

EHCCS
Supplementary Information Form 4

(a) Total no. of closed case during the reporting period:

(b) Among (a), the duration of service received when case closing:

Duration of service received	No. of closed cases
Less than 3 months	
3 months - < 6 months	
6 months - < 9 months	
9 months - < 1 year	
1 year - < 1.5 years	
1.5 years - < 2 years	
2 years - < 3 years	
≥ 3 years	
Total	0