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President's
Message

My Dear Fellow Members,

Today, I am very delighted to inform you that our Nurses Association had been changed its name to **Hong Kong College of Gerontology Nursing** with effective from January 1st 2011, which is in accordance with the agreed resolution made in our AGM of 2010. The membership status of our College has also been revamped into **Fellow, Associate Fellow** and **Associate**. At the meantime, we are going to change our Memorandum & Articles (M&A) of Association.

For all Life Members and Ordinary Members of HKNAG (*previously named Hong Kong Nurses Association of Gerontology*) would be automatically converted to **Associate Fellow**. Members are entitled to all activities of advantage provided by the College and have the right to vote at AGM. Associate Member is reserved to nurses who are interested in the care and health of the older people and nursing students from various Nursing Schools and Nursing Institutions.

In this light, all members need to pay a biennial subscription which is due on the 1st April in each year. **The payment is HK\$200 for 2 years membership, or in special offer at HK\$350 for 4 years membership.** For details, please kindly log-in our new website: www.hkcgcn.org, and click the Membership Application.

We hope this move will more truly reflect the core missions and roles of our organization to strive towards excellence in the provision of high quality nursing services to the elderly people in Hong Kong. We shall meet the up to date need of both our professional nurse fellows and public by acquiring this new roles and functions.

起錨! 起錨! Please log-in our website and send your application to us. Lastly, I would like to emphasize that your generous support to our College is highly appreciated and important to us.

With that I end my report.

Best Regards,

Anders YUEN

Chairman (2010-12),
Hong Kong College of Gerontology Nursing
June 28th 2011



2010-2012 Honorary Advisors and Council Members



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香港老年學護理專科學院 第五屆科學研討會暨十四周年會員大會

Innovative Care for Older People 新思維 護耆者

Date: 28 May 2011 (Saturday)

Time: 9:00am to 1:30pm

Venue: Pearl Ballroom, 2/F., Eaton Hotel, Kowloon



Discussion Session -
The President Mr. Anders YUEN



Discussion Session -
Dr. KONG Tak-kwan



Council members with Honorary Advisor
Professor Diana Lee, Professor of Nursing
and Director, The Nethersole School of
Nursing & Assistant Dean, Faculty of
Medicine, CUHK (3rd from the left)



Snapshots of Scientific Meeting



Members from Ruttonjee and
Tang Shiu Kin Hospital



Ms. Sylvia Fung, Chief Manager (Nursing) /
Chief Nurse Executive of
the Hospital Authority (2nd from the right)



Snapshot on Poster Presentation



Snapshot on
Poster Presentation



Snapshot on Poster Presentation

Hong Kong College of Gerontology Nursing 5th Scientific Meeting cum 14th AGM

Presentation Highlights of Keynote Speech at Scientific Meeting 2011

On the day of our 5th Scientific Meeting cum 14th AGM on 28/5, we were honored to have Dr. Kong TK Consultant Geriatrician, Dept. of M&G, PMH; Program Director, IDSP; PMH CCC (Community Geriatrics), KWC; as our keynote speaker to share with us 'The Principles of Good Geriatric Practice'.

Dr. Kong is an renowned experience physician in geriatric medicine. He has enormous knowledge and vision in the field. With the theme of 'Innovative Care for Older People' this year, Dr. Kong shared with us the evolution of the geriatric medicine, both in the facilities and in the essence. The '6 Pillars of Best Practices in Geriatrics' was introduced to audience to remind us that compassion, comprehensiveness, continuity, coordination, collaboration, and control should all be valued in planning, implementing, and evaluating the provision of care for older people. The examples shared by the speaker were vivid and inspiring, it stimulating us to re-think the daily practice and care we provide to our aged patient, and to where our service could be improved. To quote the words of Dr. Ignatius Nascher (1863 - 1944), father of geriatrics, from Dr. Kong's slides "was old age, then a painful, incurable disease from which those who reached advanced age



Keynote speaker -
Dr. KONG Tak-kwan

must suffer and for which nothing could be done..." Now we are in the millennium, we have more available resources and technologies so as the increasing aging population compare with the past; it is not only the older people to ask for a decent and reachable service are well deserved, but also it is for the benefit of the society.

The presentation from Dr. Kong is more than this highlights could explain. If you are interested to know more, please go to our website <http://www.hkcgcn.org>

Prepared by:
CHAN Mei Wai (Secretary of HKCGN)

Oral Presentation 1

Innovative Management for Medication Reconciliation in Hong Kong East Cluster Private Nursing Homes

HO SKS, LEE HTJ & TO YKK

Ruttonjee and Tang Shiu Kin Hospital / HKECGAT

Background

Heretofore, some of the old age home staff was put in jail or be punished because of committed an astonishing medication mistake. In view of such situation, a study on medication management was conducted at private old age homes from November 2010 to February 2011 in order to demonstrate proper management on drugs by auditing, educational training and on-site coaching. Innovative interventions were introduced to enhance patient identification, such as adhering patient's photos on medication administration record, medication cup or using bracelet to identify the cognitive impaired residents; so as to prevent medication errors.

