainee complained about insufficient daily necessities such as food, water, time for watching television and that smoking was prohibited during hospitalisation. JPs conducted inspection and were satisfied with the proper management of the facilities. CIC explained that reasonable arrangements had all along been made

to take care of the personal need of all detainees, including the provision of adequate food, drinking water, time for watching television, and that smoking is allowed at designated areas inside CIC. The remaining complaint was related to the quality of food provided. To follow up, food sample was inspected by the JPs and they were reassured that monitoring mechanism had all along been in place to ensure the quantity and quality of food. The JPs concerned were satisfied and gave no further directive.

For category (ii): treatment and welfare, a detainee complained that his dormitory had been searched in his absence. CIC explained that unannounced search operation would be conducted from time to time with a view to upholding the discipline of detainees and maintaining order thereat. During the search operation, all dayrooms and dormitories would be searched. CIC would try its best to strike an appropriate balance between the personal need of the detainees and the security at CIC. Another complaint was collectively lodged by a group of detainees about missing of personal items in their dormitories after a search operation. The detainees later recovered all their personal items concerned in the dormitories.

The complaint under category (iii): facilities and equipment provided by the institution was about hygiene. CIC explained that cleansing of floor was conducted by an outsourced contractor twice daily. To maintain a hygienic environment in CIC, detainees would also need to carry out cleansing work in the dayroom/dormitory/ward areas. Staff would conduct daily inspection to ensure that the hygiene condition was satisfactory.

Concerning category (iv): staff attitude and conduct, a detainee lodged a complaint against excessive use of force by staff during repatriation process. The detainee concerned was arranged to receive immediate medical examination by the MO of CIC and he was found to have sustained no obvious injury. The case was reported to the Police on the same day. After investigation, the Police concluded that there was no offence detected and no further action would be taken on the case. The detainee had been informed of the result and did not pursue further. The JPs had been duly informed of the actions taken. They were satisfied and gave no further directives.

For category (v): complaints against other departments/organisations, a detainee lodged a complaint against the Police for seizing his two mobile phones upon his arrest in Wong Tai Sin Police Station. The case was referred to the Police for follow up. The Police subsequently replied that they had not seized

any mobile phone from the detainee. The detainee had been informed of the findings of the Police and made no further complaints.

Regarding category (vi): others, the complaint was about request for interview by case officer. According to CIC's record, the detainee's non-refoulement claim was refused and his subsequent appeal filed to the Torture Claims Appeal Board/Non-refoulement Claims Petition Office was dismissed. The detainee was duly interviewed by the case officer and later by the welfare officer, and informed of the updated position of his case. The detainee was released on recognisance eventually.

All JPs concerned had been informed of the actions taken and made no further comment.

D. Summary of follow-up actions taken in respect of requests/enquiries made to JPs

126 requests/enquiries in the following categories were made to JPs during their visits to the CIC and Ma Tau Kok Detention Centre (MTKDC) –

Category of requests/enquiries	Number of requests/enquiries in 2017	(%)
(i) Request for early discharge from institution/home leave/release on recognisance	90	(72%)
(ii) Services provided by the institution (e.g. request for more medical attention, etc.)	23	(18%)
(iii) Treatment and welfare (e.g. request for discharge from medical observation, provision of interpretation service, etc.)	10	(8%)
(iv) Matters in relation to other departments/organisations (e.g. handling of non-refoulement claim, etc.)	3	(2%)
Total :	126	

The 90 requests under category (i): request for early discharge from institution/home leave/release on recognisance were mainly related to checking of case progress, request for interview by case officers, release on recognisance and early repatriation. These requests had been referred to relevant sections of the ImmD for follow up.

The 23 requests under category (ii): services provided by the institution were related to medical treatment. The detainees had been arranged to receive medical treatment and some had been transferred to specialist clinics in public hospitals for treatment.

For category (iii): treatment and welfare, some detainees had requested discharge from medical observation. Their requests had been conveyed to MOs for consideration, who later concluded that those detainees would have to remain under continual medical observation. Some detainees requested the provision of interpretation services. CIC had rendered necessary assistance to the detainees accordingly. A detainee asked whether his letter had been successfully sent out. JPs concerned inspected the mail register and confirmed that the letter had been sent out.

