

Hong Kong College of Gerontology Nursing



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# President's Message ZUIN ANNIVERSary

Our Founding Organization is the "Hong Kong Geriatric Nurses Association", which was first established in 1997 by a group of enthusiastic and dedicated gerontological nurses in Hong Kong. The Association was later renamed as the "Hong Kong College of Gerontology Nursing" in January, 2010. Since its inception in 1997, the College has provided a wide variety of educational courses, seminars and workshops which are specific to the care of older people with the aims to raise the awareness of carers and healthcare professionals with updated knowledge and specialized practices in the nursing of older people. Moreover, our College has been accredited as a Continuing Nursing Education (CNE) Provider by the Hong Kong Nursing Council since 2006.

The College Mission:

- 1) To strive towards excellence in the provision of quality services to older people in Hong Kong.
- 2) To enhance the knowledge and expertise in gerontological nursing.
- 3) To promote understanding, communications and welfare of nurses working for older people.
- 4) To develop a local identity for Hong Kong nurses who specialized in caring of older people.
- 5) To direct and initiate continuous gerontological nursing education and research activities.

2017 is a very special year for our College because it marks the **20<sup>th</sup> Anniversary for the** establishment of the Hong Kong College of Gerontology Nursing. So this year Annual Scientific Meeting carries special meaning for the College. Similar to last year, we try to broaden the perspective of the conference to include distinguished speakers from a famous local health product industry of Hong Kong, Mr. SZETO Wing Fu, the CEO of Hung Fook Tong, together with iconic figures in the local elderly care institutes. The speakers had shared the experience how to transform an old style health business becoming a very successful new brand. The Keynote sharing has given us some directions and thought for the future development of gerontological nursing and nurse specialists in Hong Kong. The objective of cross-fertilization and learning from each other among participants from various sectors and localities has been achieved by all your active participation in the meeting.

I would like to take this opportunity send my deepest gratitude to thank our devoted Council Members for their wholehearted support to the College.



Anders YUEN President (2016-18) Hong Kong College of Gerontology Nursing

> 2016-2018 Council Members, Co-opt Members & Invited Guests

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Mr YUEN Chi-man, Anders (President 2008-present) Ms LAU Yuk-ping (Former President 1997-2003) Ms LIU Chi-ling, Rosanna (Former Vice President 1997-2008) Ms HO Kam-yee, Joan (Vice President 2010-present)



There has been challenge in practices in *Gerontological Nursing* that hamper the ability of our nursing profession to enhance the provision of care to the increasing *older population*. Nevertheless, joyfulness and pleasure are also growing amazingly which neutralize the negative forces.

It is our honour to be able to have invited *pioneer Nurse Specialists* to share the joy and challenges in the Past, Present and Future in Gerontological Nursing.







Distinguished guests and participants actively engaged in sparkling discussion with the speakers

Welcoming speech Mr Anders YUEN (President of HKCGN)



Congratulatory Remarks Mr Lawrence POON (CMN/HA)





Hong Kong College of Gerontology Nursing



20th Anniversary Scientific Meeting cum AGM 2017



Innovation & Transformation of a Traditional Enterprise: From Theory to Practice at Hung Fook Tong Guest Speaker: Dr SZETO Wing-fu (Executive Director of Hung Fook Tong)





## Activity Snapshots of Precious Moments Happy Memory





Hong Kong College of Gerontology Nursing



## Activity Snapshots Precious moments Happy Memory

We valued your presence



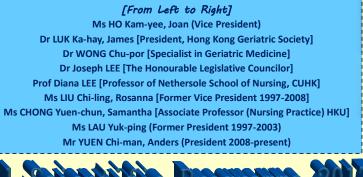


Dr Frances WONG, President of Hong Kong Academy of Nursing

WE look forward to seeing YOU in the next SC cum AGM 2018!

HKCGN SCIENTIFIC MEETING CUM AGH 2017







**BRILLIANT!** 



Shortening the waiting time of high risk elderly at Geriatric out-patient

 Clinic through Comprehensive Assessment and Management

 Chan OL,
 Sha KY, Tang SK, NG YB

 Department of Medical and Geriatric, United Christian Hospital

Quality Enhancement Program: A Delirium-caring Culture Nurturing Program in Acute Geriatric Setting - 3-year Review Tang LN

Department of Medical and Geriatric, United Christian Hospital



#### Frailty at the Front Door – Outcomes of a Winter Surge Collaborative Service Measure for the Older Adults

**Ho SKS**, Tse LKD, Mak MY, Chau YM, Wan MC, C Kng, Wan KA, Kan PG, Mak PKF Department of Geriatrics, Accident & Emergency Department, Ruttonjee and Tang Shiu Kin Hospital

