

The Double “H” Initiative  
“Home” <-> “Hospital” Dementia  
Care Parallel Collaborative Model

Dr HL Kong

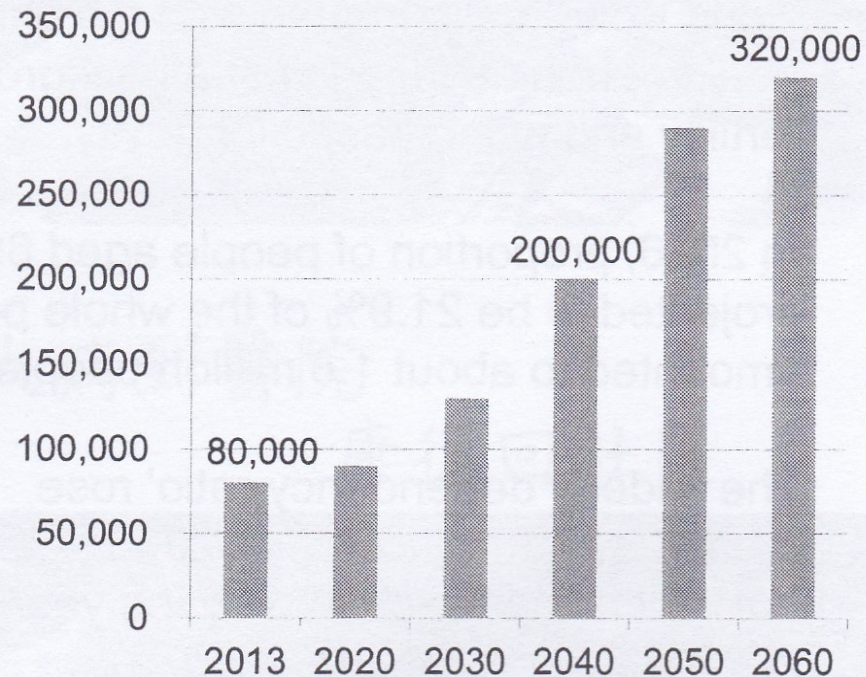
Department of Geriatric Medicine

RHTSK

# Dementia Prevalence

## Dementia prevalence

No. of people with dementia projected to be increased to 320,000 in 2060.



Source: Prevalence Studies of Dementia in Mainland China, Hong Kong and Taiwan, A Systematic Review and Meta-analysis, Wu, et al, 2013



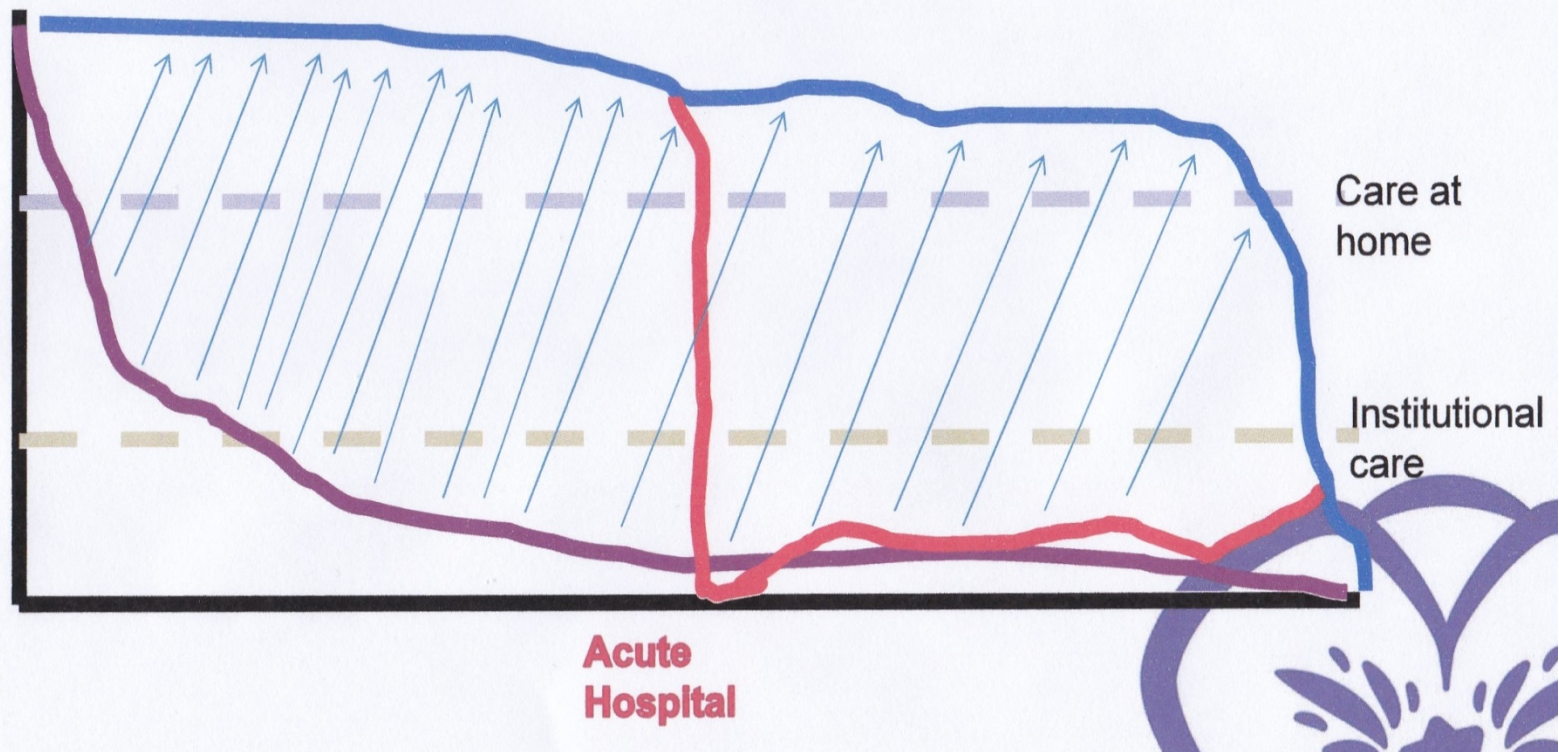
# Dementia Prevalence

- ◆ A recent study estimated that the figures for older person living in RCHes suffering from dementia was estimated to increase from 19,000 in 2010 to 48,000 in 2036. The number of community-dwelling older people (aged 60 and above) with dementia will increase from 86,000 in 2010 to 225,000 in 2036 (Yu, et al, 2010).
- ◆ Another study on all the 59 government-subsidized day care centres also revealed a high proportion (44%) of the 1420 day care centre users were suffering from dementia (Jockey Club Centre for Positive Ageing and HKCSS, 2010).