For category (iv): matters in relation to other departments/organisations, one detainee requested his appeal on non-refoulement claim to be handled fairly. The detainee had all along been legally represented during the screening process of his claim for non-refoulement protection and subsequent appeal. Since his admission to CIC, his legal representative had paid legal visits to him on 29 occasions, and was also present in the course of screening process and subsequent oral hearings. Necessary assistance had been rendered to the detainee to ensure procedural fairness of the whole non-refoulement claim process in accordance with the established mechanism. A detainee asked for the reason of being detained at CIC. CIC staff had explained to the detainee that his claim for non-refoulement protection was refused and subsequent appeal against the refusal decision filed to the Torture Claims Appeal Board/Non-refoulement Claims Petition Office was dismissed. Preparation of his repatriation was under active progress. Welfare officer had also interviewed the detainee and explained to him the reason of his detention at CIC. Another detainee requested ImmD and CSD not to impose pressure on him to abandon his appeal against conviction. CIC had explained to the JPs concerned that necessary assistance had along been rendered to the detainee by ImmD and CSD. To follow up, CIC staff had arranged an interview with the detainee to inform him of the latest position of his appeal case and the detainee had made no further request.

All JPs concerned had been informed of the actions taken and made no further comment.

E. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made six suggestions/comments in the following categories during their visits to CIC and MTKDC –

Category of suggestions/comments	Number of suggestions/comments in 2017	(%)
(i) Physical environment, facilities and equipment (e.g. improving air circulation and hygiene condition etc.)	3	(50%)
(ii) Training programmes and recreational activities (e.g. arrangement of more activities)	2	(33%)
(iii) Others	1	(17%)
Total :	6	

For category (i): physical environment, facilities and equipment, JPs suggested improving the ventilation of MTKDC. Arrangement had been made accordingly with the Architectural Services Department to enhance the ventilation system, and air purifiers had been installed. In response to JPs' suggestion on improving the hygiene condition of the detention cells, the frequency of refuse collection had been increased from three to four times per day with immediate effect. JPs' advice on maximising detention capacity would also be taken into account when planning detention facilities.

For category (ii): training programmes and recreational activities, JPs suggested that CIC organise interest groups and outdoor recreational activities for detainees. All detainees were encouraged to take part in various interest groups and recreational activities such as chess and sports. Furthermore, activities such as Bible sharing and health education seminars had been regularly organised by NGOs for the detainees. The welfare officers of CIC would continue to work closely with NGOs to explore collaboration opportunities with a view to further enriching the training programmes and recreational activities for the detainees.

For category (iii): others, JPs suggested reviewing the frequency of JP visits of MTKDC. ImmD had reviewed the present visit frequency, background of existing arrangements and the latest position of the centre and recommended maintaining the status quo.

V. Po Leung Kuk

A. *Statistics on complaints, requests/enquiries and suggestions/comments*

Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
Po Leung Kuk	4	0	0	2

B. *Statistics on satisfactory ratings given by JPs on the facilities and services provided**

Name of institution	No. of JP visits	Overall grading on facilities		Overall grading on services	
		S	U	S	U
Po Leung Kuk	4	4	0	4	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as dormitories, sheltered workshop and general state of the premises) and assessed the services (including residential/day care/rehabilitation services) provided by the institution concerned.

C. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made two suggestions/comments in the following categories during their visit to Po Leung Kuk –

Category of suggestion/comment		Number of suggestion/comment in 2017	(%)
(i)	Physical environment, facilities and equipment (e.g. living space in sleeping wards)	1	(50%)
(ii)	Manpower planning (e.g. management of staff-to-child ratio)	1	(50%)
Total :		2	

For category (i): physical environment, facilities and equipment, JPs commented that the sleeping areas were a bit packed. Po Leung Kuk would adopt flexible sleeping arrangement by setting up temporary bedspaces in multi-function hall to cater for unpredictable number of intake in urgent situations.

Concerning category (ii) manpower planning, JPs observed that it was quite often that the admission of the New Comers' Ward of Po Leung Kuk would exceed its capacity and thus, imposing difficulty for maintaining the staff-to-child ratio. Po Leung Kuk responded that it would continue to work closely with relevant Government departments to explore possible measures to relieve the problem and would strive for continuous service improvement.