Use of "My Passport" to promote person-centred care for dementia patients

<u>Sze YMS,</u> Chan, OF, Chui M, Lee P, Cheung SY, Woo LC, Lai WS, Ng WP, Lai KK Medical & Geriatrics Department, Shatin Hospital







### Health Status and Health Seeking Behaviour of the Middle- and Old-age Community in TKO

Margaret ML Pau, Eric LS Chan, Lisa PL Low, Carol WY Chan & Ruth CM Yu School of Health Sciences, Caritas Institute of Higher Education

#### BACKGROUND

The health status and the health seeking behaviours of the population has become an increasing concern for academics, practitioners and policy makers. The efforts to generate data on health status and health issues of a population group will provide the evidence to establish timely and appropriate services to serve the public; and, in the process, to involve stakeholder groups to be involved in making health policy decisions that will impact on the health care system. With reference to the community of Tseung Kwan O, this is a new town that was established in the 1990s and is currently serving a population of about 396,000 as of the year 2016<sup>1.</sup> The population profile shows that the town is undergoing rapid expansion and has implications for health service planning and delivery. Such planning will need to take the health status and health-seeking behaviours of its population into consideration. In an attempt to explore this notion, the School of Health Sciences at the Caritas Institute of Higher Education (CIHE) held a Walk-in Health Assessment Day for the general public in November 2014. This event had captured a glimpse of the health needs of the general public who had come for a health check.

#### **AIM & METHODS**

This project aimed to explore the health status and health seeking behaviours of the general public aged 18 years and older and primarily living in Tseung Kwan O. Participants received an information sheet about the project and a consent form was signed before completing the questionnaire and the health check (i.e. height, weight, BMI, pulse, oxygen saturation level, blood pressure, blood glucose monitoring and urine testing). The questionnaire was self-developed based on two sources of literature. Reliability and validity tests were undertaken to pre-test the questionnaire. Of 122 questionnaires distributed to the participants, 115 (94.3%) copies were returned but only 112 (91.8%) were included in the analysis. Seven questionnaires were not returned, and three were returned but were largely incomplete.

#### RESULTS

#### Socio-demographic profile

Of 112 participants, 40 were male and 72 were female, with age ranging from 45-60 years (40.12%), 61-64 years (10.71%) and over 65 years (32.14%). Only 16.07% were in the age range of 18-44 years. The majority was married (80.36%) and a minority of them was single (9.82%), widowed (8.04%) and separated (1.79%). The participants mainly completed primary school (33.04%) and secondary school education (40.18%), with only 18.75% continuing onto post-secondary education and university. The majority lived in Tseung Kwan O (90.12%) and was living with two or more persons (82.14%) as compared with a small number living alone (11.61%) or living with one person (18.75%). The majority was home-make/housewives (25%) and retired (37.5%), with only 33.04% of them claiming to be in either full or part-time work. Only 1.79% mentioned that they had stopped working due to health reasons.



#### Health status and health conditions

The majority rated their general health status in the last 12 months to be fair (56.25%), particularly among the home-makers and housewives. The remaining rated their health status to be excellent (6.25%), very good (11.61%), good (16.96%) and poor (10.71%). Only 6.25% claimed to have not been suffering from any health conditions. The major health conditions reported in the last 12 months included pain of the joints (49.11%), low back pain (33.93%) and neck pain (21.43%). Common cold or URTI (34.82%) and dizziness (26.79%) were also highly reported. For chronic conditions, blood pressure ranked the highest with 25%, with cataract and diabetes mellitus both being second (13.39%), and high blood cholesterol coming in at third place (6.25%). Only a few participants reported other chronic conditions including coronary heart disease, asthma, glaucoma and stroke.

#### Health risks and lifestyle behaviours

Health risks and lifestyle behaviours that could lead to morbidity and mortality were also explored. For smoking, 73.21% had never smoked, 8.04%5 were daily smokers and 9.82% were ex-smokers. Comparatively for alcohol consumers, 50,89% were non-drinkers, 33,04% claimed to be occasional drinkers, and a few were binge drinkers and ex-drinkers. The awareness to do physical exercise in the last month was high, with 51.79% doing 20-30 minutes of exercise at least three times per week, 22.32% exercising less than three times per week, and 25% did no exercise at all. The results for the BMI found that 40.18% people were overweight and 3.57% were obese, with only 6.25% underweight and 49.11% in the normal range. For the use of over-the-counter medications in the last month, 27.68% persons did

not use any. The types of medications used were largely for cold and flu medication (19.64%) followed by oral analgesics (9.82%), health supplements (8.93%) and analgesics in the form of creams and medication pads (8.04%). Only a very small number used herbal medication/TCM. The proportion of people who did something to lose weight (86.61%) compared with those who did something to gain weight (87.5%) were similar.





