



香港中國婦女會

The Hong Kong Chinese Women's Club



2022安老服務年刊



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機構簡介

香港中國婦女會，是香港的一個非牟利慈善團體，創立於 1938 年，目的是聯絡各界婦女團體，為社會建設慈善福利工作，促進德、智、體、群四育之發展，團結之精神，服務人群。安老服務是其中一個項目。

安老服務簡介

自 1985 年投入服務的黃陳淑英紀念護理安老院開始，機構在安老服務已涵蓋院護住宿、長者教育、長者日托等多方面，可謂麻雀雖小、五臟俱全。

政府資助服務包括：黃陳淑英紀念護理安老院及油麗長者日間護理中心

自負盈虧服務包括：李樹培夫人啟知中心、護理安老院非資助宿位，及油塘長者日間護理中心

社區照顧服務券：由油塘長者日間護理中心提供

申請方法

資助服務：長者可向住所附近之家庭服務中心、長者中心提出申請，經社會福利署之安老服務統一評估機制評定資格及服務類別，再由轉介社工跟進上表至中央輪候系統，按次序輪候所需服務。

安老院有機構宿位可由機構自行編派，申請表可向總會索取，但申請人同樣需要接受統一評估，合資格方可入住。

自負盈虧服務：申請人只需致電本院相關負責同事，了解服務細則便可使用。

社區照顧服務券：獲社署邀請使用服務券的長者，可直接聯絡本院相關負責職員，商討採用模式及使用細節。

退出方法：服務使用者亦可按其意願及需要，給予服務單位一個月通知期退出服務。

About us

The Hong Kong Chinese Women's Club is a non-profit charitable organization in Hong Kong, founded in 1938, with the purpose of connecting women's organizations from all walks of life, building charitable welfare work for the society, promoting the development of moral, intellectual, physical and community education, the spirit of unity, and serving the people. Elderly care is one of the projects.

Elderly Services

Since the first Care and Attention Home for the Elderly, which was put into service in 1985, the Agency has covered round the pie service include Continuum of Care residential home , education center, and daycare services .

Government-subsvented Services include Wong Chan Sook Ying Memorial Care Home for the Elderly and Yau Lai Day Care Centre for the Elderly

Self-financing Services include Dr Ellen Li Learning Centre, non-subsidized Residential Care Places in the

WCSY Homes for the Elderly, and Yau Tong Day Care Centre for the Elderly
Community Care Service Voucher: Provided by Yau Tong Day Care Centre for the Elderly

Application method

Subsidized Services: Elderly people can apply to Family Service Centres or elderly centres near their residences to assess their eligibility and service types under the Standardized Care Need Assessment Mechanism for Elderly Services of the Social Welfare Department. The referral social worker will then follow up the uploading the case to the Central Waiting List for long term care services to queue the eligible service.

Application for an Agency Quota in the COC homes can be obtained from the Agency Head Office. Though with approval from the management board, the applicants are also required to undergo the Standardized Care Need Assessment Mechanism for eligibility for admission.

Self-financing Service: Applicants only need to contact the responsible staff of the Home to understand the service content and charges.

Community Care Service Voucher: Elderly persons invited by SWD to use the service voucher may contact the responsible staff of the Day Care Center directly to discuss the Service mode and details of use.

Withdrawal method: Service users can give the service unit a one-month notice period to withdraw from the service according to their wishes and needs.



黃陳淑英紀念護理安老院
Madam Wong Chan Sook Ying Memorial
Care & Attention Home for the Aged



油麗長者日間護理中心
Yau Lai Day Care Center for the Elderly



李樹培夫人啟知中心
Dr Ellen Li Learning Center for the Elderly

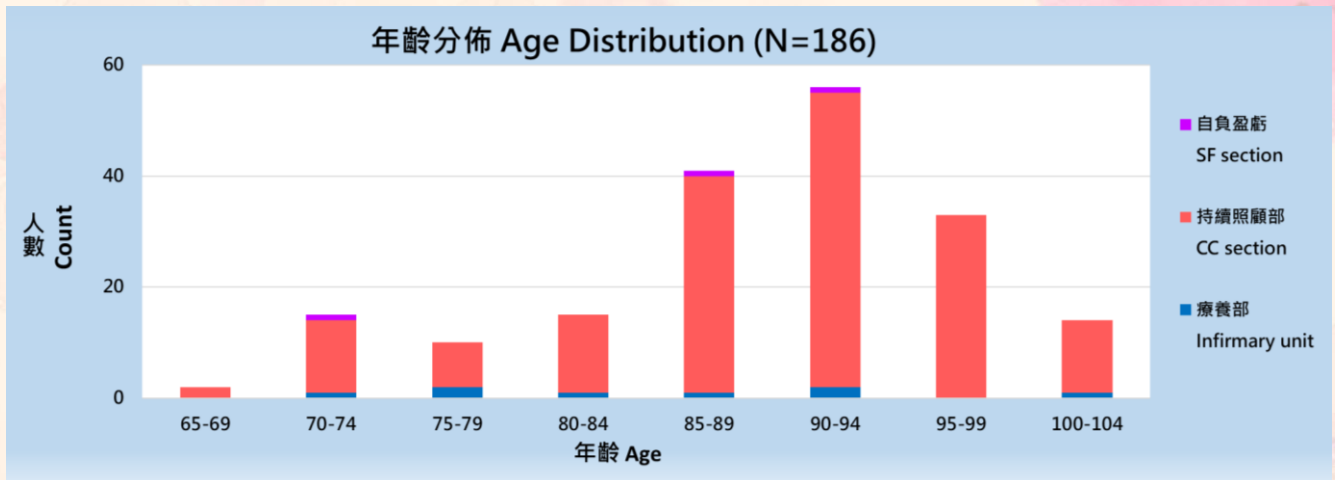


油塘長者日間護理中心
Yau Tong Day Care Center for the Elderly

安老院院友資料統計 (截止 2022 年 6 月 30 日)

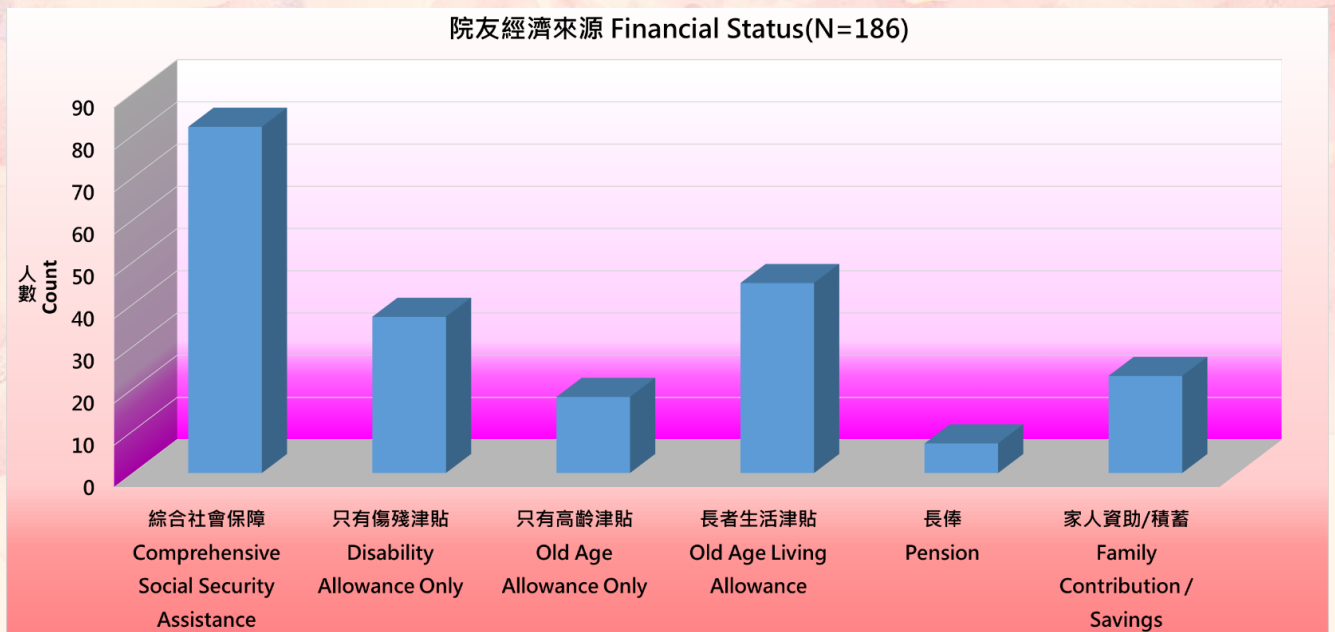
Statistics of Elderly Residents as of 30 Jun 2022

* 不包括緊急宿位院友及日間護理中心會員 excluding emergency placement and day care centres



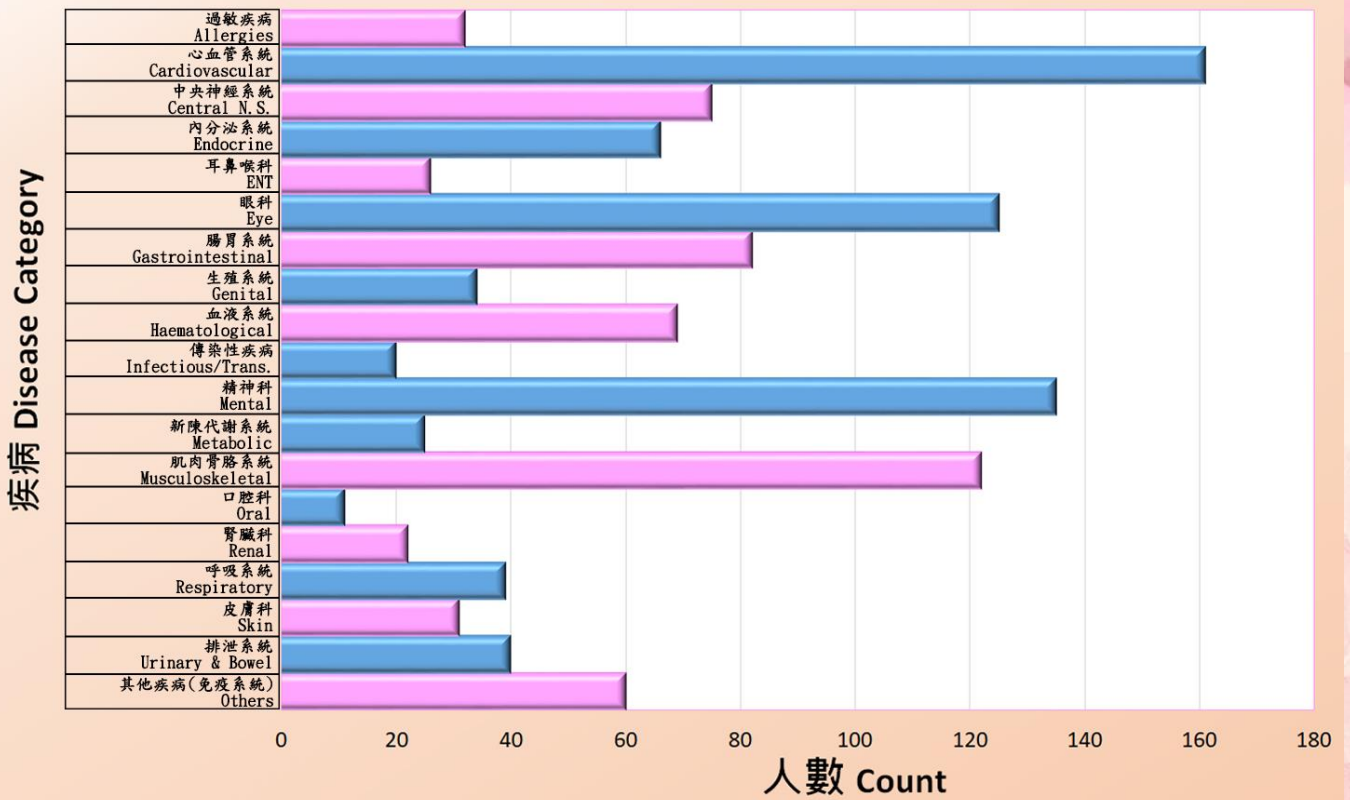
年齡及入住年期統計數字 - 分部計 Age And Year of Residency Statistics (N=186)

	平均年齡 Average age			最年長 Oldest age		最年輕 Youngest age		平均入住年期 Average year of residency	
	合計 Population	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female	男 Male	女 Female
療養部 Infirmary unit	84.9	81.0	85.4	81	100	81	71	2.9	2.5
持續照顧部 CC section	89.5	85.0	90.2	96	104	70	68	4.4	4.7
自負盈虧 SF section	82.7	不適用	82.7	不適用	90	不適用	73	不適用	1.4