VI. Institutions for Drug Abusers operated by Non-governmental Organisations under the purview of the Department of Health (DH)

A. *Statistics on complaints, requests/enquiries and suggestions/comments*

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
1.	The Society for the Aid and Rehabilitation of Drug Abusers Adult Female Rehabilitation Centre	2	0	0	1
2.	The Society for the Aid and Rehabilitation of Drug Abusers Au Tau Youth Centre	2	0	0	1
3.	The Society for the Aid and Rehabilitation of Drug Abusers Shek Kwu Chau Treatment and Rehabilitation Centre	4	0	0	3
4.	The Society for the Aid and Rehabilitation of Drug Abusers Sister Aquinas Memorial Women's Treatment Centre	4	0	0	7
Total :		12	0	0	12

B. *Statistics on satisfactory ratings given by JPs on the facilities and services provided**

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
1.	The Society for the Aid and Rehabilitation of Drug Abusers Adult Female Rehabilitation Centre	2	0	0	1	0
2.	The Society for the Aid and Rehabilitation of Drug Abusers Au Tau Youth Centre	2	2	0	2	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as living accommodation, kitchen and general state of the premises) and assessed the services (including training programmes, recreational activities and management services) provided by the institutions concerned.

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
3.	The Society for the Aid and Rehabilitation of Drug Abusers Shek Kwu Chau Treatment and Rehabilitation Centre	4	3	0	4	0
4.	The Society for the Aid and Rehabilitation of Drug Abusers Sister Aquinas Memorial Women's Treatment Centre	4	3	0	4	0
Total :		12	8	0	11	0

Key : S – Satisfactory
U – Unsatisfactory

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. *Summary of follow-up actions taken in respect of suggestions/comments made by JPs*

JPs made 12 suggestions/comments of the following categories during their visits –

Category of comments/suggestions	Number of comments/suggestions in 2017	(%)
(i) Physical environment, facilities and equipment (e.g. need for refurbishment of the premises)	7	(58%)
(ii) Training programmes and recreational activities (e.g. provision of vocational training)	2	(17%)
(iii) Others	3	(25%)
Total :	12	

For category (i): physical environment, facilities and equipment, JPs commented that the centres were generally old which required upgrading works. DH responded that they would continue to render necessary assistance and support in processing funding requests of the centres for the necessary resources.

Under category (ii): training programmes and recreational activities, JPs recommended the centres to arrange more vocational training for the residents. DH responded that the centres had daily routine timetable comprising different

vocational classes for the residents. The centres would apply for necessary resources to arrange other programmes.

For category (iii) others, JPs suggested the introduction of information technology such as tele-medicine, i.e. use of telecommunication and information technology to provide clinical health care from a distance. DH responded that the centre would explore the feasibility of implementing this initiative for future development with a view to enhancing service quality. Some JPs recommended the provision of counselling service by clinical psychologists. The centres would apply for necessary resources, and DH would render support and assistance in processing funding requests.

VII. Institutions of the Social Welfare Department (SWD)/Non-governmental Organisations

A. Statistics on complaints, requests/enquiries and suggestions/comments

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
1.	Caritas-Hong Kong – Caritas Jockey Club Lai King Rehabilitation Centre	2	0	0	1
2.	Caritas-Hong Kong – Caritas Li Ka Shing Care and Attention Home	2	0	0	0
3.	Caritas-Hong Kong – Caritas Pelletier Hall	2	0	0	1
4.	Evangelical Lutheran Church Hong Kong – Kwai Shing Hostel	2	0	0	2
5.	Fu Hong Society – Fu Hong Society Rehabilitation Centre	2	0	0	0
6.	Haven of Hope Christian Service – Haven of Hope Hang Hau Care and Attention Home for Severely Disabled	2	0	0	0
7.	Heung Hoi Ching Kok Lin Association – Buddhist Li Ka Shing Care and Attention Home for the Elderly	2	0	0	0
8.	Heung Hoi Ching Kok Lin Association – Buddhist Po Ching Home for the Aged Women	2	0	0	0
9.	Hong Kong Juvenile Care Centre – Bradbury Hostel	2	0	0	1
10.	Hong Kong Sheng Kung Hui Welfare Council – Hong Kong Sheng Kung Hui Li Ka Shing Care and Attention Home for the Elderly	2	0	0	0
11.	Hong Kong Society for the Blind – Jockey Club Centre for the Blind	2	0	0	2
12.	Hong Kong Society for the Blind – Jockey Club Tuen Mun Home for the Aged Blind	2	0	0	4
13.	Hong Kong Student Aid Society – Holland Hostel	2	0	0	6
14.	Hong Kong Student Aid Society – Island Hostel	2	0	0	0