Program Objectives

1. To enhance the drug management knowledge and skills of institutions' health workers.
2. To improve the drug management standard of the private nursing homes.
3. To reduce the drug incidence in private nursing homes.

Sample Size

Thirty private nursing homes of capacity more than fifty were selected randomly into study group and control group. In study group, fifty seven health workers of the study group had received educational interventions.

Methods

Audit forms on drug storage, preparation and administration were developed according to the drug management guidelines of the Hospital Authority and the Social Welfare Department, which were composed of thirteen (included four critical points), thirty four (included thirteen critical points) and twenty seven (included eleven critical points) items respectively. The perfor-



mance of health workers in drug management was compared between the study and control groups and also compared before and after

intervention in three month time. Any audit having more than two items or one critical point non-compliance will be failed.



Results

Significant increase in the number of participant that passed the audits in drug preparation by 1.1 folds and 2.4 folds in drug administration and awareness of patient identification was ameliorated by 2.7 folds after educational interventions in study group.

Conclusion

The use of educational training, on-site coaching, guidelines and auditing intervention are effective to improve the knowledge and skills of health workers in drug management. Moreover, innovative implementation in patient identification greatly enhances medication safety.

Oral Presentation 2

Designing a Pre-discharge Website for Hospitalised Older Patients: What Do Nurses Suggest?

Lisa P. L. LOW & Kim Pong FAN

The Nethersole School of Nursing, The Chinese University of Hong Kong

Background

The ease with which health care information can be accessed on the internet nowadays has made it possible for family members and nurses to search for healthcare-related information to take care of the older patients. Such information is, however, widely-distributed and it takes time to search various websites in order to retrieve the desired and/or undesired information. In order to eliminate the time for searching, as part of a pre-discharge hospital programme, a 4-year study is underway to first develop and then test the effectiveness of an e-Learning Information Package (eLIP). This is a 2-phase study and we have completed phase 1 study from June to December 2010, which collected 181 interviews from elders, families and nurses from four hospitals.

Aims of Study

This presentation will identify the suggestions of nurses from two hospitals about the design of a pre-discharge website (eLIP) for older patients in medical and geriatrics wards.

Methodology

An exploratory, descriptive, qualitative design was used to conduct individual interviews with 33 conveniently-selected registered and enrolled nurses from a convalescent hospital and an acute hospital. The interviews examined nurses' perceived information needs of older patients during discharge planning and explored their suggestions and expectations about the design and content of eLIP for older patients.

Results

Findings revealed that, in general, nurses welcomed the innovative development, although there were initial hesitations about the practical aspects of ensuring that potential users would



have access to and knowledge about the use of computers. Main suggestions identified by nurses included, first, the need to consider developing the eLIP website together with designing accessible pamphlets to fit its potential users, who are unfamiliar with computers. Second, the design of the website should not only be user-friendly and simple to navigate and to read, it should be convenient to access. Third, the content should be aligned with the recent technological advancements (e.g. adding interactive media resources) to attend to the day-to-day practical care, and health and disease management of caring for older people in their own home, or in care homes (as needed). The content should thus be highly relevant and applicable in addressing elders' range of needs.

Conclusion

The idea of developing an innovative pre-discharge website for hospitalised older patients was welcomed. It was believed that this could become an online educational package in providing health and social care information to the elders and family members before the elders face a 'real need'.

Oral Presentation 3

Proactive Nursing Management Strategies to Enhance the Service of Geriatric Day Hospital (GDH) at Tung Wah Hospital

Tse THC, Li CF, Chiu PKC, Chan FHW, Yau ZMS

Geriatric Day Hospital, Tung Wah Hospital

Introduction

GDH has played a major role in the rehabilitation of elderly patients. In 2009, the daily attendance rate was low (61.52%). For the Post-6-Month-Assessment (P6MA), only 3.45% patients could be assessed within the allocated time period. P6MA aims to assess the functional and physical performance of patients discharged from GDH to decide on further rehabilitation needs. Nurses are responsible for the GDH management and act as a centre manager role in GDH. After extensive analysis, the following new nursing management strategies, (1) pre-admission assessment (phone & ward interview), (2) priority criteria guideline for new admission, (3) new alternative methods of transportation, (4) re-design booking system, training model and discharge guideline, and (5) simplified P6MA, were developed in 2Q2010 to enrich the GDH service.

Objectives

To develop and study the effectiveness of new management strategies in enhancing the function of GDH.

Methodology

The strategies were implemented from August 2010. A “pre-test” vs. “post-test” design was employed. The “pre-test” period was defined as February - July 2010 and the “post-test” period defined as August 2010 - January 2011. Subjects were GDH patients. Outcome measures were (1) daily attendance rate, (2) total attendance, (3) total number of patients treated, (4) number of patients assessed for P6MA, and (5) percentage of patients fitting into the 6-month period (180 days \pm 18 days) for P6MA.