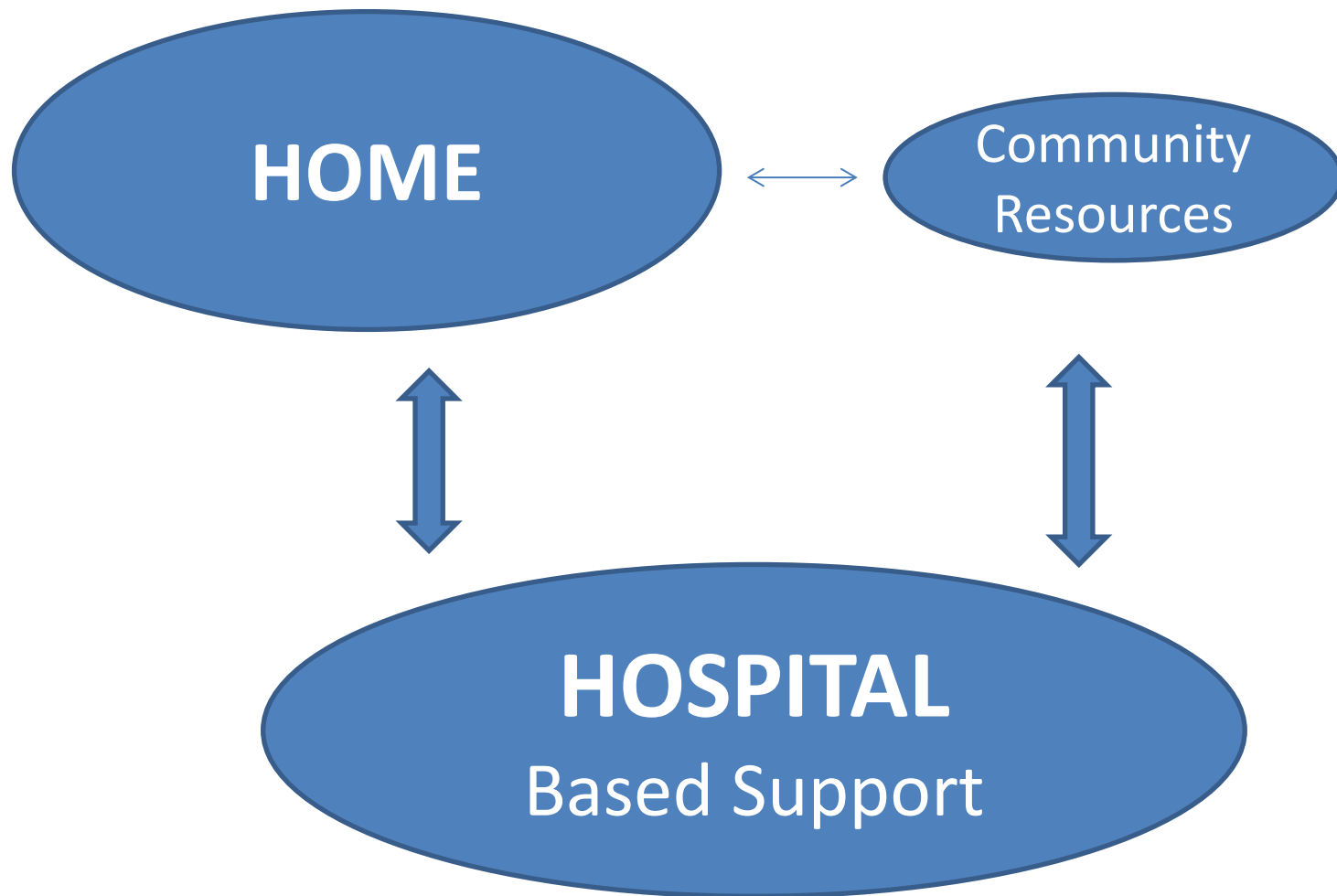


# The “Leaf” Model of Dementia Care

The “leaf model” – what keeps people with dementia above the line?







# Dementia Care “in Place”



# **RH Cognitive Services 2016**

# **Present Service Model in RHTSK**

- The Dementia Friendly Ward RH C8
- The Memory Clinic
- Post-diagnosis rehabilitation and support
- Other supportive services



# Present Service Model in RHTSK

- **The Dementia Friendly Ward RH C8**
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# **Elder Friendly Ward C8**

- Open in 1/2015



# Design Intent of Elderly Friendly Environment - Aims

1. Reduce fall risk & pressure sores
  - Employ least restraint
2. Enhance senses & orientation
3. Promote maintenance of function
  - Ward based rehab facilities
  - Carer engagement
4. Respect privacy & dignity
5. Facilitate staff workflow & monitoring



# 1. Fall Prevention /Minimize physical restraint

- Resilient vinyl ( Foam Backed) floor
- Handrails in corridors
- Electric low beds
- Lighting



Electric low beds  
20 cm vs 37.5 cm away from floor



# 3. Promote maintenance of function

## - Day room & Ward-based Rehabilitation facilities

### Structure

- Day room – Sit out for meals
- Ward based rehab facilities in day room - Hoist, Computer, VR, walking strip
- DC planning - Variety of equipment suitable for home use
- Bedside - Hand function games





# 3. Promote maintainence of function -Rehabilitation facilities in ward

( reduce lift traffic, weekend, engage carers, involve nurse etc)



Floor indicator for walk  
test

# Dementia Care Service Provision in C8



# D-Team

- Doctor
- Nurse
- PT
- OT
- MSW
- Other discipline

# D-Team Rounds

- Regular rounds to look at medical patients with dementia and delirium and to give recommendations
- Teaching and sharing with staff





# Know the patients

- Every staff knows which patients are demented since admission
- Person-centered care
- The patient: Who am I?





# Dedicated Staff in the shift

- Staff who solely care for those who are demented
- Hydration, eating, mobility, mood, behaviour
- Involve relatives early for discharge planning
- Lead Activities for selected demented patients







# Activities for targeted patients

- In C8 more space and better environment





Dementia Friendly C8

# Present Service Model in RHTSK

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- **The Memory Clinic**
- Post-diagnosis rehabilitation and support
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# The Memory Clinic

## Referral and Triage

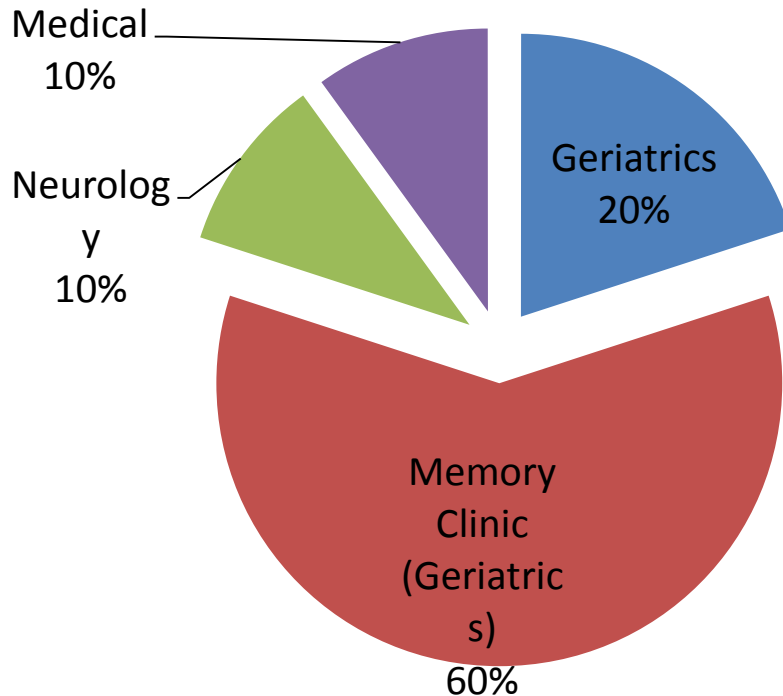
- First established in 1996
- Referral source- SOPD, GOPC, Post hospital discharge, Private practice(No specialty constraint)
- All referral letters are triaged by Geriatrician (Dr Kng or Dr Kong)
- Triage- P2 within 8 weeks (young onset <60years, rapidly progressive), P1 within 2 weeks (agreed by geriatrician). Waiting time now for routine cases is around 3 to 4 months