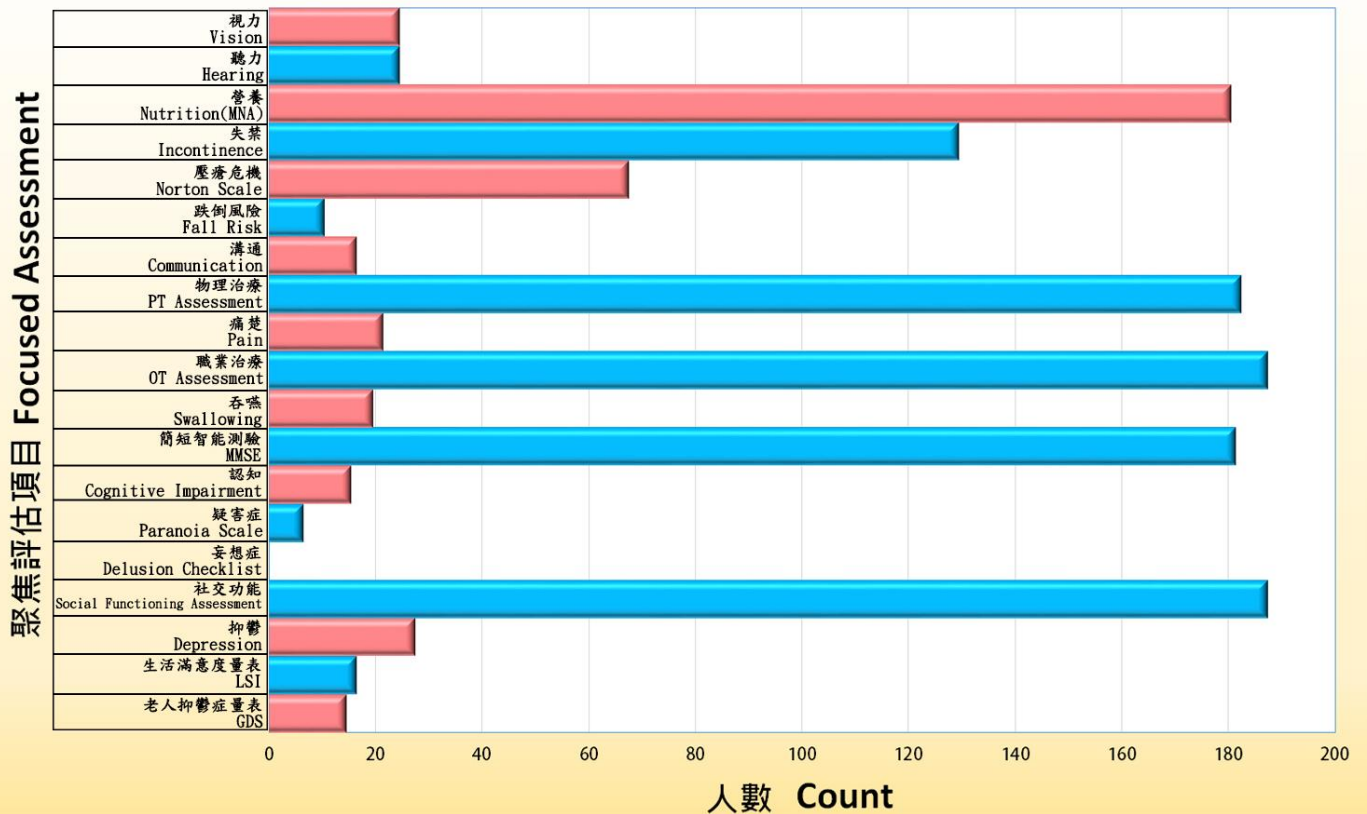


$$2021 - 22 \text{ 年度周轉率 annual turnover rate} = \frac{(\text{年度院友過世} + \text{退院的總數 total deceased and discharged count})}{\text{年度平均院友數目 average resident count}} = \frac{52}{198} = 26.3\%$$

院友現接受治療之疾病種類 Categories of Disease Receiving Treatment (N=186)



院友接受聚焦評估 Focused Assessments Completed (N=186)



臨床照顧質素指標專題報告

REPORT ON SOME CLINICAL QUALITY INDICATORS

壓瘡

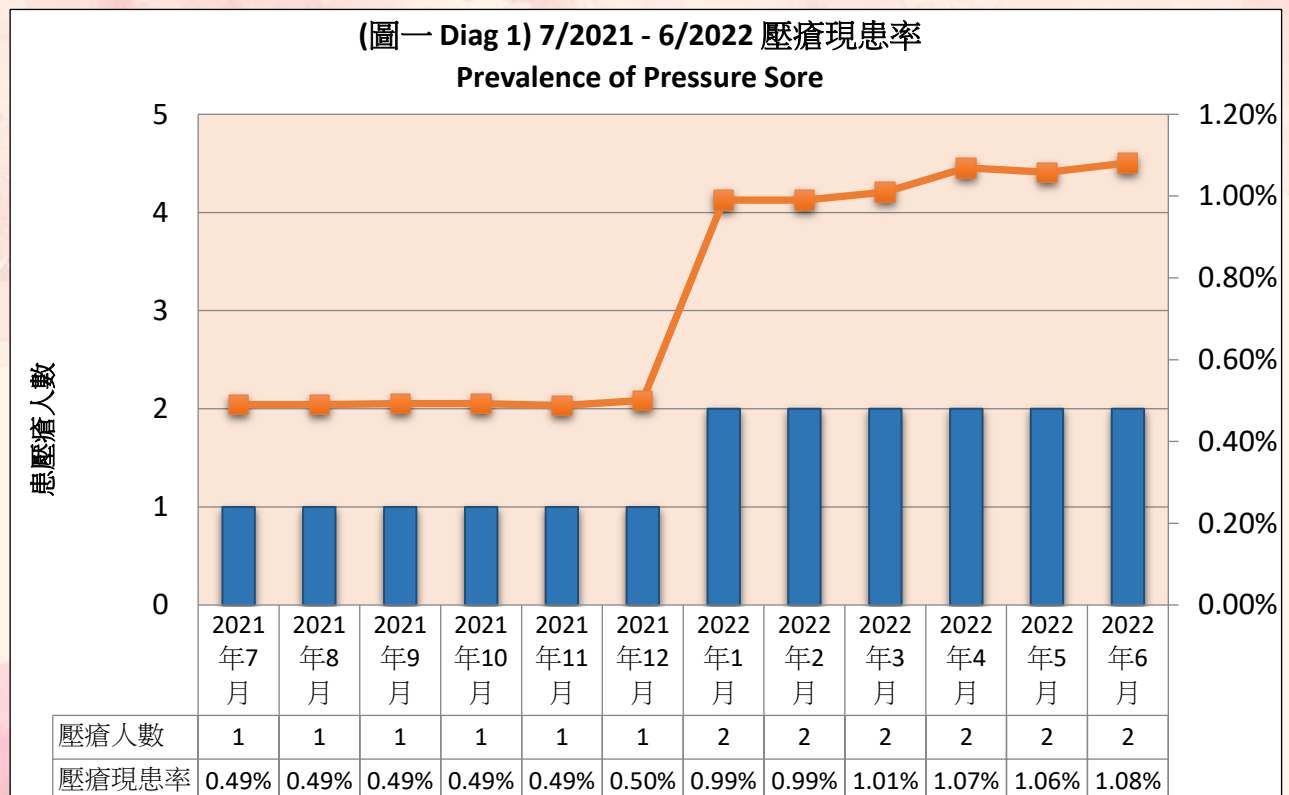
2021年7月至2022年6月壓瘡指標監測結果及分析

1. 7/2021-6/2022 本院壓瘡現患平均率 0.76%，每月有 1-2 名患者 (圖 1)，對比去年現患平均率 2.06%，減少 1.3%。
2. 全期新患壓瘡 1 人，此個案於 1/2022 發生，院友因入院 30 天後產生 2 期壓瘡 (圖 2)。
3. 新患壓瘡位置為足踝，壓瘡程度為二級。

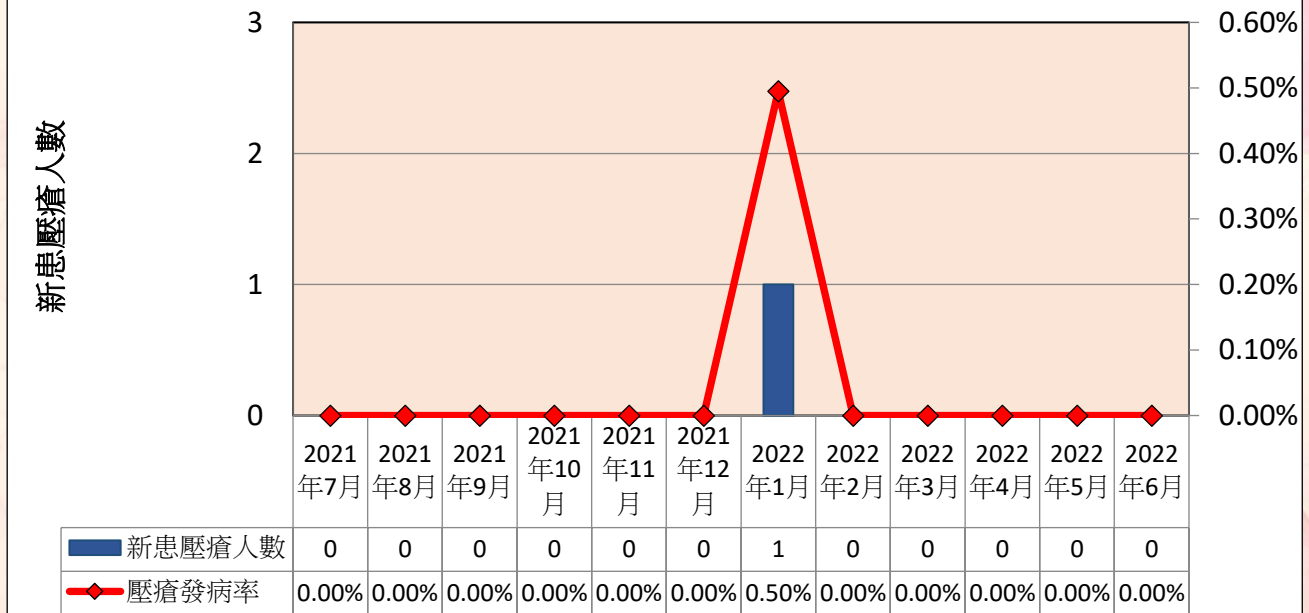
PRESSURE ULCERS

Monitoring, review and analysis of pressure ulcer indicator from 7/2021 to 6/2022

1. From July 2021 to June 2022, the average prevalence rate of pressure sores is 0.76%, with 1-2 residents per month (Diag 1), compared with the average prevalence rate of 2.06% last year, a decrease of 1.3%.
2. One new patient with pressure sore in the whole period. This case occurred on 1/2022. The resident developed a second stage pressure sore 30 days after hospital admission (Diag 2).
3. The location of the new pressure sore is the ankle, and the pressure sore is stage two.



(圖二 Diag 2) 7/2021 - 6/2022 壓瘡發病率
Incidence of pressure ulcer



護理措施

根據政府推行的「居家安老為本，院舍照顧為後援」的政策方針，院舍照顧只是後援，近年入住院舍的長者，身體機能及活動能力普遍較差；本院照顧長期卧床或較弱的長者，原則是減低產生壓瘡的風險，包括：

1. 為長者轉用減壓床墊或減壓輔助坐墊。
2. 照顧員每兩小時為長者轉換姿勢，維持正確姿勢，避免骨凸的部位受壓。
3. 提醒工作人員在扶抱或轉移時，避免長者身體與床鋪發生磨擦和碰撞。

護士照顧患有壓瘡的長者，實施有系統策略性的壓瘡傷口護理計劃，包括：

1. 嚴格施行無菌操作清洗傷口，選擇適合的敷料。
2. 每星期以「e-護存」傷口護理紀錄系統，拍攝及記錄傷口情況，持續監察壓瘡傷口的進展。
3. 定時與社區老人評估小組滙報有關傷口的進展，有需要時會轉介專科護士跟進。
4. 留意長者進食及營養狀況，需要時可加入高蛋白質的奶類，有助傷口癒合。

Improvement measures

According to the government's policy of "Home-based care for the elderly, residential care as the backup". As residential care only act as back up, elderly living in residential care homes in recent years generally have poor physical function and mobility. To take care of the long-term bedridden or frail elders, we aim at reduce the risk of pressure ulcers, including:

1. Provide pressure-relief mattress or pressure-relief support cushion for the elderly.

2. The caregiver changes the posture for the elder every two hours to maintain the correct position and avoid pressure on the protruding parts.
3. Remind staff to avoid the friction and collision between the elderly body and the bed during the lifting and transfer procedures.

Nurses caring for the elderly with pressure ulcers. A systematic and strategic pressure ulcer wound care plan will be implemented, including:

1. Strictly implement aseptic technique to change wound dressing and choose a suitable material.
2. Use the "e-護存" wound care record system to take pictures and record the wound progresses every week, and continuously monitor the progress of the wound condition.
3. Regularly report the progress of the wound to the Community Geriatric Assessment Team. Referral to specialist wound nurse for follow-up when necessary.
4. Monitor nutritional status for the elderly, add high-protein milk when necessary to promote wound healing.

失禁及尿道感染

2021年7月至2022年6月失禁及尿道感染指標監測結果及分析

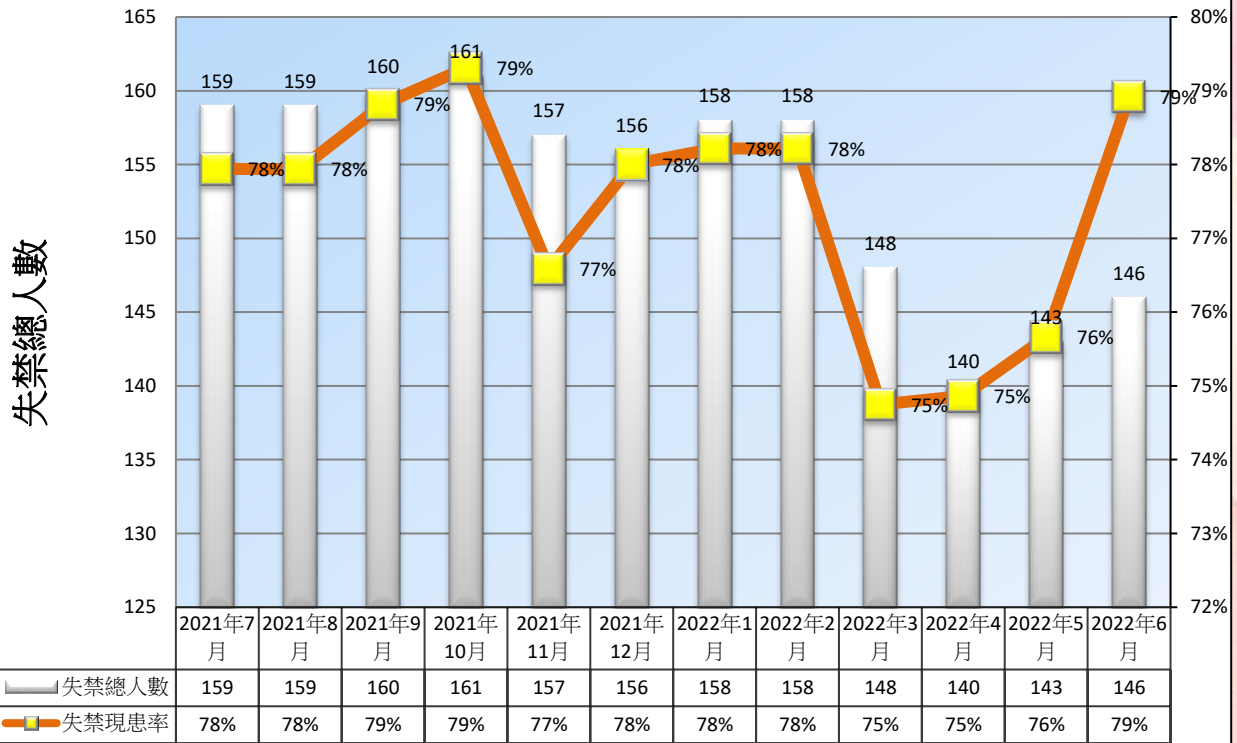
1. 7/2021-6/2022 本院每月平均有 154 人失禁，現患平均率 77.5%(圖 3)，對比去年現患平均率大幅度減少 8.1%。大部份院友使用紙尿片，佔 98%，小部份 2%使用導尿管，與去年比率相約。
2. 失禁而有患尿道感染者比率為 0.43%，其中使用紙尿片者為 0.37%；而使用導尿管者本期只有 0.05%，比去年大幅度下降。
3. 全期共 8 人患尿道感染，涉及院友；男 1 名、女 7 名。主要因為體弱，需長期卧床 (圖 4)。