Results

From February 2010 to January 2011, 468 patients were recruited. After the implementation of the strategies, there was increase in daily attendance rate (\uparrow 8.45%), total attendance (\uparrow 16.83%), total number of patients treated (\uparrow 32.84%), number of patients assessed for P6MA (\uparrow 82.76%) and percentage of patients fitting into the 6-month period (\uparrow 34.85%). Besides, from December 2010 onwards, 100% patients could catch up with the time frame of P6MA.

Conclusion

The proactive nursing management strategies were effective in enhancing the effectiveness of GDH service. It also serves to demonstrate the advance nursing practice model in geriatric rehabilitation service that empower nurse in managing high risk elderly and makes the timely detection of rehabilitation needs feasible.

Oral Presentation 4

Promoting Urinary and Bowel Continence in Out Patient Department of Tung Wah Hospital

Hui PY¹, Fung Y L¹, Lau L S¹, Pang W Y C¹, Tsui WSW², Sze H H³

¹ General Out Patient Department, Tung Wah Hospital,

² Department of Family Medicine & Primary Healthcare, Hong Kong West Cluster,

³ General Out-Patient Clinic, Tung Wah Hospital

Introduction

Incontinence problems consist of urinary incontinence, lower urinary tract symptoms (LUTS), fecal incontinence or constipation. Incontinence of any types affect us through the life span, it affects our quality of life not only physically, but also psychologically, economically and sexually. Despite of increasing incontinence problems with age, incontinence can be managed by early detection and prompt intervention in primary level of health care. In order to identify the population with incontinence problems, screening of incontinence problems was carried out in Out Patient Department (OPD) in Hong Kong West Cluster. (HKWC)

Purpose of the Study

- (1) to survey for the prevalence of incontinence problems among adults in OPD, HKWC;
- (2) to identify population with incontinence problems

Methodology

A screening questionnaire was employed. Subjects were adults of HKWC. Self administered questionnaires were given to adult in OPD of Hong Kong West Cluster, while assistance was provided to illiterate or visually impaired adults if necessary. Outcome measures were categorized as (1) Prevalence of incontinence problems, (2). Population with incontinence problems according to gender and age group.

Sample Size and Results

From October 2009 to February 2010, 2071 patients with age 65 or above were surveyed. 43.3% were male and 56.7% were female. Among the 2071 patients, 721 (34.8%) had urinary problems while 319 (15.4%) had bowel problems.

Generally male patients (39.4%) reported more urinary problems compared with female patients (31.3%). Among the 353 male patients reported LUTS, 55.8% with age ranged from 65-74, 36.8% were aged between 75 and 84. For 368 female patients, 43.8% of them aged between 65 and 74, 42.4% were aged between 75 and 84.

Among eight questions regarding urinary problem, 488 out of 721 patients (67.7%) found to have frequent urination, which was the main urinary problem among the population. Moreover, it is the most commonly reported urinary problem in 73.7% male patients, especially in their ages between 65 and 74, that about 1 in 2 male patients (54.6%) with urinary problem reported



problem of frequent urination.

62% female patients also reported frequent urination and 56.5 % reported stress incontinence.

Regarding bowel problems in 15.4% of the population, more than half of them were female patients (53.3%). Constipation was the main bowel problem (84%). For 319 patients reported bowel problems, 239 (74.9%) patients reported urinary problems as well, which showed a correlation between constipation and urinary problems. For patients who were identified with urinary or/and bowel problems, less than half of them (41.6 %) were willing to receive treatment. Slightly more male patients (53.5%) were willing to receive treatment compared with female patients.

Conclusion

The screening questionnaire was useful in identifying elderly patients with incontinence problems. Screening of continence problems for elderly patients enables nurses to provide prompt intervention, which would greatly improve quality of life of these patients. Through the study, it highlighted the urinary problems especially frequent urination is common in elderly patients, also stress incontinence is also found common in female patients. Moreover, more attention should be drawn in these age groups especially for problem of constipation concomitantly with urinary problems. Throughout the screening, it enables patients to increase awareness of their incontinence problems as well as the availability of continence clinic. Hopefully with earlier detection of patient with incontinence problems by screening, earlier nursing care in forms of health education by nurses, especially lifestyle modification, which in turns motivate patients to make a change in lifestyle and take initiative role to improve their quality of life ultimately.



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Forthcoming Activities

Conferences/Symposium 會議/座談會：

1. **40th British Society of Gerontology Annual Conference: Understanding & Promoting Value of Older Age**,
5-7 July 2011.
<http://www.britishgerontology.org/>
2. **5th Pan-Pacific Nursing Conference & 7th Nursing Symposium on Cancer Care: Issues, Challenges & Future Directions of Evidence-based Healthcare**,
22-24 September 2011.
Email: www.panconf5@cuhk.edu.hk
3. **Asia/Oceania Region of the International Association of Gerontology and Geriatrics**,
13-27 October 2011, Melbourne, Australia.
<http://www.ageing2011.com>
4. **Eighth World Congress on Long Term Care in Chinese Communities and Asian Ageing Development Conference**,
24-26 November 2011, Hong Kong.
<http://www.hkag.org>

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