# The Memory Clinic

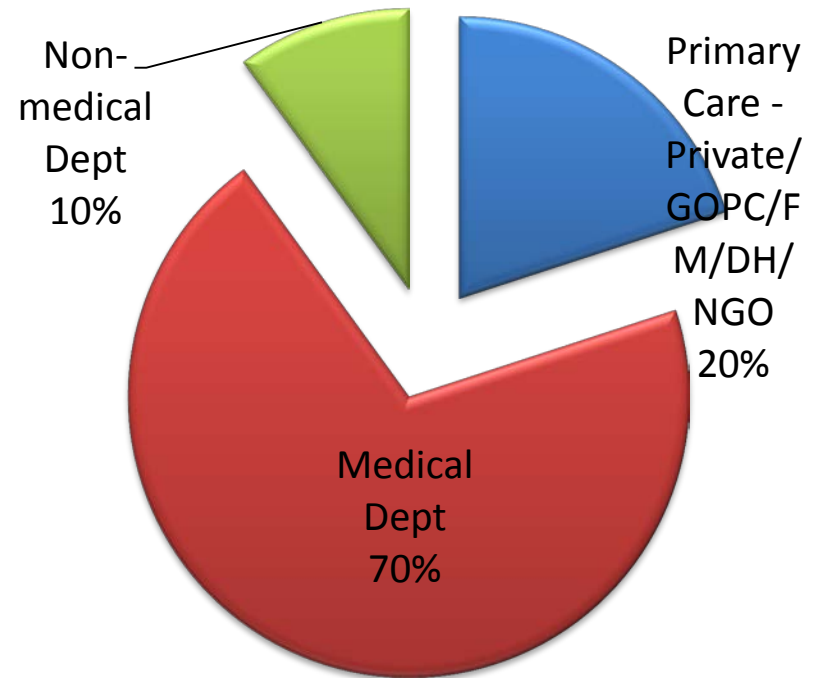
Referral and Triage

Referrals for cognitive complaints at SOPD (2-4 per week)

## Referrals To Which Clinic



## Referrals Source



NGOs -(Methodist-CGAT Nurse), St James

Based on 1 month survey – 10 referrals per month

# The Memory Clinic

Prior to clinic

- Carers are given AD8 and ADCQ to be filled in during the first booking and are asked to bring back during the first specialist consultation.
- Patients and carers are assessed by the nurse specialist who will also perform the MMSE/MOCA and make appropriate suggestions to geriatrician when necessary



# The Memory Clinic

## The Clinic

- This clinic is mainly for workup assessment, diagnosis and treatment monitoring.
- Weekly clinic by SMO/AC. 5-6 New cases per clinic
- Usual blood tests, CT/MRI/PET booked



# The Memory Clinic

## The Clinic

Appointment Type (EIS)	1st Attn	Old Follow-up	Row Total
Appointment Date (Year)	No. of Attendances	No. of Attendances	No. of Attendances
2011	69	974	1043
2012	48	1011	1059
2013	28	1213	1241
2014	92	1475	1567
2015	119	1648	1767
Grand Total :	356	6321	6677



# The Memory Clinic

In collaboration with Psychogeriatricians from PYNEH

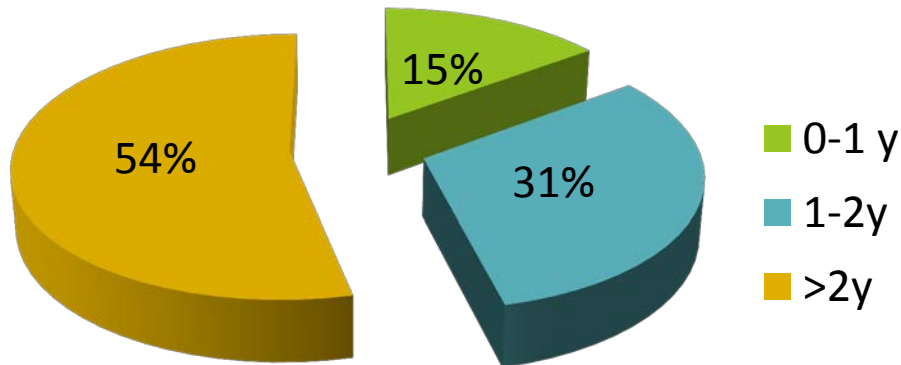
- After the first memory clinic consultations, some patients (those with significant affective or psychotic features) are referred to be assessed by the combined psychogeriatric clinic in GDH.
- The PYNEH psychogeriatrician will come to the GDH to see patients 2 times per month and each time will see 3 to 4 patients.
- A combined conference will be held once per month (The GMC conference) in GDH to discuss the problem cases

# Evaluation Results - RH Memory Clinic

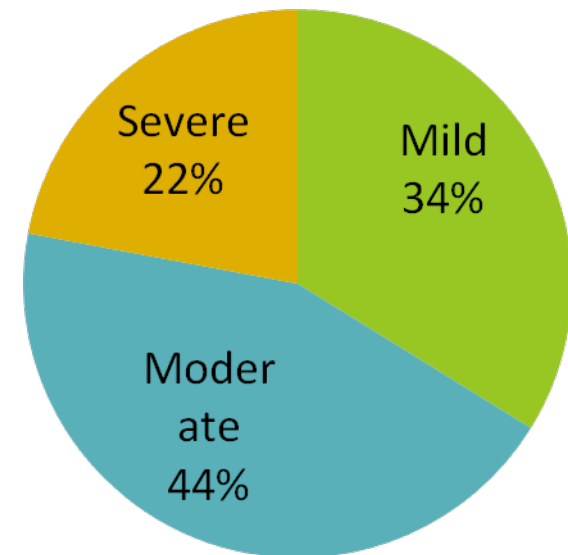
**Duration** : 85% seen in clinic > 2 years after onset of Cognitive Problems

**Severity** : 66% have moderate & severe Dementia

## Duration of Cognitive Complaints

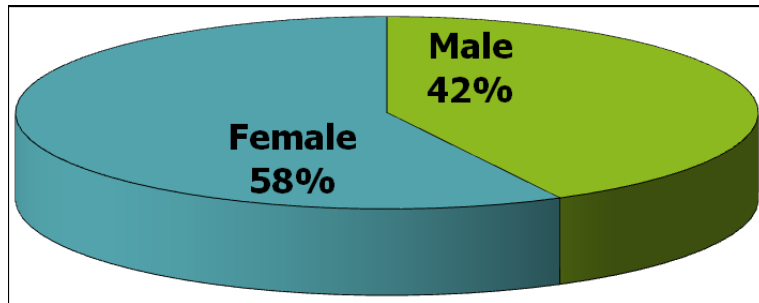
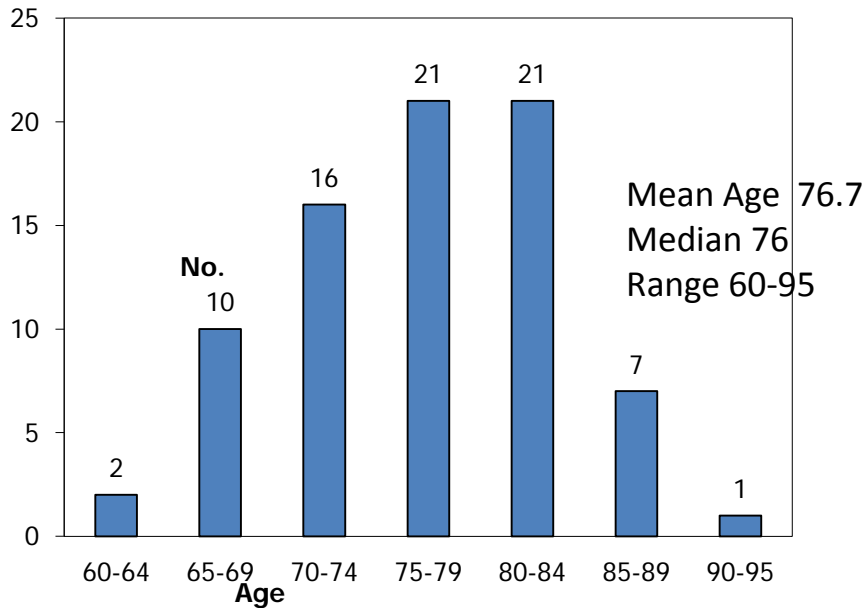