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
15.	New Life Psychiatric Rehabilitation Association – New Life Building Long Stay Care Home	2	0	0	2
16.	New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home	2 [#]	0	0	1
17.	Po Leung Kuk Wing Lung Bank Golden Jubilee Sheltered Workshop and Hostel	4	0	0	5
18.	Po Leung Kuk – Y C Cheng Centre	2	0	0	4
19.	Sik Sik Yuen – Ho Yam Care and Attention Home for the Elderly	2	0	0	1
20.	Sisters of the Good Shepherd – Marycove Centre	2	0	0	6
21.	Society of Boys' Centres – Chak Yan Centre	1 [@]	0	0	1
22.	Society of Boys' Centres – Cheung Hong Hostel	2	0	0	0
23.	Society of Boys' Centres – Shing Tak Centre	2	0	0	2
24.	Society of Boys' Centres – Un Chau Hostel	2	0	0	0
25.	The Mental Health Association of Hong Kong – Jockey Club Building	2	0	0	0
26.	The Salvation Army – Cheung Hong Community Day Rehabilitation and Residential Service	2	0	0	2
27.	Tuen Mun Children and Juvenile Home	12	1	1	7
28.	Tung Wah Group of Hospitals Ho Yuk Ching Workshop cum Hostel	2	0	0	3
29.	Tung Wah Group of Hospitals – Jockey Club Rehabilitation Complex	2	0	0	0
30.	Tung Wah Group of Hospitals – Wing Yin Hostel	2	0	0	5

[#] JP visits to the New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home were temporarily suspended from May 2015 to January 2017 due to renovation at the Home. The Home has been re-opened for JP visits in February 2017.

[@] JP visits to the Society of Boys' Centre – Chak Yan Centre were temporarily suspended from October 2017 to June 2018 due to renovation at the Centre. The Centre has been re-opened for JP visits in July 2018.

Serial no.	Name of institution	No. of JP visits	No. of complaints made to JPs	No. of requests/enquiries made to JPs	No. of suggestions/comments made by JPs
31.	Tung Wah Group of Hospitals – Wong Cho Tong Care and Attention Home/ Tung Wah Group of Hospitals – Wong Cho Tong Integrated Vocational Rehabilitation Centre cum Hostel [♦]	2	0	0	1
			0	0	1
32.	Yan Chai Hospital – Chinachem Care and Attention Home	2	0	0	0
Total :		75	1	1	58

♦ Denotes visits covering two institutions.

B. Statistics on satisfactory ratings given by JPs on the facilities and services provided*

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
1.	Caritas-Hong Kong – Caritas Jockey Club Lai King Rehabilitation Centre	2	2	0	2	0
2.	Caritas-Hong Kong – Caritas Li Ka Shing Care and Attention Home	2	2	0	2	0
3.	Caritas-Hong Kong – Caritas Pelletier Hall	2	2	0	2	0
4.	Evangelical Lutheran Church Hong Kong – Kwai Shing Hostel	2	2	0	2	0
5.	Fu Hong Society – Fu Hong Society Rehabilitation Centre	2	2	0	2	0
6.	Haven of Hope Christian Service – Haven of Hope Hang Hau Care and Attention Home for Severely Disabled	2	2	0	2	0
7.	Heung Hoi Ching Kok Lin Association – Buddhist Li Ka Shing Care and Attention Home for the Elderly	2	2	0	2	0
8.	Heung Hoi Ching Kok Lin Association – Buddhist Po Ching Home for the Aged Women	2	2	0	2	0
9.	Hong Kong Juvenile Care Centre – Bradbury Hostel	2	2	0	2	0
10.	Hong Kong Sheng Kung Hui Welfare Council – Hong Kong Sheng Kung Hui Li Ka Shing Care and Attention Home for the Elderly	2	2	0	2	0
11.	Hong Kong Society for the Blind – Jockey Club Centre for the Blind	2	2	0	2	0
12.	Hong Kong Society for the Blind – Jockey Club Tuen Mun Home for the Aged Blind	2	2	0	2	0

Key : S – Satisfactory
U – Unsatisfactory

* During the visits, JPs looked at the facilities (such as dormitories, kitchen/canteen, recreational facilities and general state of the premises) and assessed the services (including academic/prevocational training programmes and medical/management services) provided by the institutions concerned.