Incontinence and Urinary Tract Infection

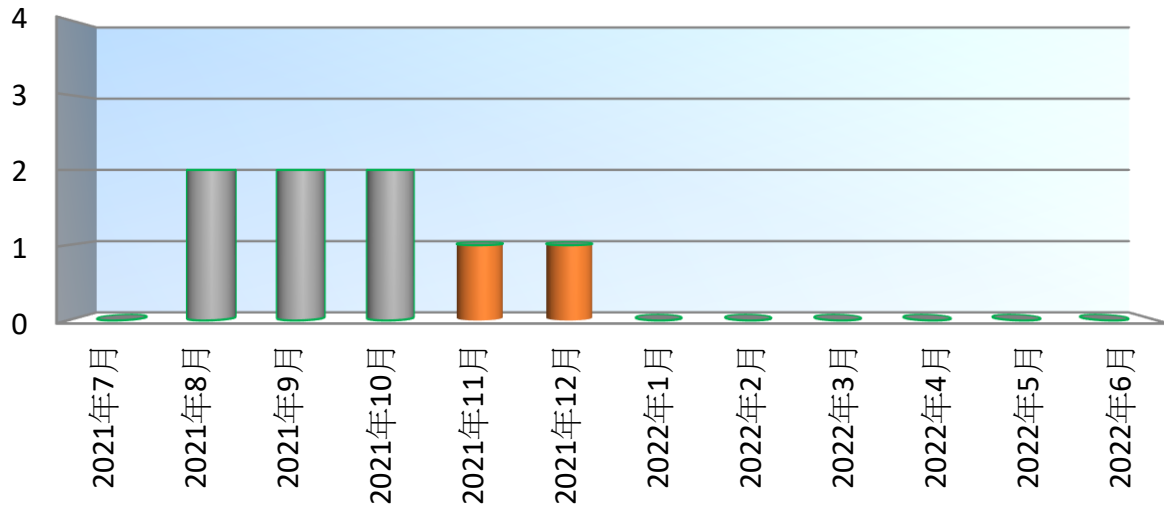
Review and analysis of urinary incontinence and urinary tract infection from 7/2021 to 6/2022

1. From 7/2021 to June 2022, there are an average of 154 incontinence patients in our home every month, and the average prevalence rate is 77.5% (Diag 3), which is a significant decrease of 8.1% compared with the average prevalence rate last year.
2. The rate of those with incontinence and urinary tract infection was 0.43%, of which 0.37% used disposable diapers; and only 0.05% of those who used urinary catheters, a significant drop from last year.
3. A total of 8 people suffered from urinary tract infection during the whole period, involving residents ; 1 male and 7 females. Mainly due to frailty, long-term bed ridden (Diag 4)

(圖三 Diag 3) 7/2021 - 6/2022 失禁現患率
Prevalence of Incontinence



(圖四 Diag 4) 尿道感染人數
Number of UTIs



	2021年7月	2021年8月	2021年9月	2021年10月	2021年11月	2021年12月	2022年1月	2022年2月	2022年3月	2022年4月	2022年5月	2022年6月
3F 尿道感染人數	0	2	2	2	0	0	0	0	0	0	0	0
2F 尿道感染人數	0	0	0	0	1	1	0	0	0	0	0	0
1F 尿道感染人數	0	0	0	0	0	0	0	0	0	0	0	0

護理措施

1. 隨著人類自然的衰老過程，身體器官功能也隨著年紀增加而逐漸衰退，根據物理治療師評估，卧床院友總數為 30 人，較去年的 12 人大幅上升；新冠疫情第五波的出現，隔離措施限制院友的活動情況，康復後的院友身體普遍轉差，護士更需留意院友的進食及吞嚥情況，轉介言語治療師評估院友，照顧員在日常照護時，增加餵水的次數，鼓勵院友多喝水，減少尿道感染的風險。
2. 護士照顧有導尿管的院友，除嚴格執行無菌技術放置導尿管及監察有無尿道感染症狀外；指導護理員正確更換尿片，包括清潔會陰時一定由前向後，不可以來回擦拭，清潔後需更換手套才可接觸新尿片及其他物品，避免因尿片污染引致尿道感染。
3. 每年會為護理員進行考核「正確更換尿片程序」。

Improvement measures

1. With the natural aging process of human beings, the functions of body organs also gradually decline with age. According to the evaluation of physical therapists, the total number of bedridden residents is 30, which is a significantly increase from last year's 12;
With the overwhelming of the fifth wave of the Covid-19 pandemic. The isolation measures restrict the activities of the residents. The health of the residents after recovery generally deteriorates. Nurses need to pay more attention to the eating and swallowing condition for the residents. Referral to a speech therapist for evaluation the eating problem. Encourage residents to drink more water to reduce the risk of urinary tract infection.
2. Nurses take care of residents with urinary catheters. In addition to strictly implementing aseptic techniques to place catheters and monitor for symptoms of urinary tract infections.
Personal care workers are instructed to change diapers correctly, including cleaning the perineum from front to back, not wipe back and forth. Change gloves after cleaning before touching new diapers and other items to avoid urinary tract infections caused by diaper contamination.
3. An annual assessment of "Correct diaper changing procedures" will be conducted for personal care workers.

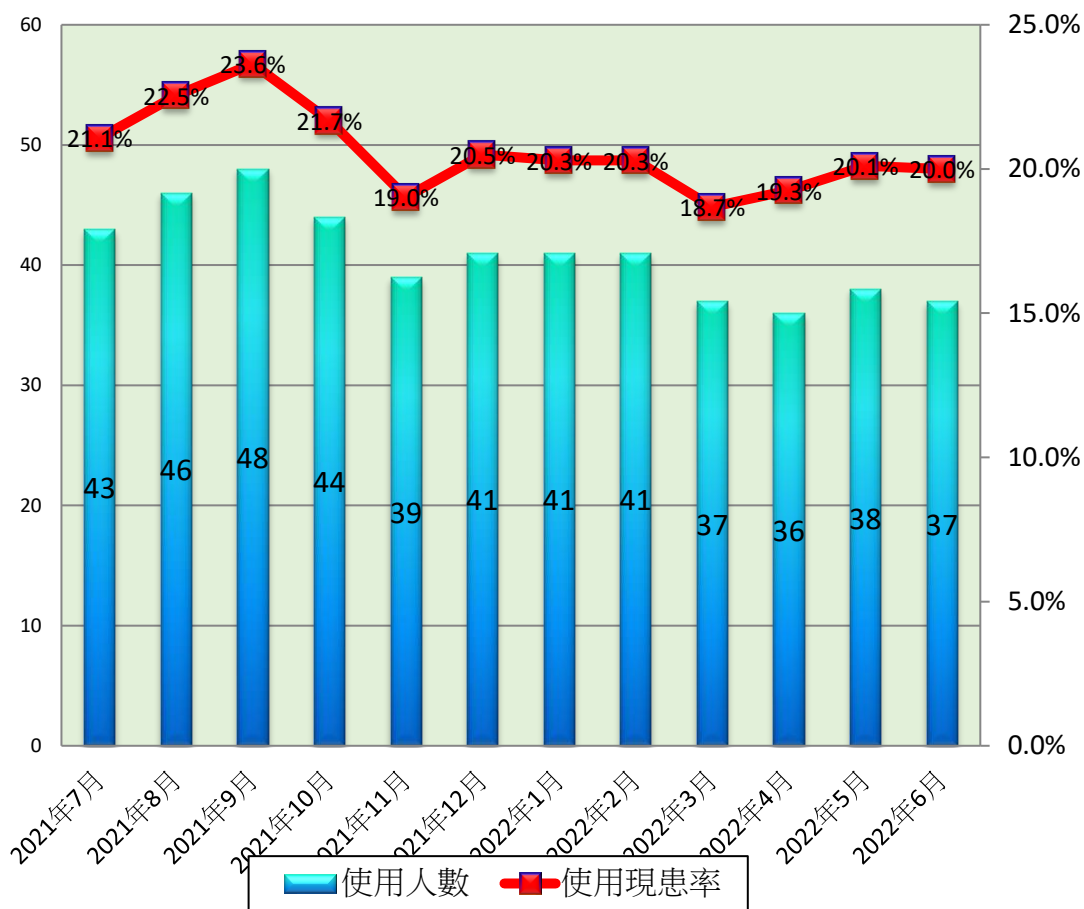
安全物品的使用

2021 年 7 月至 2022 年 6 月安全物品使用指標監測檢視及分析

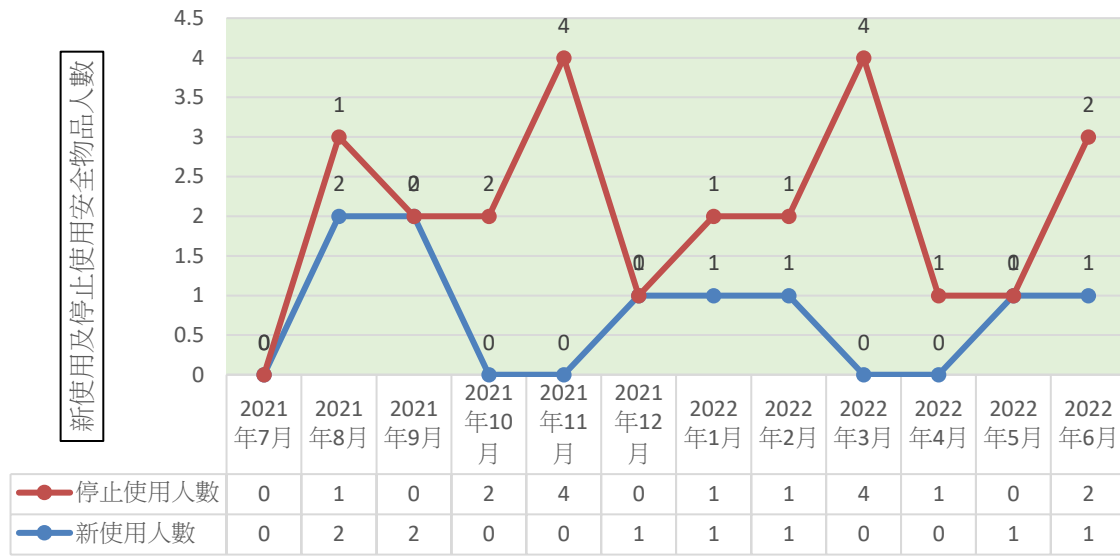
1. 全期使用安全物品的院友平均每月有 20.5% (圖五)，使用人數平均約 41 人，比去年同期平均使用率 19.2%，增加 1.3%。
2. 使用安全物品種類包括：安全背心 91.6%、盆骨部位固定帶 38.8%、手帶或手套 16.6% 等等。

3. 全期新增使用安全物品有 9 人，全期發生率為 0.3%；停止使用有 16 人，比率平均為 3.4% (圖六)。
4. 使用安全物品主要原因為高危易跌，少數為自傷危險及維生治療。

(圖五 Diag 5) 7/2021 - 6/2022 安全物品使用現患率
Prevalence rate of using physical restraint



(圖六 Diag 6) 7/2021- 6/2022安全物品新使用及停用比率
Incidence of using & stop using physical restraint



Use of Physical Restraint

Monitoring, review and analysis of physical restraint usage indicators from 7/2021 to 6/2022

1. The number of residents who required application of physical restraint was around 41 per month, with an average prevalence of 20.5% for the designated period of 7/2021 -6/2022 (Diag 5), an increase of 1.3% compared to the average usage rate of 19.2% in the same period last year.
2. The types of safety items used include: 91.6% of safety vests, 38.8% of pelvic holders, 16.6% of hand straps or gloves, etc.
3. In the whole period, 9 residents newly used restraint items, and the incidence rate was 0.3%; 16 residents stopped using them, with an average rate of 3.4% (Diag 6).
4. The major reason for using restraint items is high risk of fall, and a small percentage are self-injury and life-support treatment.

護理措施

由於近年入住院舍的長者，活動能力普遍較差；本院使用約束物品的原則，包括：

1. 使用約束物品前，必須由護士、物理及職業治療師的專業評估，決定使用種類及時段，經由醫生再評估確認及取得家屬與院友的同意。
2. 員工必須按本院指引，正確使用約束物品，包括：
 - 定時監察被約束長者的安全。
 - 定時鬆解、使院友受約束的身體部位得到舒緩及活動。
 - 定時記錄約束物品的使用情況於「e-護存」，護士需要監察記錄，跟進及核實，

避免遺漏。

3. 以上專業團隊每月需重新評估每位院友約束的需要。

Improvement measures

Owing to the elderly who have been admitted to residential care homes in recent years with poor mobility and unsteady gait, the principle of using restraints include:

1. Prior to the application of physical restraints, must be professionally assessed by Nurses, Physiotherapist and Occupational Therapist. The type and time of use shall be confirmed by the doctor's reassessment and the consent of the family members and residents shall be obtained.
2. All staff must use the restraints correctly according to the policies and guidelines, including:
 - i) Regularly monitor the safety of the restrained elderly
 - ii) Regular release, so that the restricted body parts of the residents can be relieved and moved.
 - iii) Regular record the use of restraints items in "e-護存", nurses need to monitor the records on time, follow up and verify to avoid the miss.
3. The above professional team will reassess the needs for restraints every month.