## Severity of Dementia



# Evaluation Results - RH Memory Clinic

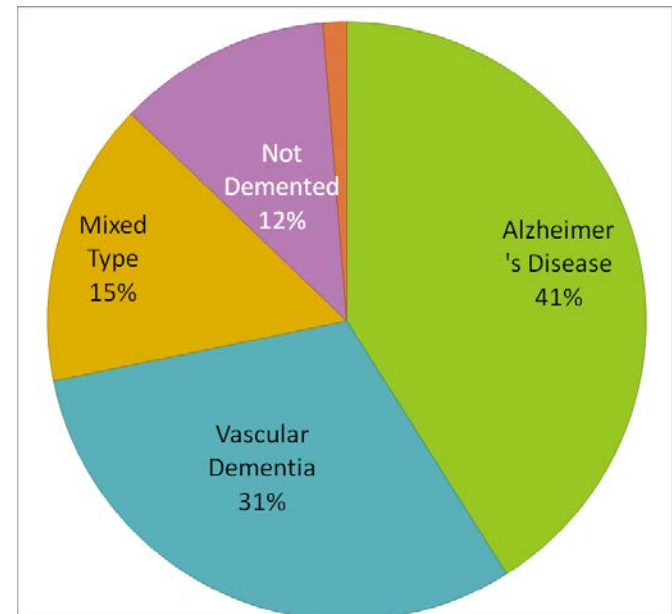
Median age 76 ; 58% Female



Diagnoses made in Memory Clinic

12% Not demented

AD (41%) > VaD (31%) > Mixed (15%)





# Present Service Model in RHTSK

- The Elder Friendly Ward RH C8
- The Memory Clinic
- **Post-diagnosis rehabilitation and support**
- Other supportive services

# **Post-diagnosis rehabilitation and support**

- The Dementia Day Care Centre(DDC) from 1997
- The Rehabilitation and empowerment for persons with dementia program (RED) since 2014

# **Dementia Day Care Center(DDC)**

- **Dedicated to patients with mild to moderate type of dementia**
- **Opened since 9/97**
- **Offered 2 afternoon sessions each week**
- **Each session will accommodate up to 10 patients to have different group activities**
- **The group will be conducted by Ms Gemma Wong and a nurse, and will be reassessed by a doctor once per month**
- **Other paramedical staff (PT, OT, MSW,etc) will be involved on referral basis**
- **multidisciplinary conference will be held as required**

# DDC

- Objectives

- 1. To offer day respite for carers of demented patients
- 2. To monitor the disease progress through the assessment by a multidisciplinary team of staff
- 3. To organise various social, intellectual and physical activities as means of therapy
- 4. To try to slow down the progression of disease and to optimise the quality of life
- 5. To develop health education program for carers
- 6. To provide a venue for training staff working with demented patients

# DDC

- **Contents of Activities**

- **1. Exercise group**
- **2. Current affairs group**
- **3. Floor games group**
- **4. Personal care group**
- **5. Quiz group**
- **6. Reality orientation group**
- **7. Reminiscence group**
- **8. Board games**

# Rehabilitation and Empowerment Program for Dementia Persons

Department of Geriatrics  
Occupational Therapy Department  
Physiotherapy Department  
Medical Social Work Department

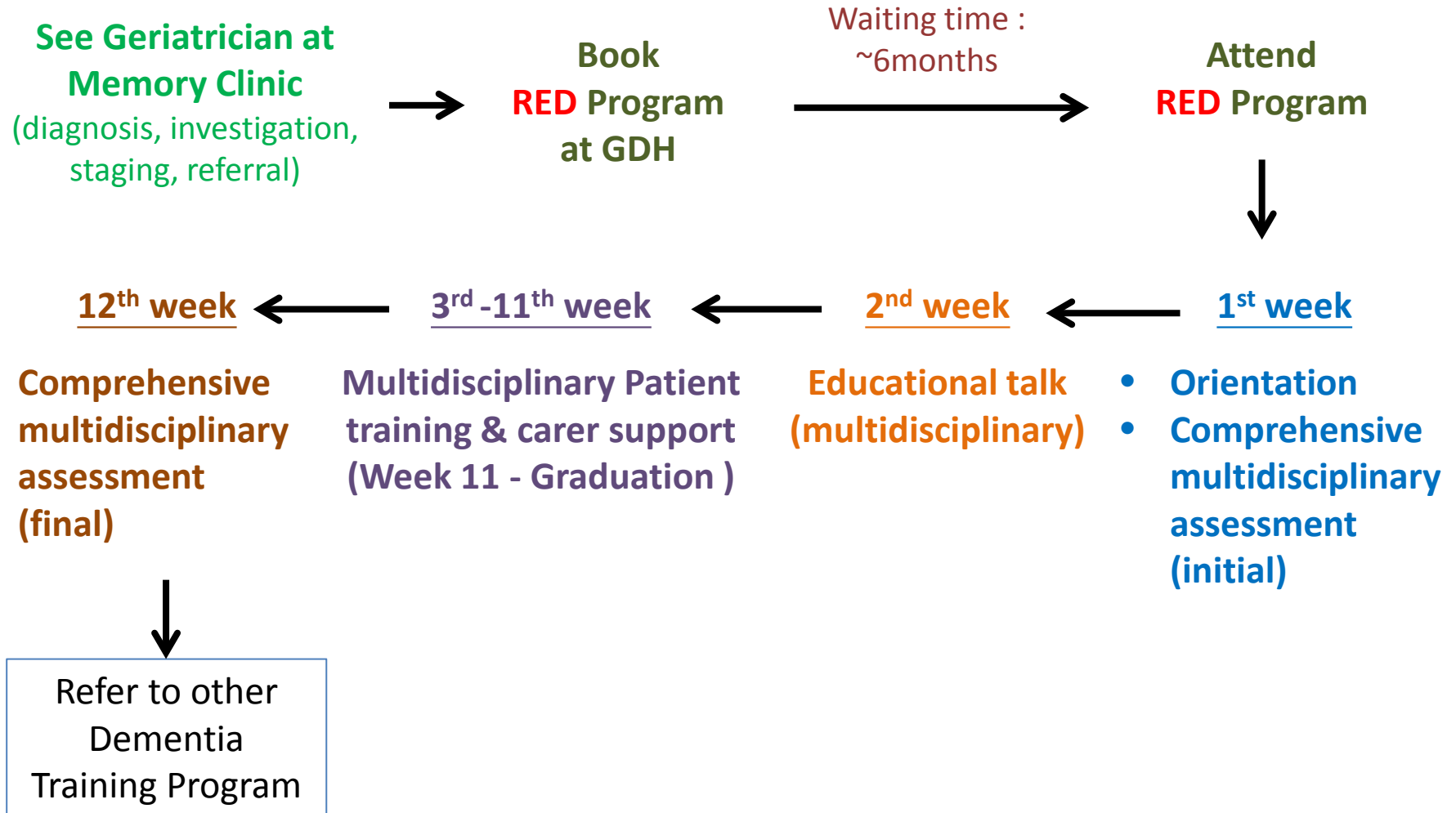
Ruttonjee and Tang Shiu Kin Hospitals



# RED Program

- Commenced April 2014
- Referral source: Memory Clinic
- Multidisciplinary interventions:
  - Geriatricians, Nurses, Occupational Therapists,  
Physiotherapists, Medical Social Workers
- Invite family / carers to participate
- 2 programs:
  - Program A: suspected early dementia, FAST stage 2 to 3
  - Program B: mild to moderate dementia, FAST stage 3 to 5
- 12 one-day sessions, one session per week
- Provide information of other dementia training programs for continue training after completion of RED program
- Partnership with NGOs