#### Health monitoring behaviours

In the last year, 81.25% of people did not undergo any physical check-up and only 18.75% had some form of physical check-up. The most popular forms of physical check-up included blood pressure measurement (54.46%), blood cholesterol measurement (24.11%) and blood sugar monitoring (22.32%).





Hong Kong College of Gerontology Nursing

For females, a few claimed to perform the cervical smear and breast self-examination. For males, only a few of them performed the prostate-specific antigen test and digital rectal prostate examination when they had symptoms that warranted these tests.

#### Health service utilization

Participants preferred to consult a western doctor when they were sick as opposed to visiting a Chinese practitioner. However, around 41-42% preferred to visit a Western doctor in a public clinic/hospital or a private clinic/ hospital. Only 25.89% said they preferred to see a Chinese practitioner at a public clinic/hospital rather than consulting a private clinic/hospital. A number of factors influenced the choice of doctors. These included: (1) waiting time (30.36%), fees (29.46%) and location (25.89%). For hospital utilization, 69.64% claimed to have never been admitted into the hospital. Those who had prior admissions, 15.18% chose to be admitted into a public hospital as an in-patient, while a few chose the private hospital. For dental consultation, 43.75% persons had consulted and 47.32% did not consult in the past year. Around 85-87% had reported not using the chiropractor consultation and psychiatrist/counsellor respectively.

#### **KEY FINDINGS**

- 1. Uptake of health checks were largely undertaken by married females in the middle- and the older age groups, mainly the home-maker/housewives and retirees.
- 2. High number of participants perceived their general health status to be fair, with no reports of suffering from major illnesses but acute health ailments such as the common cold/URTI and dizziness warranted attention.
- 3. Musculoskeletal pain was highly reported especially joint pain, low back pain and neck pain. This is consistent with the use of over-the-counter medications to relief acute ailments like pain and flu.
- 4. Performance of some form of weekly physical exercises was conducted, however 49 people were still found to be overweight and obese.
- 5. Low awareness to monitor own health, with only a small number reported consulting a Chinese practitioner when they were sick as opposed to visiting a western doctor.

#### **ISSUES FOR HEALTH AWARENESS & EDUCATION**

- 1. Literacy of health education materials will need to be presented in a straight-forward manner to address specific health needs at one time and practical in content for the middle- and elderly persons.
- 2. Continuous health monitoring and education should be promoted to maintain the health of the middle-age group in order to prepare them to age successfully in later life.
- 3. Greater awareness of health risks and lifestyle behaviours and the types, duration and effectiveness of physical exercises should be emphasized in order to manage weight appropriately.
- 4. Dealing with the wide-choice of commonly used over-the-counter medication for acute health ailments is worthy of attention.
- 5. Promoting onus to take monitor one's health including acute ailments, blood pressure, blood cholesterol and blood sugar as well as considering complementary alternative therapies like yoga and dance for pain-relief are acknowledged.

The findings have provided baseline dataset to understand the health status and health needs of the middle and older community from Tseung Kwan O. It is possible to plan for the future establishment of primary prevention strategies and other intervention works to reach out to the Tseung Kwan O population.

#### Reference

1. Civil Engineering and Development Department (2016). Hong Kong: The Fact (New Towns, New Development Areas and Urban Developments). Retrieved from <a href="http://www.gov.hk/en/about/about/k/factsheets/docs/towns%26urban\_developments.pdf">http://www.gov.hk/en/about/about/k/factsheets/docs/towns%26urban\_developments.pdf</a>

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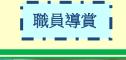


行程一:澳門特別行政區社會工作局

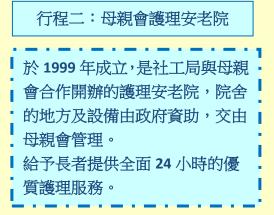
澳門社會工作局長者服務處 專為推動和發展長者福利、政策而 設的服務部門,透過與民間機構和 公共部門的共同合作,為長者提供 社區支援及院舍照顧等服務。















#### 行程三:滙暉長者中心

設於長者社屋的日間中心,除了 為住戶提供文誤康體活動、興趣 班、郊遊活動等外,亦為體弱長 者提供個人照護、家務協助以及 24 小時緊急支援。





溫馨探訪

婆婆和中心主任喜相逢







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