† The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
13.	Hong Kong Student Aid Society – Holland Hostel	2	2	0	2	0
14.	Hong Kong Student Aid Society – Island Hostel	2	2	0	2	0
15.	New Life Psychiatric Rehabilitation Association – New Life Building Long Stay Care Home	2	2	0	2	0
16.	New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home	2 [#]	2	0	2	0
17.	Po Leung Kuk Wing Lung Bank Golden Jubilee Sheltered Workshop and Hostel	4	4	0	4	0
18.	Po Leung Kuk – Y C Cheng Centre	2	2	0	2	0
19.	Sik Sik Yuen – Ho Yam Care and Attention Home for the Elderly	2	2	0	1	0
20.	Sisters of the Good Shepherd – Marycove Centre	2	2	0	2	0
21.	Society of Boys' Centres – Chak Yan Centre	1 [@]	1	0	1	0
22.	Society of Boys' Centres – Cheung Hong Hostel	2	2	0	2	0
23.	Society of Boys' Centres – Shing Tak Centre	2	2	0	2	0
24.	Society of Boys' Centres – Un Chau Hostel	2	2	0	2	0
25.	The Mental Health Association of Hong Kong – Jockey Club Building	2	2	0	2	0
26.	The Salvation Army – Cheung Hong Community Day Rehabilitation and Residential Service	2	2	0	2	0

Key : S – Satisfactory
U – Unsatisfactory

[#] JP visits to the New Life Psychiatric Rehabilitation Association – Tuen Mun Long Stay Care Home were temporarily suspended from May 2015 to January 2017 due to renovation at the Home. The Home has been re-opened for JP visits in February 2017.

[@] JP visits to the Society of Boys' Centre – Chak Yan Centre were temporarily suspended from October 2017 to June 2018 due to renovation at the Centre. The Centre has been re-opened for JP visits in July 2018.

[†] The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

Serial no.	Name of institution	No. of JP visits	Overall grading on facilities †		Overall grading on services †	
			S	U	S	U
27.	Tuen Mun Children and Juvenile Home	12	12	0	12	0
28.	Tung Wah Group of Hospitals Ho Yuk Ching Workshop cum Hostel	2	2	0	2	0
29.	Tung Wah Group of Hospitals – Jockey Club Rehabilitation Complex	2	2	0	2	0
30.	Tung Wah Group of Hospitals – Wing Yin Hostel	2	2	0	2	0
31.	Tung Wah Group of Hospitals – Wong Cho Tong Care and Attention Home [△]	2	1	0	2	0
	Tung Wah Group of Hospitals – Wong Cho Tong Integrated Vocational Rehabilitation Centre cum Hostel [△]		2	0	2	0
32.	Yan Chai Hospital – Chinachem Care and Attention Home	2	2	0	2	0
Total :		75	76	0	76	0

Key : S - Satisfactory
U – Unsatisfactory

[△] Separate reports were completed by JPs for the specific institution.

[†] The number of overall grading on facilities or services may not be the same as the number of JP visits to an institution since some JPs may not have provided an overall grading on facilities or services for each visit.

C. Summary of follow-up actions taken in respect of complaints made to JPs

One complaint in the following category was made to JPs during their visit –

Category of complaint	Number of complaint in 2017	(%)
(i) Services provided by the institution (e.g. insufficient daily necessities, etc.)	1	(100%)
Total :	1	

The resident complained against coldness and lack of blanket inside the bedroom. The JPs had been reassured that the home management was dedicated to providing quality service for all residents and would not deprive them of any basic needs. They would provide adequate and appropriate food, clothing and daily necessities for residents at all times. The home management had further reminded the staff to pay extra attention to residents' needs and provide assistance where appropriate.

D. Summary of follow-up actions taken in respect of requests/enquiries made to JPs

One request/enquiry in the following category was made to JPs during their visit –

Category of request/enquiry	Number of request/enquiry in 2017	(%)
(i) Request for early discharge from institution/home leave/release on recognisance	1	(100%)
Total :	1	

An illegal immigrant requested for early discharge from the place of detention. The home had kept monitoring the case progress and noted that ImmD had arranged interviews on two previous occasions with the resident. Following the JP visit, the home had sent a follow-up memo to ImmD and the resident was subsequently discharged from the home upon reaching 18 years old.