# RED Program – Patient journey



# Educational talk

(week 2: joint session for program A & B)

<i>Time</i>	<i>Duration</i>	<i>Responsible person</i>
10:30		Ms Joann Chong (RN) - Introduction
10:30 – 11:10	40 min	Dr H L Kong (SMO)
11:10 – 11:25	15 min	Mr Kevin Tao (PT)
11:25 – 11:35	10 min	<i>Break</i>
11:35 – 12:05	30 min	Ms Amy Wong (OT)
12:05 – 13:20	75 min	<i>Lunch</i>
13:20 – 13:45	25 min	Mr T S Chan(RN)
13:45 – 13:55	10 min	<i>Break</i>
13:55 – 14:30	35 min	Ms K Y Chan (MSW)
14:30 – 14:55	25 min	NGO representative x 2
14:55 - 15:00	5 min	Ms Joann Chong (RN) – Q&A, Course evaluation

# Educational talk



# Cognitive training





# Exercise training





# Counselling



# Attention training





# Art and Crafts



# Partnership with NGOs

## RH NGOs

- Refer / encourage patients to join Dementia Programs at NGOs after discharge
- Provide comprehensive case summary for discharged RED Program patients downloading to NGOs for continuation of training

## NGOs RH

- Arrangement of NGO patients to attend Memory Clinic of RH for diagnosis
- GDH Fast-track Clinic for seeking early medical / crisis intervention

### Participating NGOs:

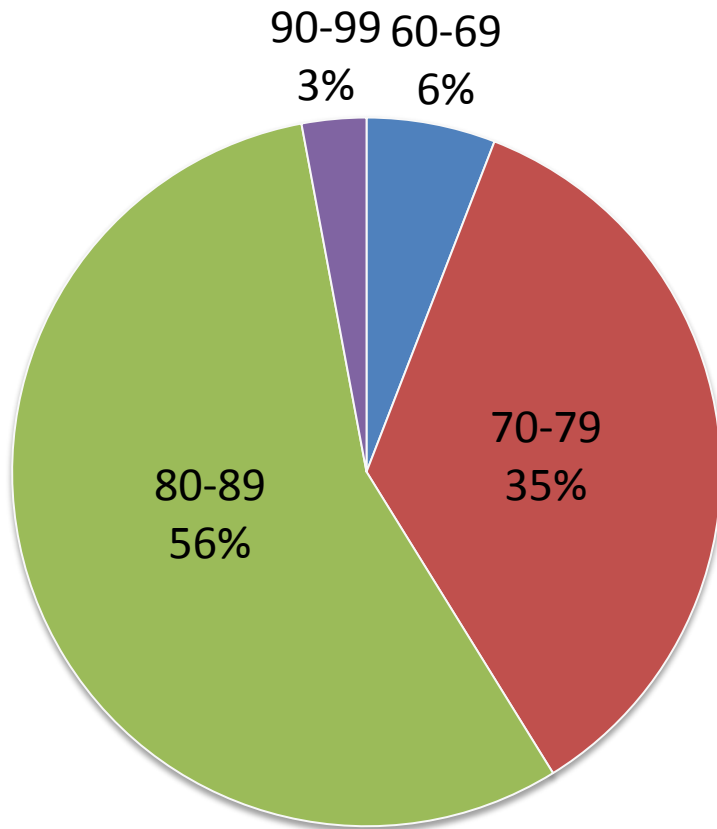
1. St. James' Settlement - Kin Chi Dementia Care Support Service Center
2. Methodist Agile Mind Center



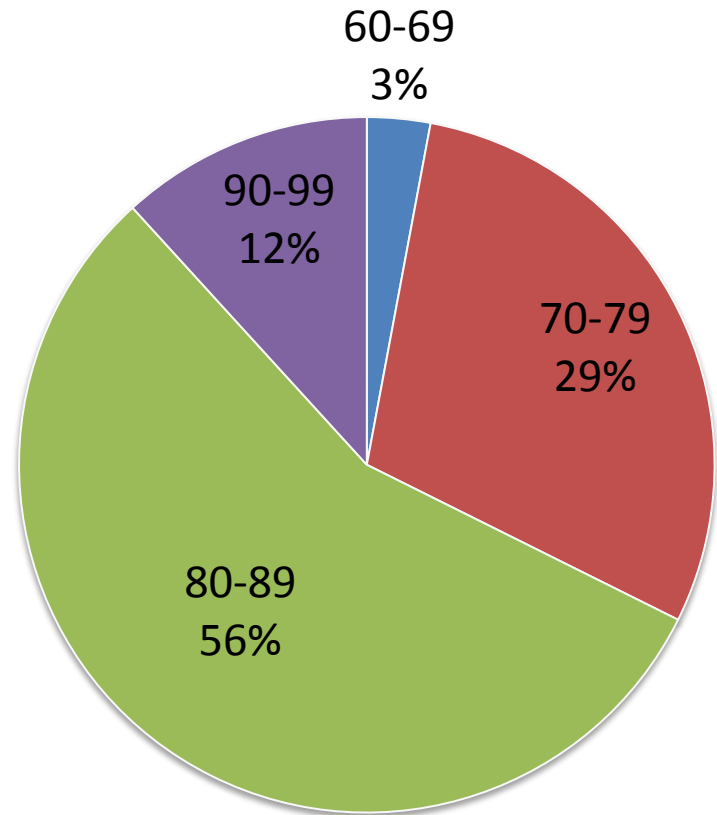
# Number of participants

Class	Duration	Program A	Program B
1	31/03/2014 - 04/07/2014	5	5
2	07/07/2014 - 26/09/2014	5	5
3	06/10/2014 - 31/12/2014	7	6
4	02/01/2015 - 15/04/2015	6	6
5	16/04/2015 - 21/07/2015	5	6
6	22/07/2015 - 27/10/2015	6	6
total		34	34