言語治療服務 Speech Therapy Service

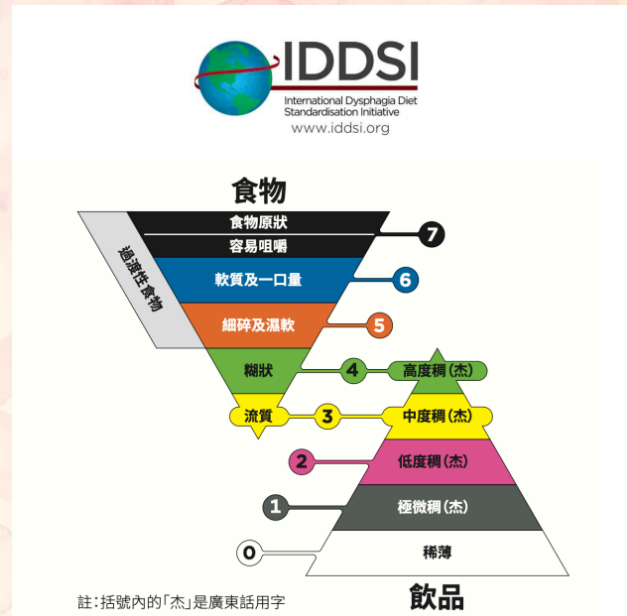
為配合國際吞嚥障礙飲食標準(IDDSI)和應對「長新冠」對院友的影響，本院新增三款餐類和相應的評估方法，並向社區分享製作軟餐方法，於臨床治療上亦新增不同循證實踐的訓練給予有需要的院友。

國際吞嚥障礙飲食標準(IDDSI)

國際吞嚥障礙飲食標準化創辦組織 (IDDSI) 訂立了一套國際吞嚥障礙飲食標準完整框架及詳細定義 (2019)¹，為食物質地和飲品的濃稠度提供通用術語，使照顧者可以隨時檢驗食物質地或飲品的濃稠度，以確保該食物或飲品與言語治療師或其他臨床專業人士給予的進食建議相符。香港公立醫院餐類指引中的「飲品指引」亦已採用了 IDDSI 的分類方法，各公私營機構也逐漸跟隨以便於溝通。

新增餐類

為配合以上國際吞嚥障礙飲食標準，由 2021 年 8 月起，本院開始提供碎餸加剪飯餐和另上碎餸飯餐，以增加餐類選擇予院友。為本身因咀嚼能力欠佳而需進食糊餐的院友提供更多咀嚼和進食不同食物的機會，藉此提高院友生活質素和口肌咀嚼能力，現時約有 14% 院友受惠於此舉。



「長新冠」對院友吞嚥和溝通上的影響

2019 新型冠狀病毒肆虐全球多年，至今疫情雖有減輕，但「長新冠」症狀依然持續影響院友身體狀況，而其中最影響院友吞嚥和溝通的症狀包括：味覺和嗅覺的變化、氣促、專注力下降、喉嚨痛等。對 2019 新型冠狀病毒的復康研究尚在發展，但研究指出現時言語治療的方式對治療「長新冠」是具成效的²，院友整體身體狀況依然受益於言語治療訓練，其中包括呼吸訓練、發聲訓練、言語訓練、吞嚥訓練等。

社區教育

本院獲香港滙豐 (HSBC Hong Kong) 贊助，與 The Project Futurus 一同於 2021 年 6 月到 7 月期間，到不同社區中心協辦「照顧者軟餐工作坊」，為照顧者及有興趣的公眾人士教授製作軟餐技巧，並分享不同病患 (例如：中風、帕金森症、認知障礙症、失語症、吞嚥困難等) 的照顧者技巧，好讓大眾提升對言語治療和軟餐使用的知識，更確切了解患者需要。

新增循證實踐的訓練 (Evidence-based practice)

循證實踐的訓練是言語治療的基礎理念之一，目的是透過科學實証的方式確保言語訓練的方法的成效。本院於 2021 年年尾購入呼氣肌肉力量訓練器 (EMST 75&150) 吸氣肌肉轉換力量

訓練器 (IA150)，呼氣肌肉力量訓練器是一個可以調較呼氣阻力的訓練工具，訓練器亦包括可



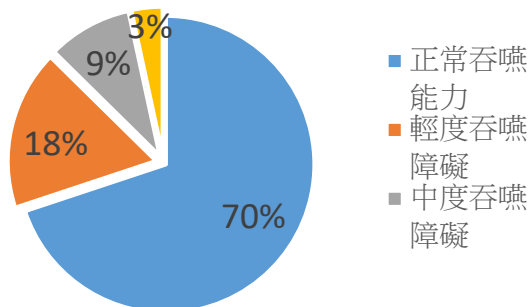
以更換的吹口

以配合不同嘴唇閉合能力的院友，亦因疫情關係，增添了病毒過濾器以減低因訓練傳播病毒的風險。部份研究³指此訓練方式有效提高院友呼吸力量、提升咽喉吞嚥幅度，藉此減低吸入性肺炎風險，而部份研究亦指吸氣肌肉轉換力量訓練對助改善血壓⁴。

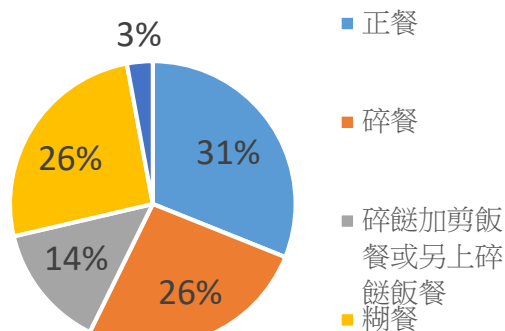
全院吞嚥進食現狀

吞嚥能力方面，全院共有約 30%院友患有不同程度的吞嚥障礙，約 18%院友屬於輕度吞嚥障礙，約 9.0%院友屬於中度吞嚥障礙，約 3%院友屬於嚴重吞嚥障礙（圖一）。自理進食方面，全院有約 71.5%院友可自行進食，約 25.1%院友需他人餵食或視情況協助飲食，餘下院友則以鼻胃管餵食。進食餐類方面，全院現時約 30.9%院友進食正餐，約 26.1%院友進食碎餐，約 14%院友進食碎鏵加剪飯餐或另上碎鏵飯餐，約 29.5%院友進食糊餐，約 3%院友則以鼻胃管餵食（圖二）。

圖一 全院院友吞嚥能力情況



圖二 全院院友進食餐類情況



參考資料

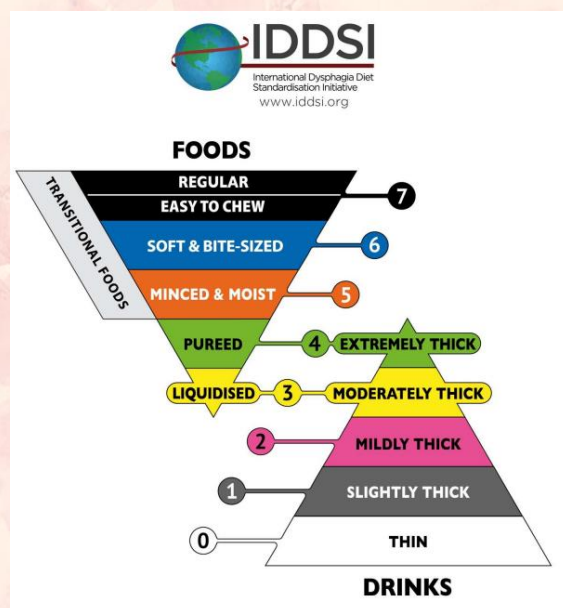
1. 國際吞嚥障礙飲食標準(IDDSI)完整框架及詳細定義 (2019), https://iddsi.org/IDDSI/media/images/Translations/IDDSI_Framework_Descriptors_Final_Traditional_Chinese_Feb_2021.pdf
2. Chadd K, Moyse K, Enderby P. Impact of COVID-19 on the Speech and Language Therapy Profession and Their Patients. *Front Neurol.* 2021 Feb 18;12:629190. doi: 10.3389/fneur.2021.629190. PMID: 33679590; PMCID: PMC7930219.

3. Hutcheson KA, Barrow MP, Plowman EK, Lai SY, Fuller CD, Barringer DA, Eapen G, Wang Y, Hubbard R, Jimenez SK, Little LG, Lewin JS. Expiratory muscle strength training for radiation-associated aspiration after head and neck cancer: A case series. *Laryngoscope*. 2018 May;128(5):1044-1051. doi: 10.1002/lary.26845. Epub 2017 Aug 22. PMID: 28833185; PMCID: PMC5823707.
Pauloski, B.R., Yahnke, K.M. Using Ultrasound to Document the Effects of Expiratory Muscle Strength Training (EMST) on the Geniohyoid Muscle. *Dysphagia* 37, 788–799 (2022). <https://doi.org/10.1007/s00455-021-10328-x>
4. Craighead DH, Heinbockel TC, Freeberg KA, Rossman MJ, Jackman RA, Jankowski LR, Hamilton MN, Ziemba BP, Reisz JA, D'Alessandro A, Brewster LM, DeSouza CA, You Z, Chonchol M, Bailey EF, Seals DR. Time-Efficient Inspiratory Muscle Strength Training Lowers Blood Pressure and Improves Endothelial Function, NO Bioavailability, and Oxidative Stress in Midlife/Older Adults With Above-Normal Blood Pressure. *J Am Heart Assoc*. 2021 Jul 6;10(13):e020980. doi: 10.1161/JAHA.121.020980. Epub 2021 Jun 29. PMID: 34184544; PMCID: PMC8403283.

In order to align with The International Dysphagia Diet Standardisation Initiative (IDDSI) framework and address the impact of the " Post-COVID-19 syndrome", we provided two new meal options and its corresponding assessment methods, provided community training in preparing soft meals, and adopted new evidence-based practices to provide treatment.

The International Dysphagia Diet Standardisation Initiative (IDDSI)

IDDSI published the Complete IDDSI Framework in 2019¹, The IDDSI Framework provides a common terminology to describe food textures and drink thickness. IDDSI tests are intended to confirm that the flow or textural characteristics of a particular product at the time of testing match the clinician's recommendation. Hong Kong governmental hospital adopted the IDDSI framework in the "Diet Guideline" 2021, more and more public and private sectors are gradually following the IDDSI framework for better clinical communication.



More meal options

In order to provide the levels of food options mentioned in the above IDDSI framework, we started to provide extra-minced diet and puree with minced diet in August, 2021. It allows residents with limited mastication ability to take an alternative meal option other than puree, this improves their quality of life and provides more mastication opportunities, around 14% of the residents were benefited by the new meal options.

The " Post-COVID-19 syndrome"

The outbreak of COVID-19 has been going on for years, although it has become more controllable and shown a sign of easing, the " Post-COVID-19 syndrome" is still affecting our residents' ability to swallow and communicate, the syndromes include: loss of smell or taste, shortness of breath or

difficulty breathing, concentration problems, sore throat, etc. Although there is a paucity of research on treating " Post-COVID-19 syndrome", the speech-language pathology approaches to evaluation and intervention of other populations of critical care patients are applicable². Speech therapy treatments include respiratory training, voice training, speech training, swallowing training, etc.

Community Education

We were sponsored by HSBC Hong Kong to work with The Project Futurus from June-July, 2021, we held a "Caregiver Skill: Soft Meal Workshop" in different community centers, which aimed to promote the skill of preparing soft meals and the caregiver skill for patients with Stroke, Parkinson's disease, Dementia, Aphasia, and Dysphagia. The caregiver was able to have a better understanding of the needs of different medical diagnoses, and the ways of preparing soft meals.

The use of evidence-based practice training method



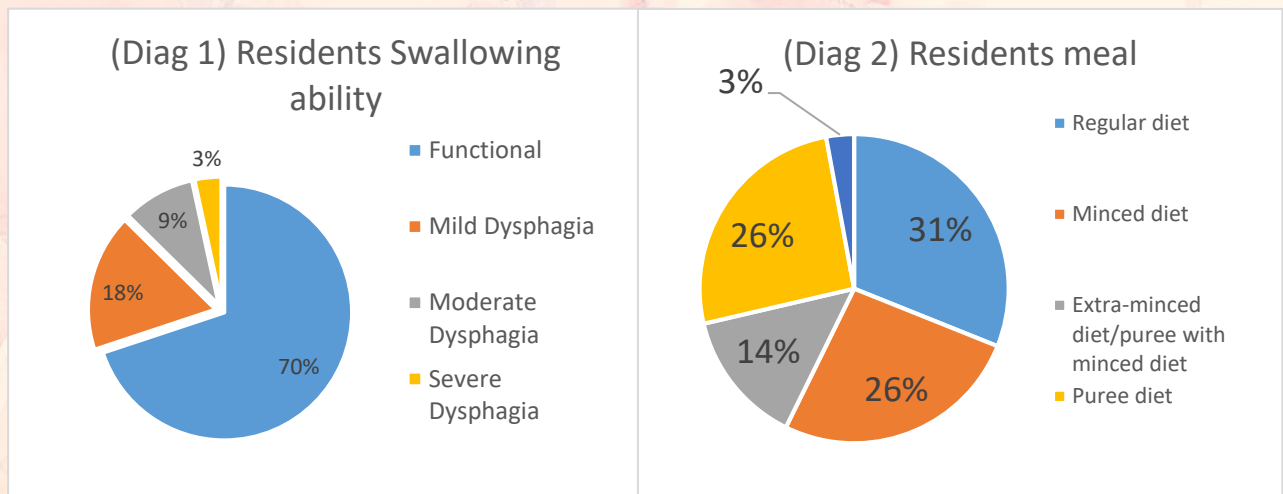
Speech therapist aimed to use evidence-based practice to provide training, and the effectiveness of the evidence-based practice was scientifically studied. In late 2021, we purchased the Expiratory Muscle Strength Training (EMST 75&150) and Inspiratory Muscle Strength Training (IA150) with a changeable mouthpiece with different shapes to fit residents' lip seal abilities, it aimed to provide resistance to expiratory and inspiratory muscles. Nevertheless, a virus filter mouthpiece is used to reduce the risk of virus infection via air. Research³ has shown that this training method may improve respiratory strength, increase laryngeal elevation range, and therefore reduce the risk of aspiration pneumonia, and the research⁴ shown that IMST may improve patients' blood pressure.

Home Residents Swallowing ability

In terms of swallowing ability, 30% of the residents have levels of dysphagia, 18% of the residents have mild dysphagia, 9% of the residents have moderate dysphagia, 3% of the residents suffer from severe dysphagia (Dia. 1). In terms of feeding methods, 71.5% of the residents are able to perform self-feeding, 25.1% are fed by staff/receive feeding assistance if needed, and the rest are fed via tube feeding. In terms of meal options, 30.9% of the residents are on a regular diet, 26.1% of the residents are on a minced diet, 14% of the residents are on a extra-minced diet/ puree with minced diet, 29.5% of the residents are on a puree diet, 3% of the residents are using tube feeding (Dia. 2).