E. Summary of follow-up actions taken in respect of suggestions/comments made by JPs

JPs made 58 suggestions/comments in the following categories during their visits –

Category of suggestions/comments		Number of suggestions/comments in 2017	(%)
(i)	Physical environment, facilities and equipment (e.g. need for refurbishment of the premises, use of cheerful decorative designs, etc.)	21	(36%)
(ii)	Service quality (e.g. improvement of meal service, regular review of service need, etc.)	14	(24%)
(iii)	Training programmes and recreational activities (e.g. provision of market-oriented vocational training, arrangement of more activities, etc.)	11	(19%)
(iv)	Manpower planning (e.g. provision of staff training, measures to reduce staff wastage, etc.)	3	(5%)
(v)	Others	9	(16%)
Total :		58	

In response to JPs' comments under category (i): physical environment, facilities and equipment, institutions concerned had applied for the Lotteries Fund with a view to carrying out major renovation works of the premises. Besides, repair and maintenance services for the electrical, mechanical and electronic systems of the institutions were conducted on a regular basis. As regards JPs' advice on adopting warm and cheerful decorative designs, JPs had been informed that the institutions had all along provided home-like and relaxed environment to facilitate learning and rehabilitation of the residents. In response to JPs' concern about the physical environment for toddlers and babies, the institution concerned had decorated the room with colourful pictures, and procured furniture and equipment including toys and books for toddlers and babies. Besides, care assistants would provide personal care services day and night. Regarding JPs' concern on the space available for residents' activities, the institution had provided a spacious multi-function room for mass activities and festival gatherings of residents. The institution had also rearranged the training rooms to provide more space for training purposes. Some JPs suggested providing more reading materials to residents. The institution concerned had followed up the suggestion by exploring the feasibility of expanding its library resources.

In response to JPs' concern about the cost-effectiveness of the services provided by the institution and the integration of residents into the society under category (ii): service quality, the institution had put in place a mechanism to find out whether the residents, upon discharge, had secured a school placement, a vocational training placement, or a job in the open market. As advised by the JPs, the institution would continue to observe safety measures for the proper protection of the residents, and promote collaboration between the school and the institution for the rehabilitation of the residents. Physiotherapy, nursing and personal care services, training activities as well as facilities had been enhanced and closely monitored to meet the changing needs arising from the ageing of the residents. Regarding JPs' comments on the quality and quantity of meal, the institutions concerned would continue to review the food variety. Special meals would be designed to meet the religious, health or other needs of individual residents.

In response to JPs' suggestion of conducting regular review of the education and vocational programmes under category (iii): training programmes and recreational activities, the institutions concerned had held meetings with the training institute every six months to critically review the curricular content to meet the changing needs of the residents for further studies or employment in the community. New training components and courses had been introduced and residents who completed the training had successfully reintegrated into the community, either having resumed schooling or secured gainful employment upon discharge from the institutions. The institutions concerned would continue to review the training plans and activities, and introduce new elements to the training programmes for the enhancement of the abilities of the residents. As regards JPs' concern about the residents' emotional needs, a variety of recreational activities had been organised for residents to develop healthy leisure pursuits. The institution concerned had engaged 137 volunteers from 17 volunteer groups of universities, community organisations and religious bodies to provide support and organise group activities for the residents. Parents had been encouraged to pay regular visits to the residents. In addition, a team of social workers, together with other professionals including teachers, nurses, medical officers, etc. had rendered care, support and supervision to protect the physical, emotional and social well-being of each resident round-the-clock. Regarding JPs' advice on increasing opportunities for family interaction with the children and youths, the institution concerned had encouraged regular contacts and sharing between children and their parents through visits, telephone calls and letters. Parenting skills and parent-child relationship had been further enhanced through regular training programmes, counselling sessions, conferences and aftercare services.

As for manpower planning under category (iv), in response to JPs' concern on measures to facilitate service development in response to the ageing issues, the institutions concerned had reviewed service operation and deployed suitable staff to the living units to provide higher level of care and occupational therapy service for frail and aged residents.

Under category (v): others, some JPs recommended provision of clinical psychology service for the residents. The institution concerned had all along been providing clinical psychology service on one-off or short term basis to its residents whereas the long term need of residents were followed up by the SWD and HA. In response to JPs' suggestion on providing aftercare service to residents, the service provider had formed a focus group on service development with a view to launching a pioneer project to provide accommodation for youngsters. Regarding JPs' concern about the number of referrals for admission to the institution, the JPs had received explanation on the established referral mechanism, and they were satisfied and gave no further comment.