# Age

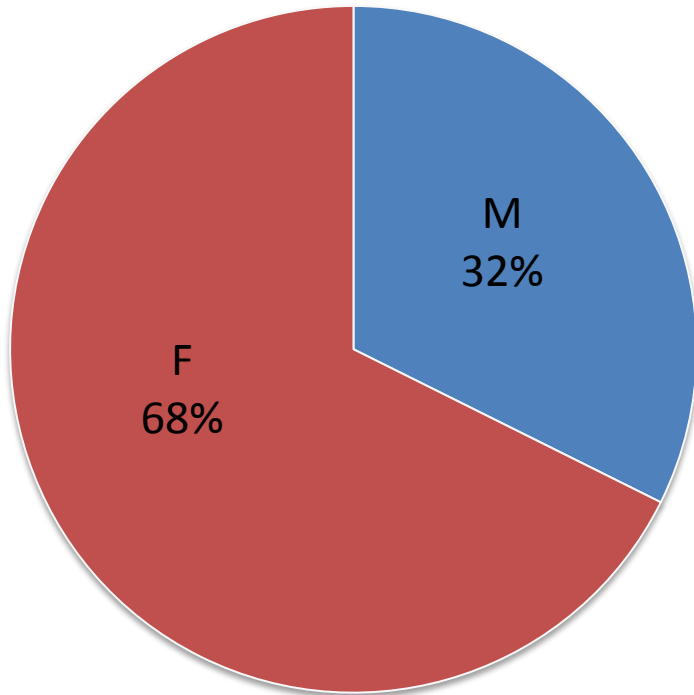


**Program A**  
**(class 1-6, n=34)**

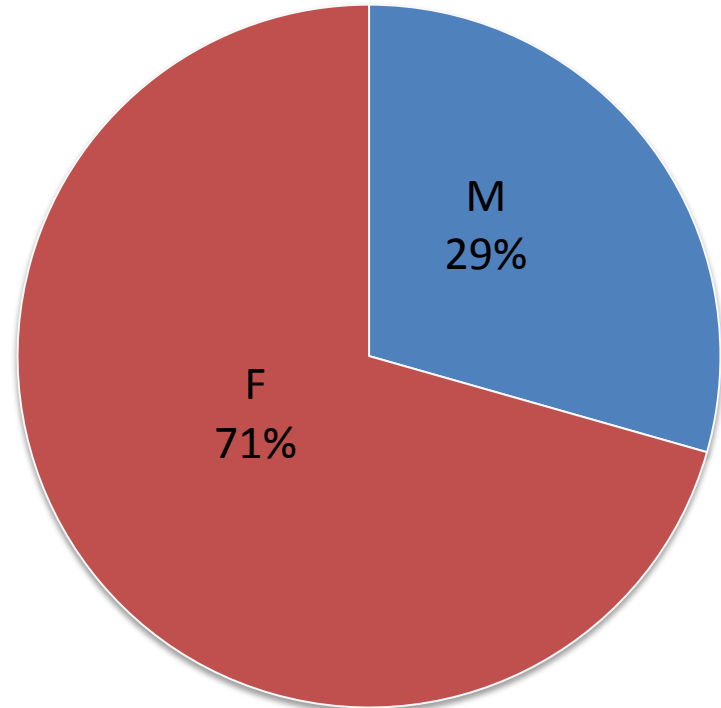


**Program B**  
**(class 1-6, n=34)**

# Sex

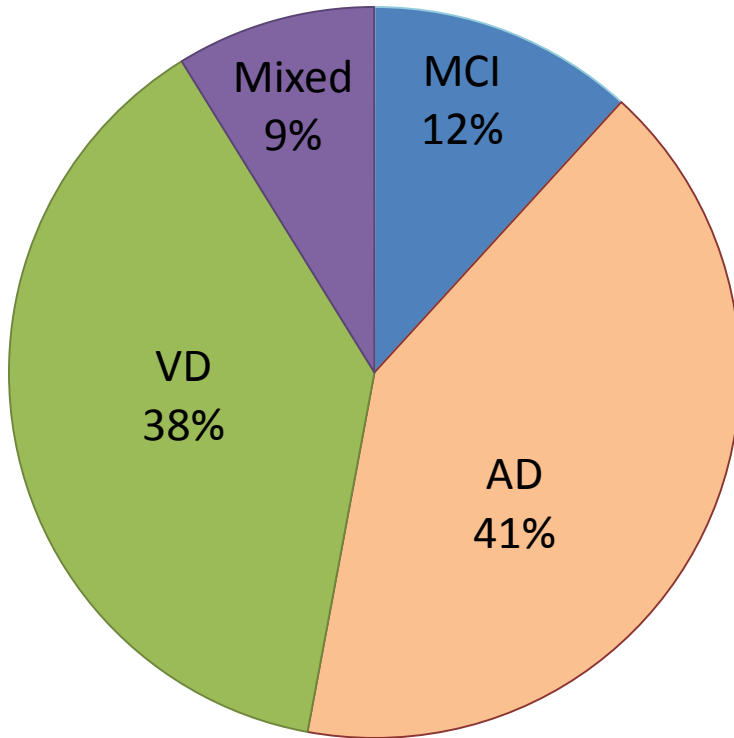


**Proram A**  
**(class 1-6, n=34)**

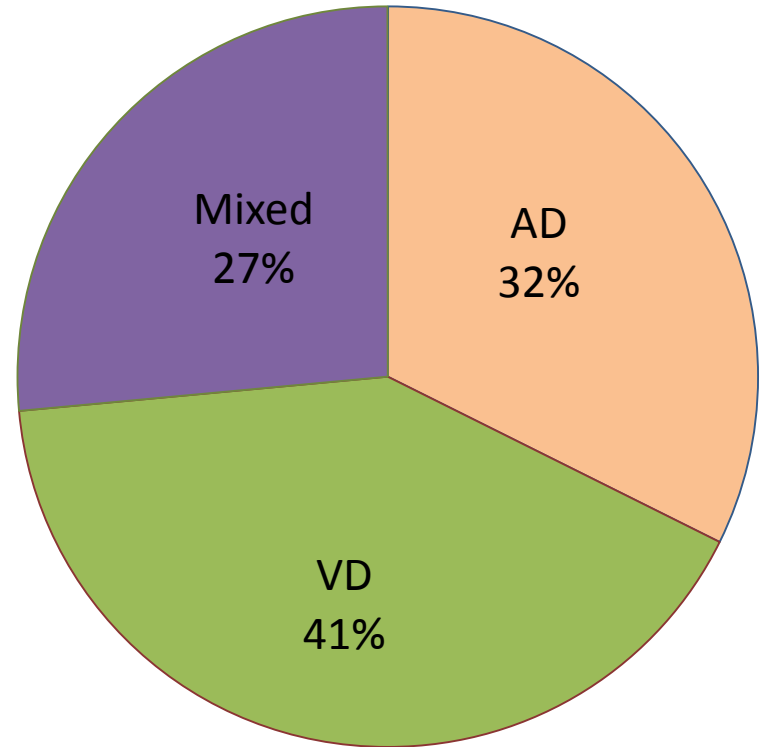


**Program B**  
**(class 1-6, n=34)**

# Type of Dementia



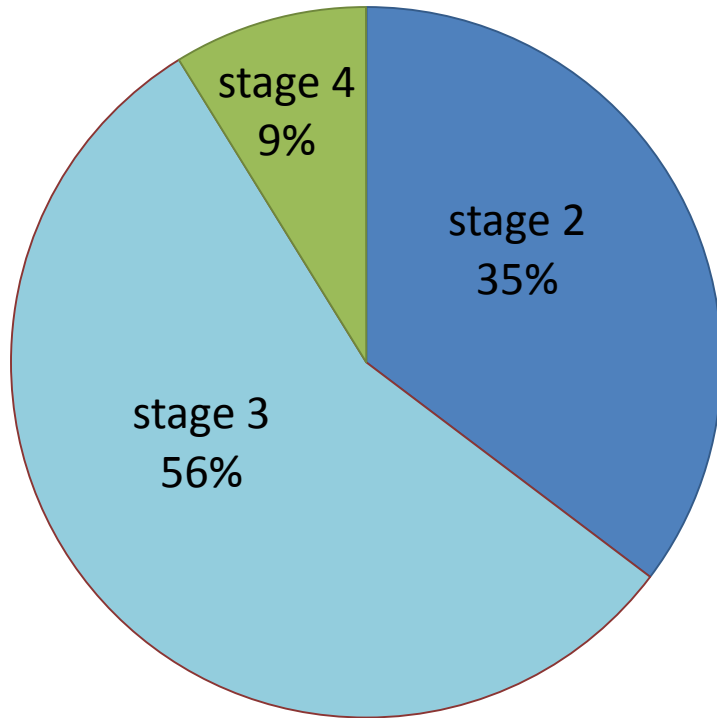
**Program A**  
**(class 1-6, n=34)**



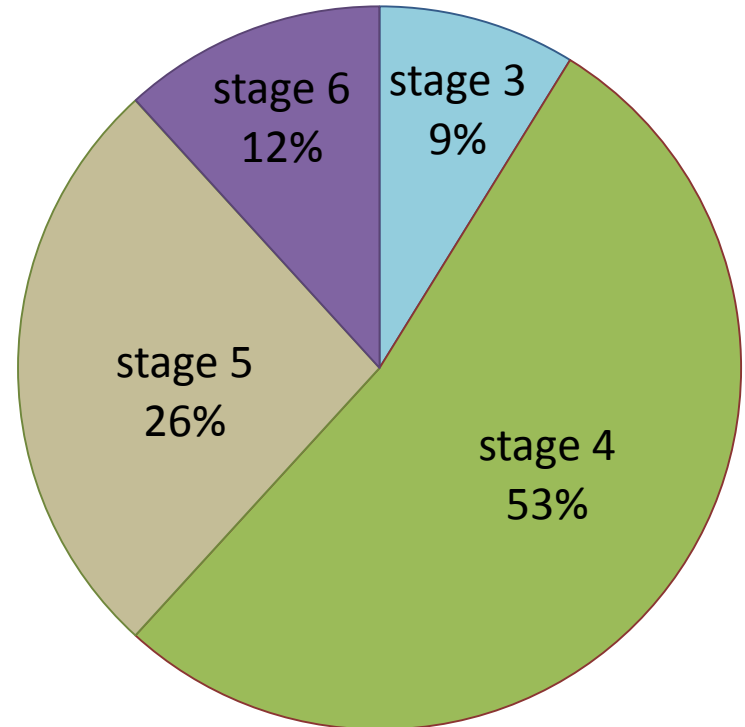
**Program B**  
**(class 1-6, n34)**



# FAST staging



**Program A**  
(class 1-6, n=34)



**Program B**  
(class 1-6, n=34)

# Summary of the RED Results

- Both patients and carers expressed that the multidisciplinary, multi-domain RED Program is beneficial to them.
- Upon completion of the Program, patients demonstrated improvement in cognition and physical wellbeing.
- The Program also helped in reducing carer strains significantly and the level of depression in patients of both groups
- The RED Program also served as a liaison model with the NGOs to bridge the gap between hospital and community dementia care services.