References:

1. **The International Dysphagia Diet Standardisation Initiative** (2019), https://iddsi.org/IDDSI/media/images/Translations/IDDSI_Framework_Descriptors_Final_Traditional_Chinese_Feb_2021.pdf
2. Chadd K, Moysé K, Enderby P. Impact of COVID-19 on the Speech and Language Therapy Profession and Their Patients. *Front Neurol.* 2021 Feb 18;12:629190. doi: 10.3389/fneur.2021.629190. PMID: 33679590; PMCID: PMC7930219.
3. Hutcheson KA, Barrow MP, Plowman EK, Lai SY, Fuller CD, Barringer DA, Eapen G, Wang Y, Hubbard R, Jimenez SK, Little LG, Lewin JS. Expiratory muscle strength training for radiation-associated aspiration after head and neck cancer: A case series. *Laryngoscope.* 2018 May;128(5):1044-1051. doi: 10.1002/lary.26845. Epub 2017 Aug 22. PMID: 28833185; PMCID: PMC5823707.
Pauloski, B.R., Yahnke, K.M. Using Ultrasound to Document the Effects of Expiratory Muscle Strength Training (EMST) on the Geniohyoid Muscle. *Dysphagia* 37, 788 - 799 (2022). <https://doi.org/10.1007/s00455-021-10328-x>
4. Craighead DH, Heinbockel TC, Freeberg KA, Rossman MJ, Jackman RA, Jankowski LR, Hamilton MN, Ziemba BP, Reisz JA, D'Alessandro A, Brewster LM, DeSouza CA, You Z, Chonchol M, Bailey EF, Seals DR. Time-Efficient Inspiratory Muscle Strength Training Lowers Blood Pressure and Improves Endothelial Function, NO Bioavailability, and Oxidative Stress in Midlife/Older Adults With Above-Normal Blood Pressure. *J Am Heart Assoc.* 2021 Jul 6;10(13):e020980. doi: 10.1161/JAHA.121.020980. Epub 2021 Jun 29. PMID: 34184544; PMCID: PMC8403283.



音樂治療服務

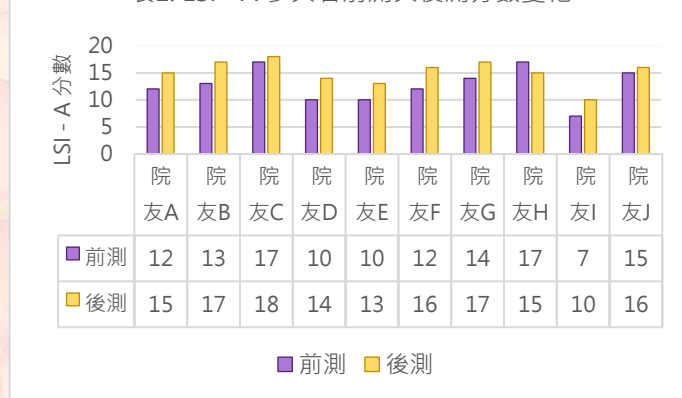
音樂治療於新冠肺炎疫情期間在改善認知障礙症院友的生活滿意度之實驗研究

由 2020 年初起，香港已經歷了五波疫情，為院舍的日常生活帶來了不同的影響。本報告旨在探討患有認知障礙症的院友，於新冠肺炎疫情期間接受音樂治療前後的生活滿意度比較，以瞭解音樂治療對他們的生活質素是否有正面影響。認知障礙症患者在認知能力、身體機能、言語、甚至情緒方面都可能出現不同程度的問題。在新冠肺炎疫情期間，為了減少病毒傳播，院舍採取了嚴格的社交隔離措施，如取消院友外出活動，限制了家人、朋友和不同義工團體的探訪。這加劇了認知障礙症患者的孤獨感和社交需要得不到滿足的問題。

而音樂治療被證實是一種有效的干預，可幫助認知障礙症患者減輕壓力、焦慮、抑鬱等負面情緒，促進身心健康，增強社交活動，改善認知能力，提高生活質素。聆聽喜歡的音樂，能刺激我們的大腦釋放多巴胺，讓人感到愉悅，減少壓力和焦慮的情緒。當人們聽到熟悉的音樂時，會回想起與音樂有關的回憶，增加正面情緒。此外，在音樂的氛圍下，人們更易與他人連結。特別在玩樂器時，需要團隊合作。所有人在合奏當中用音樂互相支持、傾聽對方的旋律及節奏，並用自己的樂器去回應。同時，大家用不同的非言語方式傳達訊息，例如保持眼神交流及用不同的肢體語言，建立獨特的社交聯繫。在即興合奏當中，亦可讓人們感到自己在群體中是被聆聽及受尊重的，亦感覺自己融入了群體。能夠與他人一同創作音樂，都能使人們從中獲得成就感，使人更加自信，對於建立及維持社交關係非常重要。在音樂律動當中，將音樂加入不同的動作，可以更有吸引力，因為音樂可以增加動作的樂趣和節奏感。而且，不同速度的音樂，配合不同速度的動作，更具挑戰性。例如速度快的音樂及動作需要較高的身體協調性及靈活性；而速度慢的音樂及動作則需要較高的肌耐力及平衡力。再者，我們也需要動動腦筋去記下一個又一個疊加的動作。因此，患認知障礙症的院友在音樂治療當中，不知不覺地減輕了壓力和負面情緒，增加了社交活動，維持了身體機能及認知能力，從而提高他們於院舍中的生活質素。

音樂治療師於 2022 年 10 月至翌年 2023 年 1 月，進行了為期 8 星期的音樂治療小組，每星期一節，每節 60 分鐘，包括好歌獻給你、眾樂樂、情緒小組及精神健康小組，共有 32 位患認知障礙症的院友參加。32 位院友均接受了生活滿意指數（Life Satisfactory Index - A, 簡稱 LSI-A) 的前測評估。在治療結束後，音樂治療師隨機抽樣 10 位院友進行 LSI - A 的後測評估，以評估音樂治療對他們的生活滿意度的影響。音樂治療小組內容包括聆聽音樂，音樂懷緬，即興合奏，音樂律動，音樂遊戲等活動。

表1. LSI - A 參與者前測與後測分數變化



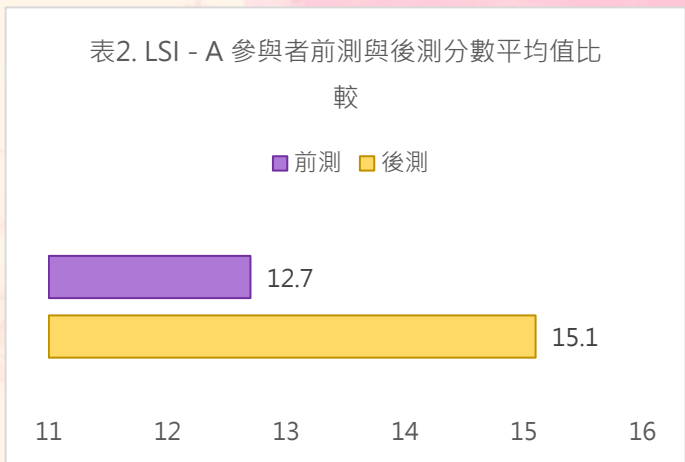
數據：以下是院友在接受音樂治療前後的生活滿意指數(LSI - A)數據：這組數據是一個配對樣本，因為每個參加者在治療前後都接受了測量。以下是對這組數據的分析：平均得分(表 2)：

在音樂治療前，平均 LSI-A 得分為 12.7，而在治療後，平均得分為 15.1。這意味著整個樣本的平均得分在治療後有了明顯提高了 2.4 分。根據上述數據，參加者在接受音樂治療後的生活滿意指數普遍有所上升，表明音樂治療對於提高患有認知障礙症院友的生活滿意度具有顯著正面影響，並且治療的效果在統計上是顯著的。

結果： 本研究的結果顯示，經過 8 節的音樂治療後，患認知障礙症的院友對生活滿意度都有所提高。音樂治療是一種有效的精神健康治療方式，可以幫助患認知障礙症的院友提高生活滿意度，部份院友亦報告說，音樂幫助他們享受生活，減低疫情及社交隔離措施對他們的影響，使他們能夠用另一種方式進行社交活動，在即興音樂演奏當中，亦增加了滿足感及成功感。

院友亦報告說，音樂幫助他們享受生活，減低疫情及社交隔離措施對他們的影響，使他們能夠用另一種方式進行社交活動，在即興音樂演奏當中，亦增加了滿足感及成功感。

總結： 儘管這項研究得出了積極的結果，但本研究的限制在於樣本數量較少，而且只有實驗組而沒有對照組，且僅針對於患有認知障礙症的安老院院友進行了研究，因此無法排除其他可能影響研究結果的因素。未來研究可以擴大樣本數量，並增加對照組，以進一步驗證音樂治療在提高不同程度的認知障礙症患者的生活滿意度方面的普遍性和有效性。展望未來應持續開展類似研究，以便更好地理解音樂治療在疫情期間對不同人群的影響，並為相關政策制定和實踐提供依據。



Music Therapy Report

The impact of music therapy on enhancing life satisfaction among residents with cognitive impairment during the COVID-19 pandemic: An Experimental Study.

Since 2020, Hong Kong has experienced five waves of the COVID-19 pandemic, which has brought different impacts on the daily life of residential care homes. This report aims to explore the comparison of life satisfaction before and after receiving music therapy for residents with cognitive impairment during the COVID-19 pandemic, in order to understand whether music therapy has a positive impact on their quality of life. Individuals with cognitive impairment may experience difficulties in cognitive and physical functions, speech, and emotions. The COVID-19 pandemic has resulted in social isolation restrictions being implemented in residential homes, including the cancellation of outings and the restriction of visits from family, friends, and volunteers. This has led to increased feelings of loneliness and unmet social needs for those with cognitive impairment.

Music therapy is an effective intervention that has been shown to help individuals with cognitive impairment reduce emotional disturbance, such as stress, anxiety, and depression. It can also promote physical and mental health, enhance social and cognitive functioning, and improve quality of life. Listening to favorite music has been found to have a variety of positive effects on individuals. It can stimulate the release of dopamine, elevate the feeling of happiness, and reduce stress and anxiety. Familiar music can also elicit emotions and memories. In addition, music provides a context for social interaction, particularly when playing instruments that require teamwork. When making music together, individuals support each other by listening to others' melodies and rhythms and responding with their own instruments. Non-verbal communication, such as eye contact and body language, can also help establish unique social connections. Music improvisation can foster a sense of belonging and increase confidence, both of which are important for building and maintaining social relationships. Incorporating music into different movements during exercise can make it more attractive, as it adds fun and rhythm to the movements. Furthermore, the combination of different speeds of music with different movements can present a greater challenge. Fast music and movements require higher coordination and flexibility, while slow music and movements demand greater muscular endurance and balance. Participants must also remember one movement after another. Therefore, participating in music therapy sessions has been found to offer benefits to individuals with cognitive impairment. It can help to relieve stress and negative emotions, increase social interactions, maintain physical and cognitive functions, and improve the overall quality of life in residential homes.

From October 2022 to January 2023, group music therapy sessions were conducted by a music therapist once a week, a total of 8 sessions were held, each session with a duration of 60 minutes. The groups, "Good Songs for You," "Joyful Music," "Mood Group," and "Mental Health Group," were included and a total of 32 residents participated. Prior to the sessions, all 32 residents underwent a pre-test of the Life Satisfaction Index-A (abbrev. as LSI-A). 10 residents were randomly selected to undergo a post-test of the LSI-A to evaluate the impact of music therapy on their life satisfaction after all sessions were completed. Different music therapy techniques were used in the session, including listening to music, instrument improvisation, music movement, and musical games.

Data: The data represents a paired sample design, as each participant was assessed both before and after the music therapy sessions. The following analysis was conducted on this data: Average scores: Prior to the music therapy sessions, the average LSI-A score for the sample was 12.7, while after the sessions, the average score increased to 15.1. The difference score was 2.4. This indicates a significant increase in the average LSI-A score for the entire sample following the music therapy sessions. These findings suggest that music therapy has a significant positive impact on improving the life satisfaction of residential home residents with cognitive impairment and the treatment effect was statistically significant.

Results: The results of this study demonstrate that after receiving eight sessions of music therapy, residents with cognitive impairment reported an increase in life satisfaction. Music therapy is an effective intervention for improving the quality of life, as residents reported music helps them to enjoy life and also lowers the impact of the COVID-19 pandemic and social isolation restrictions. Participating in music therapy sessions also enable them to use alternative to interact with others, which also increased their sense of satisfaction and achievement during music-making.

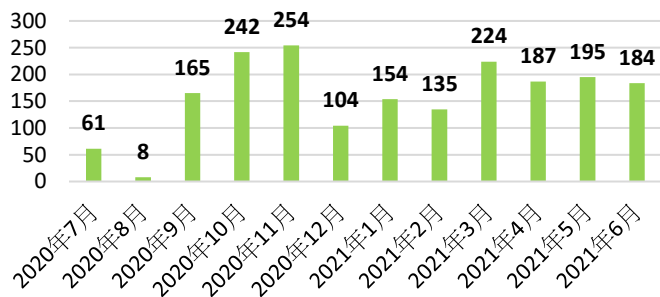
Conclusion: Although this study demonstrates positive results, it is important to note that this study has certain limitations. This study only includes a small sample size, lacks a control group, and focuses solely on residential home residents with cognitive impairment. Therefore, there is a possibility that other factors may have influenced the outcomes of this study. Future research could expand the sample size and include a control group to further investigate the effectiveness and generalizability of music therapy in enhancing life satisfaction among individuals with varying degrees of cognitive impairment. Further studies should be conducted to gain a better understanding of the impact of music therapy on different populations during the COVID-19 pandemic, thus providing a basis for policy-making and practice.