# Referral to other organizations after completion of **RED** Program

## Program A, class 1-6 (34 patients)

Organization	No. of patient
DCC(SJS/ Jean Wei)	6
DECC groups for dementia	4
WCHH (dementia program)	1
<b>Total</b>	<b>11</b>

## Program B, class 1-6 (34 patients)

Organization	No. of patient
DCC(SJS/ Jean Wei)	8
DECC groups for dementia	3
Church groups for dementia	1
PY GDH	1
EHCCS	1
<b>Total</b>	<b>14</b>

# Present Service Model in RHTSK

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- **Other supportive services**



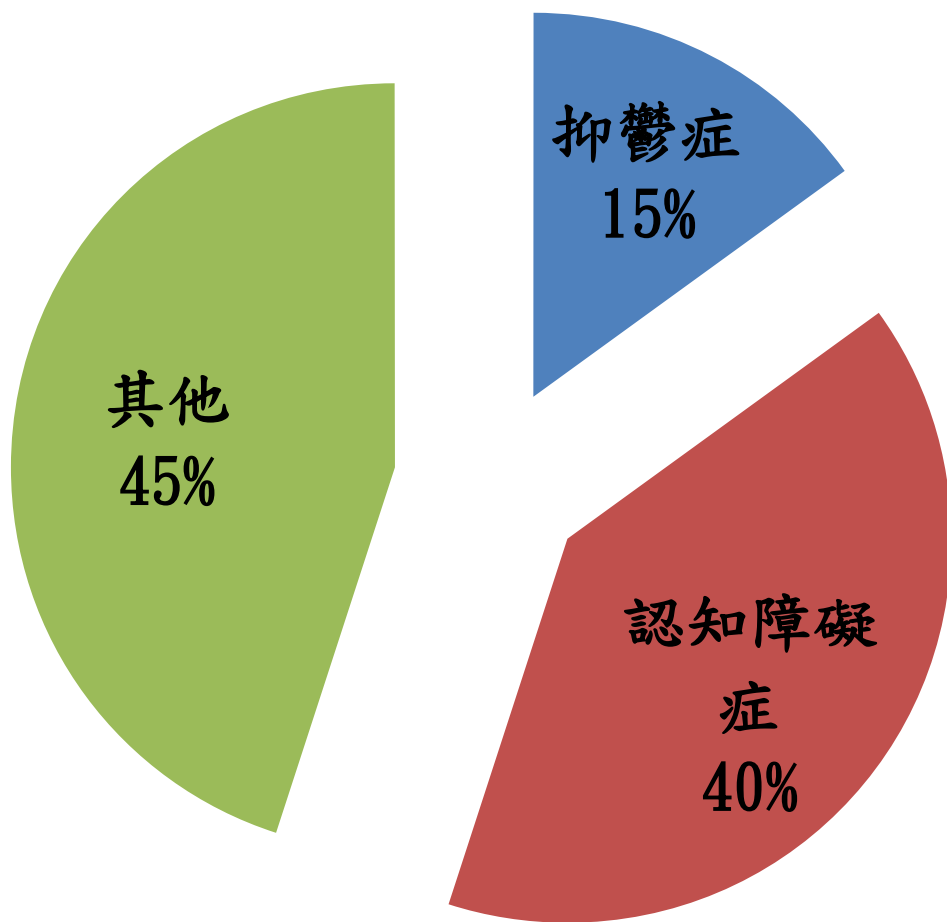
## **Other Supportive Services**

- Combined neuroradiology meeting with radiologist, nuclear imaging doctor, neurologist and geriatrician
- CGAT screening clinic at NGO started in 1999
- HKEC Dementia Community Networking

# CGAT screening clinic at NGO

- NGOs (eg Wanchai Methodist Centre for the Seniors, St James)
  - Started 1999
  - 442 cases cognitive cases screened till 2/2016
  - 2-3 cases per month
  - Nurse refers to geriatric clinic + case conference