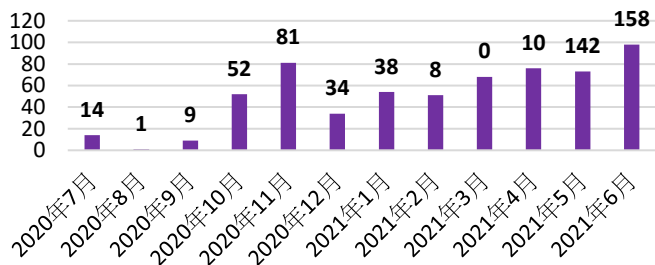
油塘長者日間護理中心

中心提供全人的照顧服務包括物理治療、職業治療、音樂治療、表達藝術治療及言語治療服務，更有專業的護理及社工服務，以確保會員得到有質素的照顧。

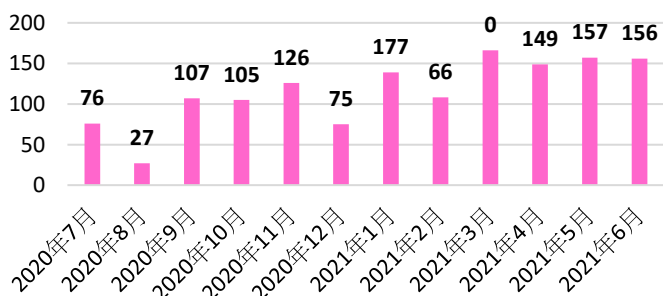
物理治療服務 (人次)



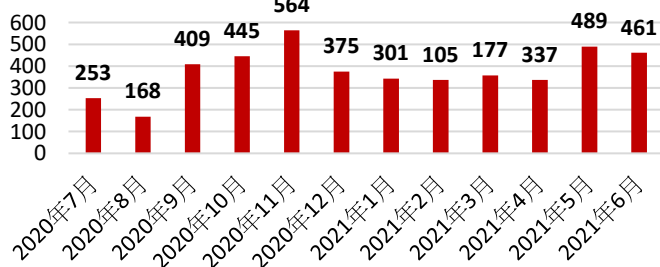
創意藝術治療服務 (人次)



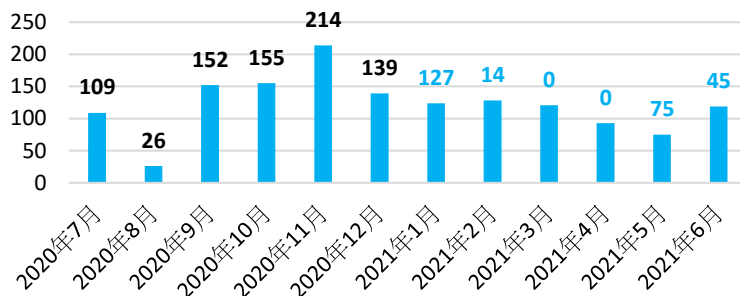
教育性活動 (人次)



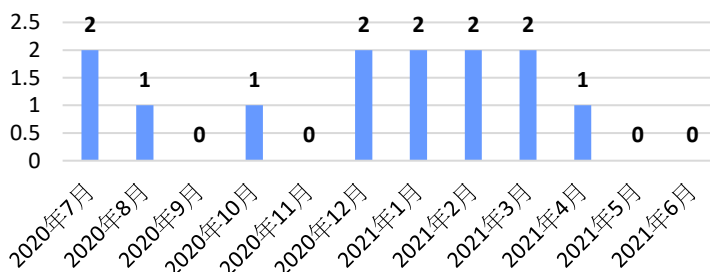
社交及康樂活動 (人次)



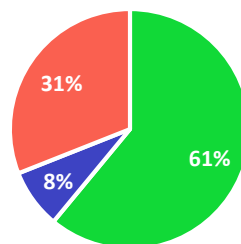
職業治療服務 (人次)



輔導服務 (人次)



7/2020-6/2021會員接受輔導原因



■ 健康問題 ■ 家庭原因 ■ 會員相處問題



認知障礙治療小組



書法班

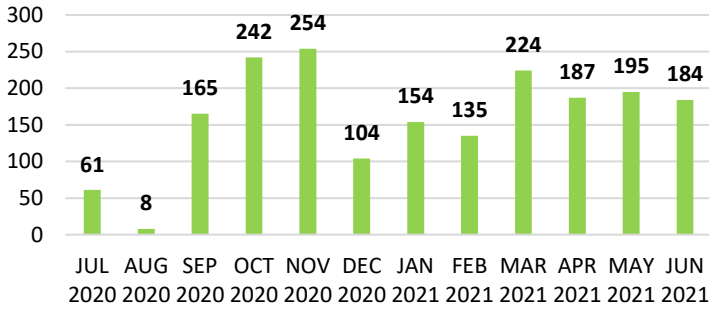


認知障礙治療(多點觸控智慧平台)

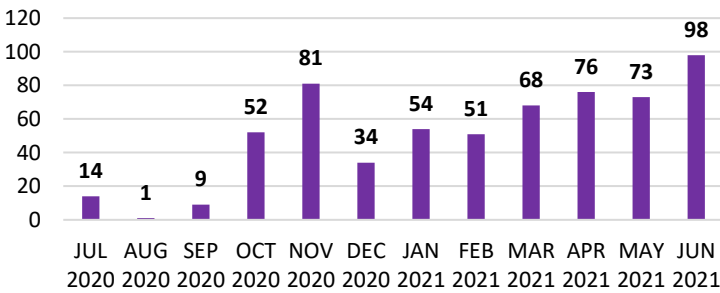
Yau Tong Day Care Center For The Elderly

Centre renders holistic care services including physiotherapy, occupational therapy, music therapy, expressive art therapy and speech therapy, as well as professional nursing and social work services so as to ensure quality care to our elderly members.

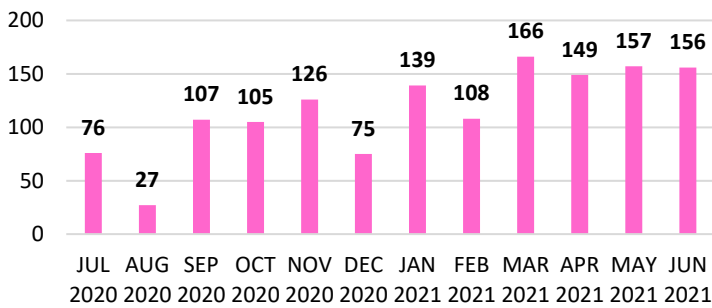
Physiotherapy Service (attendance)



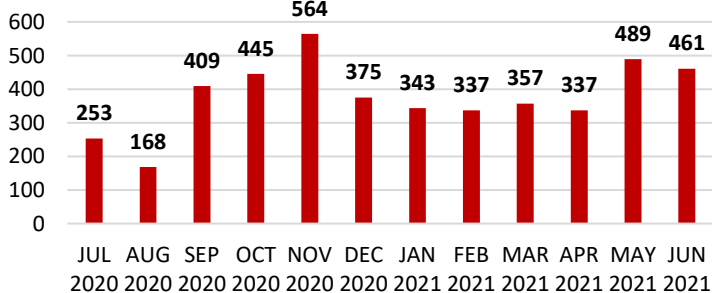
Creative Arts Activities (attendance)



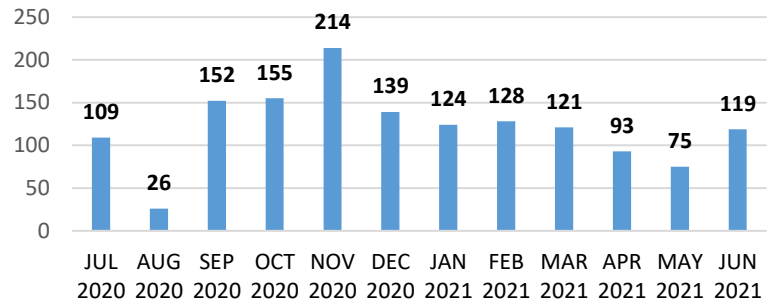
Educational Activities (attendance)



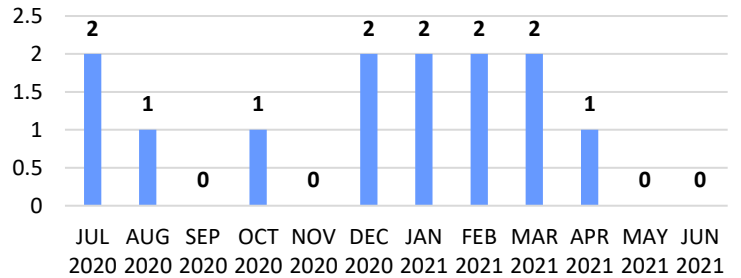
Social and Recreational Activities (attendance)



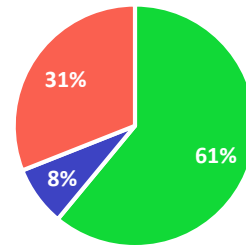
Occupational Therapy Service (attendance)



Counseling Service (attendance)



Reasons for receiving Counseling 7/2020-6/2021



Cognitive training group



Smart Table



Calligraphy class

油麗長者日間護理中心



中心自 2013 年 3 月 27 日開始服務至今，每日平均服務超逾 45 名標準名額，而 4 個暫託位亦為不少照顧者舒緩照顧壓力，以回應觀塘區長者對日間中心服務的需要。中心本著「社區照顧」的理念，為體弱長者提供優質的日間照顧、護理、復康及身心發展服務，協助他們保持最佳的活動能力，並支援及協助其護老者，讓長者可以改善生活質素和在熟識的社區健康地生活，達致「居家安老」的目標。



中心首創「蝴蝶照顧模式」，透過全人關懷(Holistic Care)、積極延年(Active Ageing)、安居樂群(Ageing in Place) 及恆毅臻美(Continuous Quality Improvement) 四方面，以跨專業團隊和電子化的護理系統，連繫地區資源，合力提供「地區為本」式的關懷，提升長者的生活質素，轉化他們的生命猶如蝴蝶般繽紛燦爛。



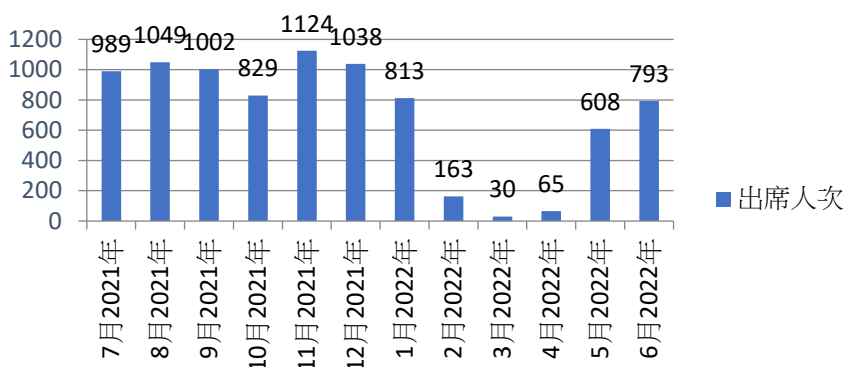
全人關懷

- 由專業護士提供護理服務、健康指導及身體檢查
- 透過物理及職業治療訓練，增強會員的認知及活動能力
- 言語治療服務，改善長者的言語及吞嚥能力
- 由專業社工提供情緒支援、認知訓練及轉介服務



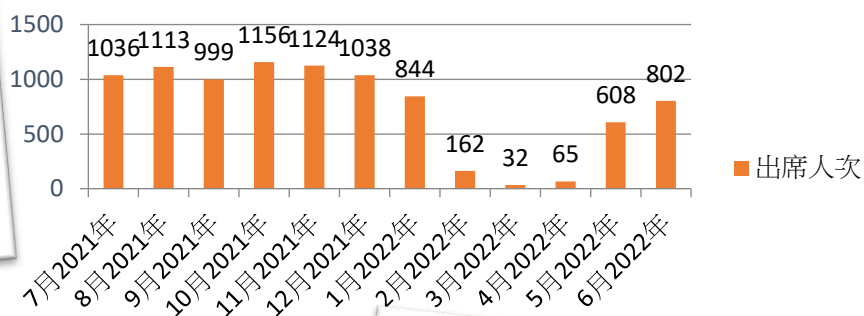
點擊觀看油麗中心活動情況

日間中心物理治療服務 (人次)



會員參與物理治療訓練

日間中心職業治療服務 (人次)



會員參與職業治療訓練

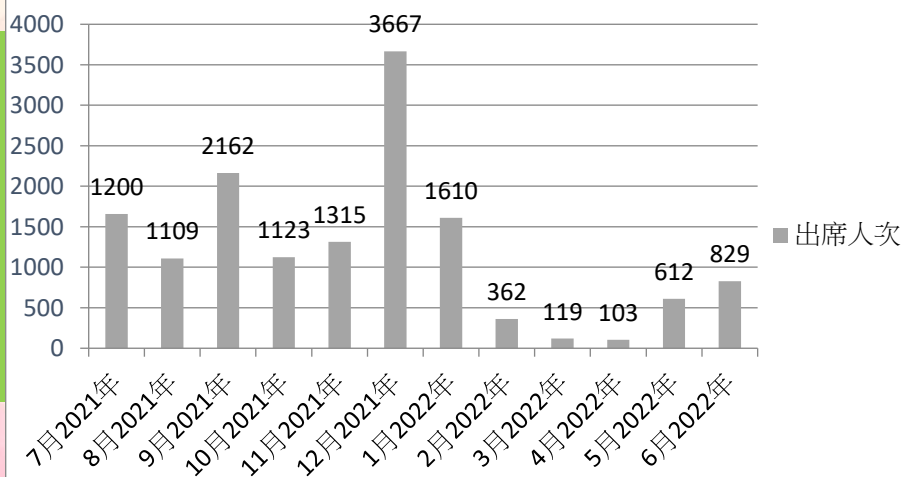


會員參與言語治療訓練



會員參與體適能訓練

日間中心社交及康樂活動(人次)



中秋節手工

積極延年



- 舉辦多元的社交康樂活動，培養及發掘會員的能力及興趣
- 引入資訊科技產品，讓長者與時並進。



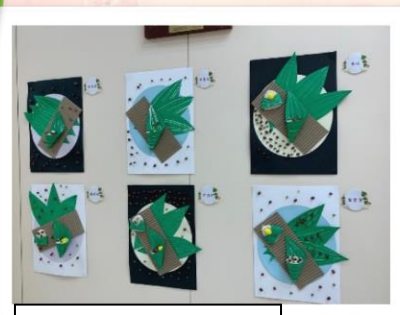
母親節手工



宣道會興華堂福音粵曲探訪



立體畫



端午節立體畫



會員參與普及健康運動
長者健體計劃外展活動



樂齡科技義工探訪



護老者活動 - 護
老者支援

安居樂群



- 在過去 1 年舉辦了 16 次護老者活動，參與人次為 739 人，當中包括家屬、長者及家傭。

恆毅臻美

- 定期向員工提供認知障礙症培訓，提高團隊服務水平
- 加強社會聯繫，擴闊社區支援，增強支援網絡，提升社會凝聚力及關愛。



護老者活動 - 衛生知識



護老者活動 - 言語治療訓練

Yau Lai Day Care Centre for the Elderly



The center has been providing services since March 27, 2013, and has served an average of more than 45 standard quotas per day. The 4 temporary places also help relieve the care burden of caregivers, in response to the elderly in the Kwun Tong district's need for daytime center services. The center adheres to the concept of "community care" and provides quality daytime care, nursing, rehabilitation, physical and mental development services to frail elderly people, helping them maintain their optimal activity ability and supporting and assisting their caregivers. This allows the elderly to improve their quality of life and live healthily in their familiar community, achieving the goal of "aging in place".

The center pioneered the "Butterfly Care Model", which connects community resources through four aspects of holistic care, active aging, aging in place, and continuous quality improvement. It uses cross-professional teams and electronic nursing systems to provide "community-based" care, enhancing the quality of life of the elderly and transforming their lives into colorful and brilliant ones like butterflies.



Click to watch
Activities in Yau Lai Centre

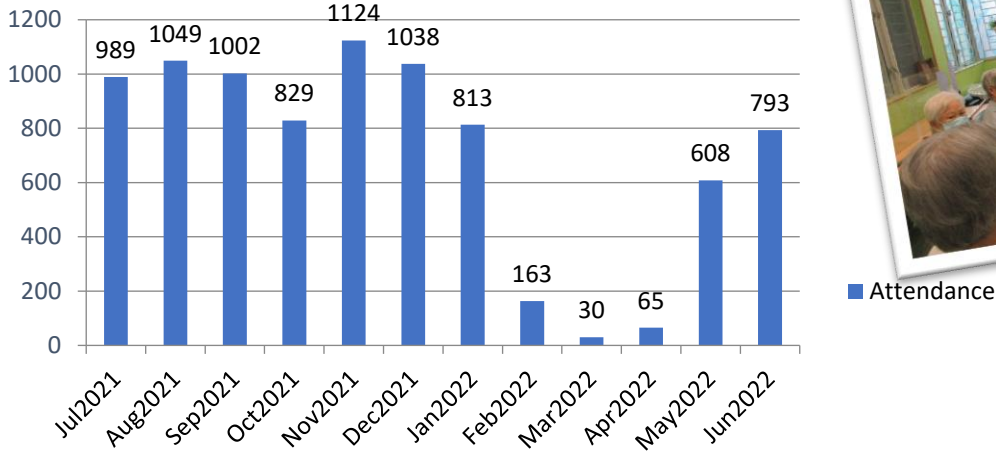


Holistic Care

- ↳ nursing services, health guidance and physical examinations are provided by professional nurses
- ↳ enhance members' cognitive and activity skills through physical and occupational therapy training
- ↳ speech therapy services to improve the speech and swallowing ability of the elderly
- ↳ provide emotional support, cognitive training and referral services by professional social workers

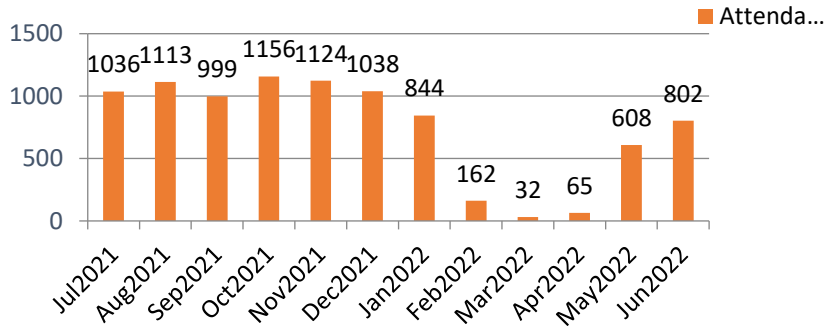


Day Center Physiotherapy Services (Persons)



Activities at the center include member participation in physical therapy

Day Centre Occupational Therapy Services (Persons)



Activities at the center include member participation in occupational therapy

Activities at the center include member participation in speech therapy

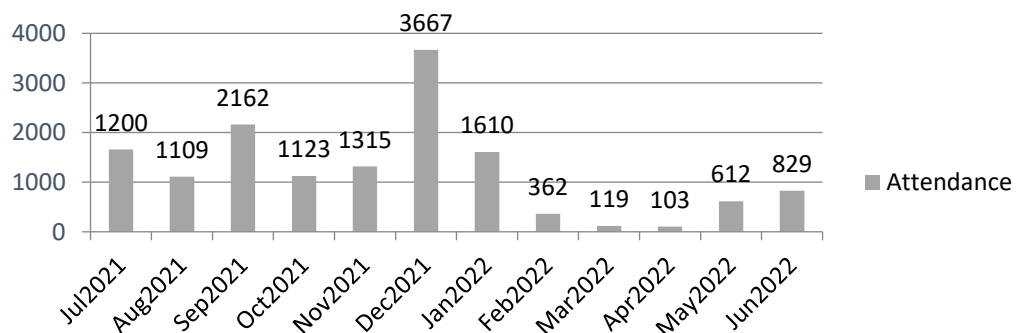


Activities at the center include member participation in fitness training



Handcraft activities for Mid-Autumn Festival

Day Centre Social and Recreational Activities (Persons)





Active Ageing

- ↳ organize a wide range of social and recreational activities to develop and develop the abilities and interests of our members
- ↳ introduce information technology products to keep the elderly up to date.



handcraft activities for Mother's Day



3D painting



3D printing of Dragon Boat Festival

Visits by the Evangelical Cantonese Opera Group of the Hong Kong Christian and Missionary Alliance Church Hing Wah Church



Outreach activities for the Popular Health Movement Elderly Fitness Program



Visits by senior technology volunteers



caregiver activities such as support group

Aging in Place



- ↳ has organised 16 elderly care activities in the past year with 739 participants, including family members, elderly people and domestic helpers.

Continous Quality Improvement

- ↳ regularly provides training for employees on cognitive impairments to improve team service
- ↳ strengthen social ties, broaden community support, strengthen support networks and enhance social cohesion



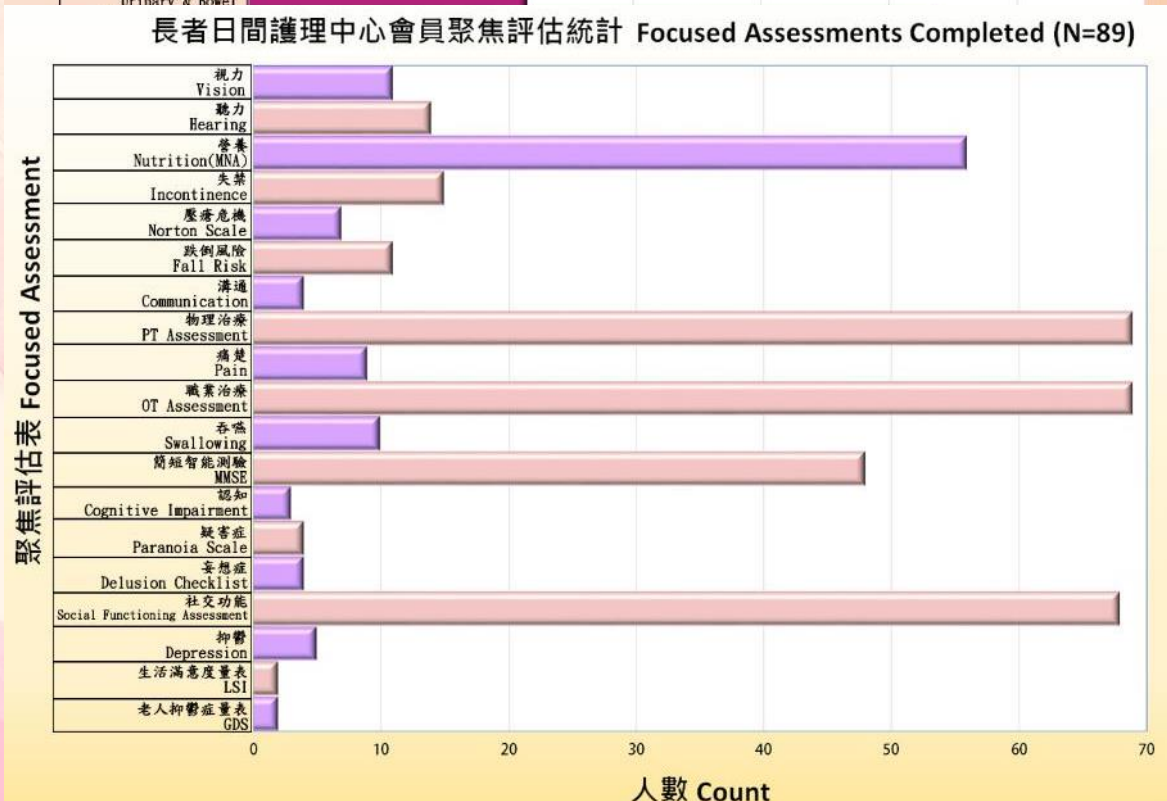
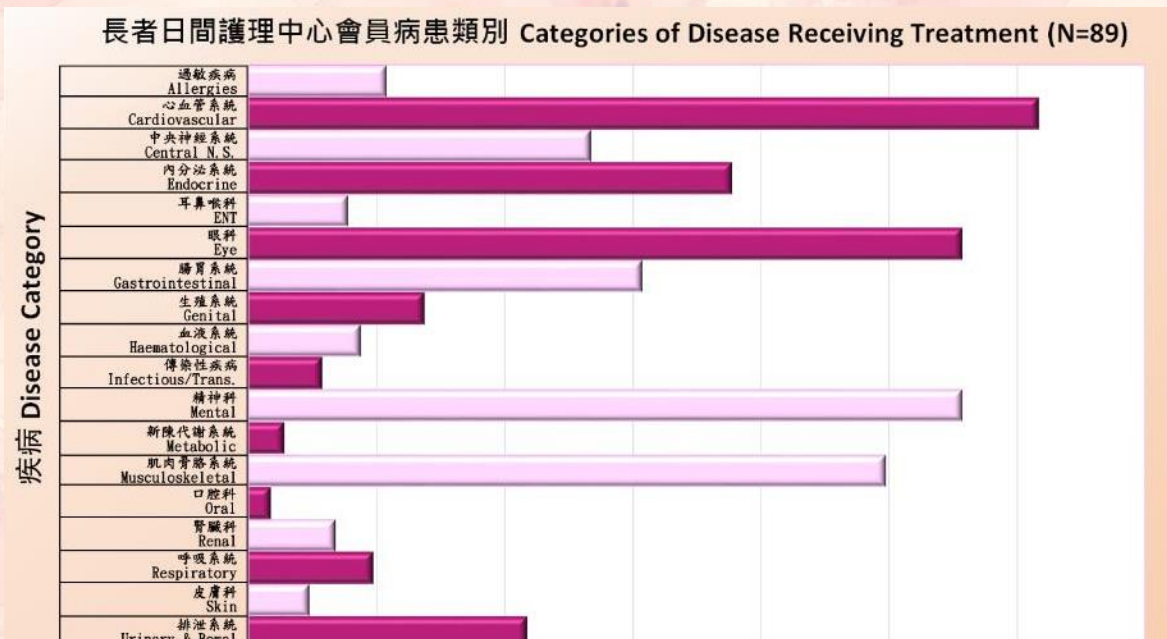
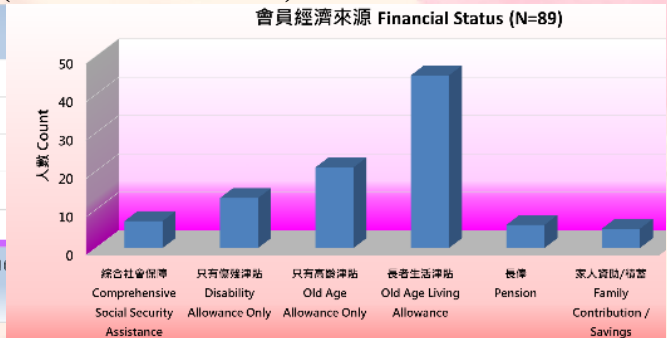
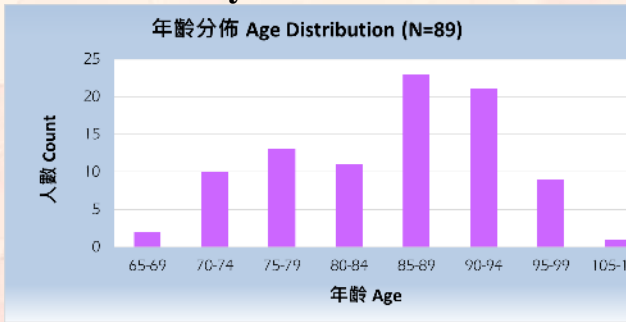
Caregiver activities such as support hygiene knowledge



Caregiver activities such as speech therapy training

長者日間護理中心會員資料統計 (截止 2022 年 6 月 30 日)

Statistics of Day Care Centre Members (as of 30 Jun 2022)



李樹培夫人啟知中心

中心於2009年成立，倡導「自發」、「自管」、「自教」及「自學」的精神，倡導終身學習及健康生活，致力培訓第三齡導師，同時，積極申辦基金，安排義工服務，關顧油塘區居民，服務社群。

創新多元化課程 實踐「老有所為」精神

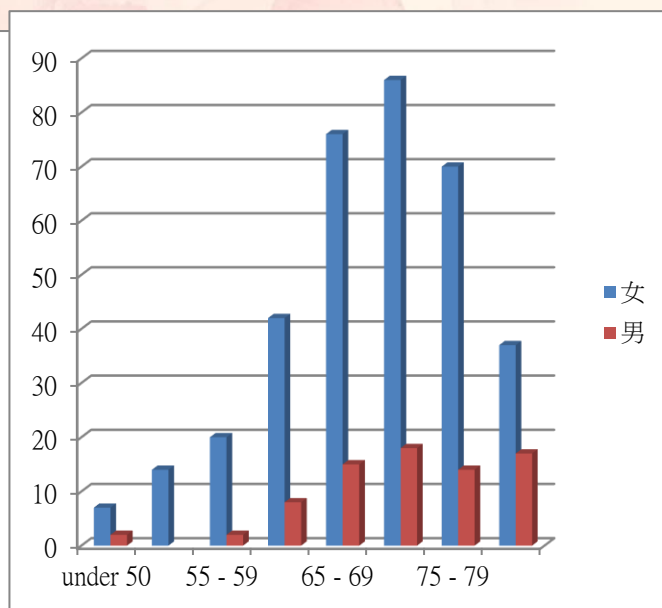
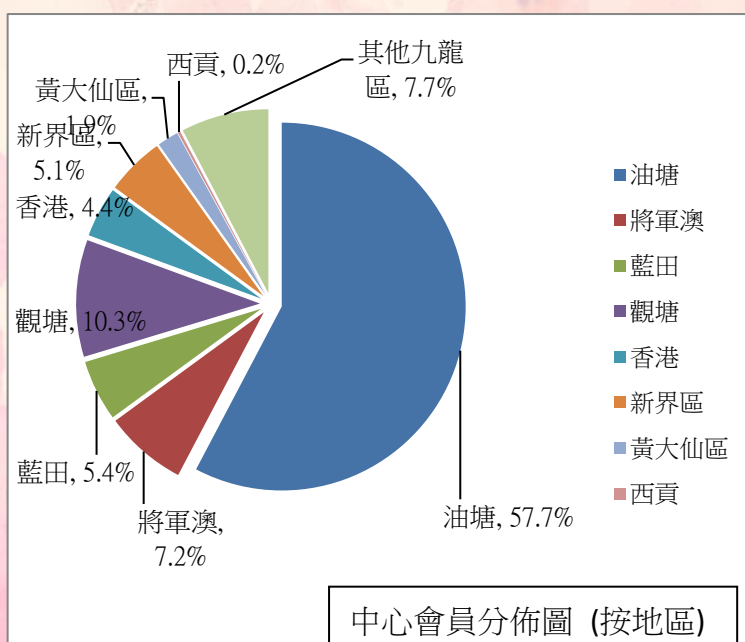
中心為會員提供多元化的課程及活動，並培訓超過25位學長，義務協助課程設計或擔任導師。每月舉辦的課程平均超過30個，當中的口琴班、歌唱班、跳舞班、太極班等常獲社區人士讚賞及被邀請出席各類表演，讓第三齡人士積極投入健康及豐盛的生活。

課程類別	課程名稱
電腦課程	電腦數碼設計班、智能手機應用小貼士班等
文化課程	唱歌學英文班、國畫班、書法班等
「智」育課程	珠仔首飾班、絲帶繡、絲網花、剪紙興趣班等
「體」育課程	簡易瑜伽運動操、拉筋操、按穴班、五禽戲、六字訣、太醫拳班等
「群」育課程	排排舞班、集體舞班、健康舞、傳統楊式太極班等
「樂」育課程	口琴班、二胡班、國粵語懷舊金曲班、合唱歌班、粵曲樂器班等



中心會員統計資料（截至2022年6月30日）

會員人數：428位 (男：76位；女：352位)(中心會員以油塘區居民為主- 佔57.7%，而大部分會員的年齡分佈為65-79歲，佔全部的 65.2%)



Dr. Ellen Li Learning Centre

Our centre was established in 2009. Advocating the spirit of "self-initiation", "self-management", "self-teaching" and "self-learning", we have trained third-agers as tutors to teach our members, so as to promote lifelong learning and healthy life. We actively applied various funding grants to organize volunteering services, and to better serve Yau Tong residents and the community.

Innovative and diversified courses to promote the spirit of "Active Aging"

A wide range of courses and activities are offered to our members. Over 25 third-agers have been trained and volunteered to help design courses or become tutors. On average, more than 30 courses are held every month. Among them, harmonica classes, singing classes, dancing classes, and Tai Chi classes are often appreciated by the community and are regularly invited to attend various performances, fostering the elderly students to actively lead a healthy and fruitful life.

Course Categories	Course Titles
Computer and digital	Digital design, smart phone application classes, etc.
Cultural	Learning English with songs, Chinese painting, Calligraphy classes, etc.
Intellectual	DIY accessories, ribbon embroidery, silk flowers, paper cutting classes, etc.
Health	Yoga exercise, stretching exercise, Acupressure, Wuqinxi, Liu Zi Jue, Taiyi Boxing
Social	Line dancing, group dancing, health dancing, Yang Style Tai Chi
Musical	Harmonica, Erhu, Cantonese and Mandarin Oldies, choir, Chinese musical instrument, etc.

Smart phone application class



Calligraphy class

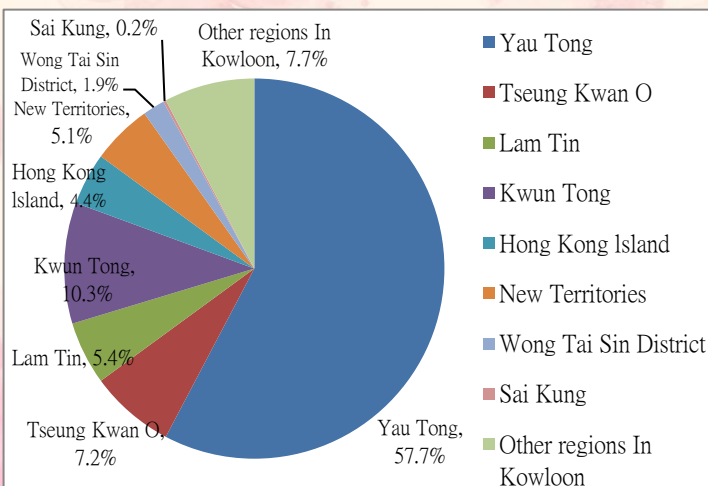


Chinese musical instrument class

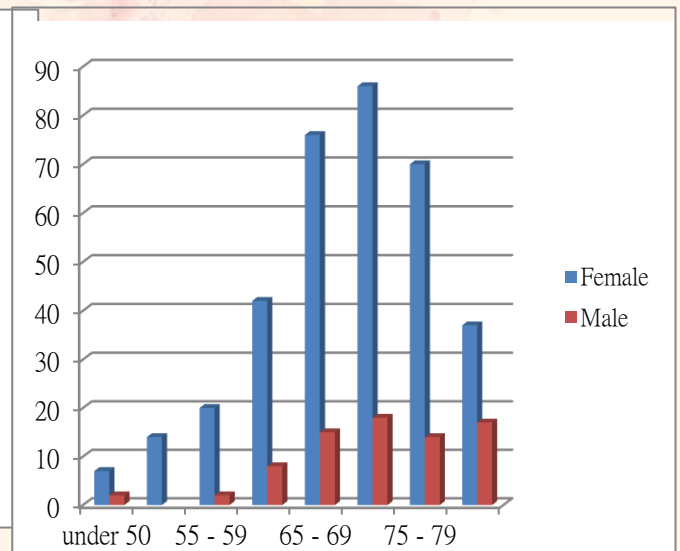


Members Statistics (as of June 2022)

- Total no. of members: 428 (Male: 76; Female: 352) ; 57.7% residing in Yau Tong district
- Majority of our members (65.2%) are in the 65 - 79 age group



Residential distribution of our members



Age distribution of our members

樂齡科技外展計劃

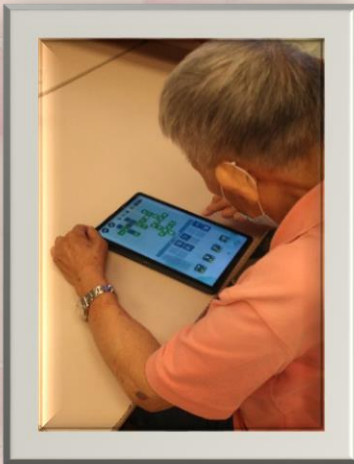
自 2018 年起機構獲「政府資訊科技總監辦公室」贊助兩期長者數碼外展計劃，主要透過培訓長者義工以實體方式讓不同院舍、日間中心和社區長者體驗數碼科技產品，目的為提高長者對應用資訊科技的興趣，增加長者的社交互動機會，從而提升他們的生活質素。

第二期「樂齡科技護老計劃」由 2021 年 3 月開始，因應新冠肺炎持續，活動隨即轉以遙距方式進行；為讓計劃更有效推行，我們添置了新的設備，如 Chromecast、TEMI 機械人及航拍機等，方便進行遙距活動，目的是鼓勵和協助隔離下的院舍、日間中心甚至社區長者學習或使用數碼科技以適應「新常態」的生活。

計劃內容如下：

「樂齡科技護老計劃」(2021-2023)

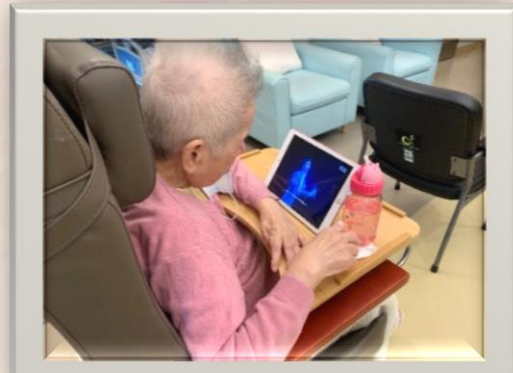
服務人數：計劃預期服務 1025 位院舍長者、145 位日間中心長者、160 位接受家居照顧服務的長者、238 位隱蔽長者和 240 位患有認知障礙症長者。



長者在平板電腦上玩認知遊戲，義工從旁協助。



長者在平板電腦上觀看粵劇表演。



長者要求義工在平板電腦上播放她最喜愛的梅艷芳歌曲，她十分高興和滿足。

Community Services: The OGCIO Projects – ICT

Outreach Program for the Elderly

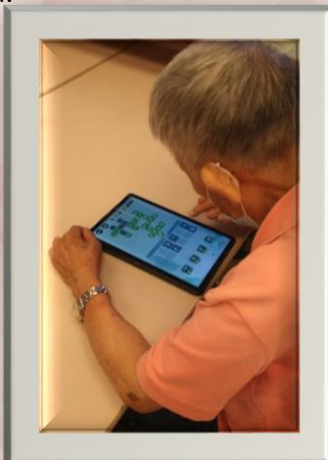
Background

Starting late 2018, we were granted 2 consecutive Two-year ICT Outreach Programmes for the Elderly by the Office of the Government Chief Information Officer (OGCIO). The projects aimed at raising ICT awareness of the elderly, increasing their use of ICT devices in their daily living so as to expand their social circle and enhance their quality of life.

The second project started in March 2021. In view of the persistence of COVID-19 pandemic, we shifted from face-to-face to remote means to conduct the project by. In order to stimulate and motivate the elderly participants' learning of digital devices, we procured interesting equipment including the Chromecast, TEMI Robot and Drone, to facilitate the elderly living in the residential care home and the community to adapt to the "New Normal".

「Smart Care for the Elderly」 (2021-2023)

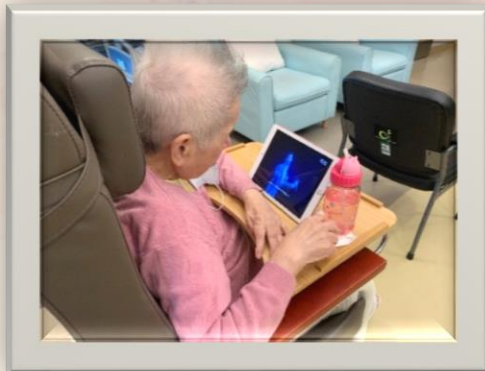
Estimated number of the elderly served: 1025 elderly living in Residential Care Homes, 145 elderly receiving Day Care Services, 160 elderly receiving Home Care Services, 238 Hidden Elders and 240 Elders with Dementia.



Elders played cognitive games in the Tablet with the assistance of volunteers.



Elders enjoyed the Cantonese Opera in the Tablet.



Elders felt delighted and contented when listening to the favourite songs of the famous singer Anita Mui in the Tablet.

《伴你乘風號》 - 創藝領航計劃 (2022-2024 年)

“COMPANION-SHIP” Creative Arts Navigating Project (2022-2024)

資助機構：醫務衛生局 (前食物及衛生局)

Funder: Health Bureau, HKSAR (former Food and Health Bureau)

計劃目的：

- (1) 於社區推廣精神健康
- (2) 建立社區支援網絡，辨識及促進有需要人士的精神健康
- (3) 為情緒受困擾人士提供創意藝術治療服務

Project goals:

- (1) To provide mental health education and raise awareness in community.
- (2) To identify community individuals with potential mental health needs through social support network.
- (3) To respond to the needs of persons with mental health issues through provision of counseling and creative arts therapy.

計劃服務對象：

主要為社區年長人士

Service targets:

Elders in community

計劃服務人數 (截至 2022 年 6 月 30 日)：

- 義工人數：66 人
- 直接參加者人數：259 人

No. of targets served (As at 30th June, 2022):

- Volunteers: 66 persons
- Participants: 259 persons

計劃展望：

本計劃將繼續培訓社區義工，並與區內學校、地區組織、長者服務單位等合作，舉辦各類以精神健康為主題的創意藝術或公眾教育活動，包括街站、講座、工作坊、小組、電話關顧等，以回應有情緒支援需要人士及公眾對精神健康的需要。

Project vision:

The project will continue to train community volunteers and cooperate with different parties, for example, schools, NGOs, elderly service units, etc. Various creative arts or public education activities of mental health will be organized, including street booths, talks, workshops, groups, care calls, etc., to respond to the needs of persons who need emotional supports, and the general public.



領航員義工培訓
Training sessions of
community volunteers



表達藝術治療小組 Expressive art therapy



精神健康宣傳街站
Mental health public education street booths



音樂治療工作坊
Music therapy workshops



藝術減壓體驗活動
Experiential art activities for relaxation



精神健康教育講座
Mental health public education talks

2022 年度安老服務管理委員會名單

2022 Elderly Services Management Committee Membership List



永遠榮譽顧問

蕭司徒潔

Permanent Honorable Advisor
SIU SZE-TO Kit Kitty



當然顧問

周梁麗芬(當任會長)

Ex-officio Advisor
CHOW Lai Fun Mona



當然顧問

陸明(當任主席)

Ex-officio Advisor
LUK Ming



主席

蕭詠儀

Chairman
SIU Wing Yee Sylvia



副主席

陳吳慧珍

Vice Chairman
CHAN NG Wai Jane



副主席

劉健儀

Vice Chairman
LAU Kin Yee Miriam

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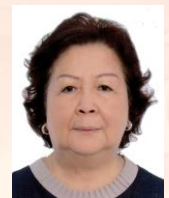
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