# 拾趣園地患病率統計（由1999年至2013年5月）



# HKEC Dementia Community Networking

<b>Hong Kong East Cluster Referral to Rehabilitation Service in Community Dementia Service</b>				Name of Patient : _____ (Chinese) _____ (English) Sex : _____ Age : _____ Tel : _____ (Day) _____ (Night)		
<b>To : Name of Agency</b>	<b>Location</b>	<b>Tel #</b>	<b>Fax #</b>	<b>From : HKEC</b>		
<input type="checkbox"/> SAGE Dementia Service「無憂照顧·樂社區」	Chai Wan	2558 0187	2558 6266	<b>PYNEH</b> <input type="checkbox"/> GDH <input type="checkbox"/> SOPD <input type="checkbox"/> Frail elderly clinic <input type="checkbox"/> Psycho-geriatric <input type="checkbox"/> CNS <input type="checkbox"/> MSW <input type="checkbox"/> ICDS <input type="checkbox"/> Others _____		
<input type="checkbox"/> SJS Kin I Centre	Shau Kei Wan	3583 0967	3104 3672			
<input type="checkbox"/> YWCA Ming Yue DECC	Sai Wan Ho	2676 7067	2967 1626	<b>RHTSK</b> <input type="checkbox"/> Memory clinic <input type="checkbox"/> CGAT <input type="checkbox"/> MSW <input type="checkbox"/> HA Patient Support Call Centre <input type="checkbox"/> Dementia Care Nurse Clinic <input type="checkbox"/> ICDS <input type="checkbox"/> Others _____		
<input type="checkbox"/> TWGHs Standard Chartered HK 150 <sup>th</sup> Anniversary Community Foundation Alzheimer's Community Support Centre	North Point	2481 1566	2512 2138			
<input type="checkbox"/> HKSR Community Rehabilitation Network (CRN)	Quarry Bay	2549 7744	2549 5727			
<input type="checkbox"/> HKADA Jean Wei Centre	Wan Chai	3553 3650	3553 3653	<b>TWEH</b> <input type="checkbox"/> MSW <input type="checkbox"/> Others _____		
<b>Diagnosis (Please indicate):</b> _____ Signature : _____ Chop : _____ Tel : _____ Date : _____						
<input type="checkbox"/> 病人或其家屬同意 將個人資料(姓名、年齡、性別及電話)由本院轉介至上述指定非政府機構作跟進，參加活動與否最終由病人或其家屬決定。 簽名：_____						
<input type="checkbox"/> 病人或其家屬已口頭上答應						
<b>Service category</b>	<b>Name of Agency</b>					
	<b>Subvented</b>			<b>Non-subvented</b>		
	<b>SAGE</b>	<b>YWCA</b>	<b>CRN</b>	<b>SJS</b>	<b>TWGHs</b>	<b>HKADA</b>
1. Day Training	✓	✓		✓	✓	✓
2. In-home Training	✓	✓		✓	✓	✓
3. Carer Support / Group	✓	✓	✓	✓	✓	✓
NGOs Dementia Services in HKEC: <a href="http://www.healthyhkec.org/resources/elderly/others/">http://www.healthyhkec.org/resources/elderly/others/</a> 轉介及索取資料 — 請攜此「轉介表」於辦公時間到下列地點，並索取有關機構之服務資料。 1. 東區尤德夫人那打素醫院 - 專科門診地庫一樓「病人支援站」(近抽血站旁) (電話：2595 6342) 2. 東華東院 - 病人資源中心 (電話：2162 6035) 3. 律敦治醫院 - 地下專科門診家有一老一站通 (電話：2291 2511)						
<b>For Reply Use (Please fax this form to Patient Resource Centre after completion of referral for record purpose)</b> To : <input type="checkbox"/> PYNEH PRC (Fax: 2595 6085) <input type="checkbox"/> TWEH PRC (Fax: 2162 6039) <input type="checkbox"/> RHTSK HRC (Fax: 2291 1047) From : <input type="checkbox"/> SAGE <input type="checkbox"/> SJS <input type="checkbox"/> YWCA <input type="checkbox"/> TWGHs <input type="checkbox"/> CRN <input type="checkbox"/> HKADA <input type="checkbox"/> Referral Accepted (date) _____ <input type="checkbox"/> Referral Rejected, reason(s) _____ Name of NGO Staff _____ Post _____ Date _____						



港島東醫院聯網 ~ 社區復康服務  
 認知障礙症（前稱老人痴呆症／腦退化症）  
 轉介機構重點服務簡介 (2013 年 1-3 月)

	機構名稱/地址/電話	活動名稱	日期/時間	費用	備註
津助服務機構	香港耆康老人福利會「無憂照顧·樂社區」(SAGE) 地址：柴灣漁灣村漁豐樓地下11至18號 電話：2558 0187	老年痴呆症照顧者講座 主題：紓解患者行為情緒徵狀的方法及溝通技巧	17/1/2013 下午 2:30 至下午 4:30 地點：柴灣漁灣村漁豐樓地下 11 至 18 號	全免	登記或查詢，請致電 2558 0187
	地址：北角和富道 53 號和富中心第 2 期商場地下 電話：2563 0187	「無憂照顧·樂社區」照顧者家居指導服務 (需先登記成為長者地區中心會員)	全年接受申請	全免	登記或查詢，請致電 3428 3035 與「無憂照顧·樂社區」職員聯絡。
		「樂回家」長者走失支援服務 ● 協助尋人專線 ● 愛「飾」長者系列平安飾物訂購	全年接受申請	尋人專線：費用全免  愛『飾』長系列：因應不同款式收費，詳見申請單張	
	香港復康會社區復康網絡 (CRN) 地址：香港鰂魚涌康山花園 6 座地下 電話：2549 7744	認知障礙症家居照顧技巧課程	22/2 - 29/3/2013 逢星期五(共六堂) 晚上 7:00 至晚上 9:30	會員：\$60 非會員：\$90 綜援免費	
		認知障礙症家屬雙月會	23/2/2013 星期六 上午 10:30 至中午 12:30	免費	茶點費由參加者均分
		SMART Care 齊起動照顧者支援計劃	全年	免費	實質支援服務需要收取少量行政費用。
	香港基督教女青年會明儒松柏社區服務中心 (YWCA) 地址：香港西灣河鯉景道 56 號康東邨康瑞樓地下 電話：2676 7067  備註：本中心「愛不放手」老年痴呆症服務計劃由 Love Ideas ♡ HK 集思公益計劃資助項目 香港仁愛香港 贊助	「愛不放手」老年痴呆症計劃之 智腦友月會 1301	2013 年 1 月 29 日(二) 上午 11:00 至下午 2:00	\$20/人  對象：患者及照顧者	長者部份透過活動鼓勵社交互費用包午膳 1. 長者及護老者同價
		「愛不放手」老年痴呆症計劃之 藝術治療小組	2013 年 1 月 14, 21, 28, 2 月 4, 18, 25 日 (逢星期一，共六節) 上午 9:30 至 11:00	免費  對象：患者為主	1. 透過 6 節的活動，讓痴呆症患者運用想像空間及發揮創意，同時加強社交活動 2. 如家屬希望陪同出席，請於留名時告知
		「愛不放手」老年痴呆症計劃之 照顧者工作坊	2013 年 2 月 2, 9, 16, 23 日 (逢星期六，共四節) 上午 10:00 至 11:30	免費  對象：照顧者為主	1. 以不同專業角度講解照顧知識，加強護老者支援。包括物理治療師、社工及護士等 2. 如患者必須同行，請於留名時告知



	機構名稱/地址/電話	活動名稱	日期/時間	費用	備註
自負盈虧服務機構	<b>聖雅各福群會健頤中心 (SJS)</b> 地址：筲箕灣興民街 68 號海天廣場一樓 105 室 電話：3583 0967  <b>聖雅各福群會健智支援服務中心 (SJS)</b> 地址：西環德輔道西 466 號 3 樓 電話：2816 9009	認知障礙症護老者照顧工作坊——中後期照顧  對象：照顧認知障礙症長者的家屬	5/1/13、12/1/13、19/1/13、26/1/13 (逢星期六) 下午 2:30 至下午 4:30 地點：筲箕灣健頤中心	全期 4 堂： 會員 \$200 非會員 \$320 (可先登記做免費會員)	內容：飲食安排、家居環境改善、家居活動安排、照顧技巧、便秘及缺水處理、皮膚護理、情緒及行為處理、長期照顧計劃 *設暫託服務 查詢/報名： 3583 0670 麥姑娘
		「腦」伴同行計劃  對象：認知障礙症長者的家屬照顧者	即日起至 2013 年 3 月  (輔導計劃為期半年)	全免	為照顧者提供輔導服務，從而減輕照顧壓力 查詢/報名： 2831 3224 黃姑娘
		《樂聚天地》認知障礙症家屬支持小組  對象：照顧認知障礙症長者的家屬	5/1/13、2/2/13、2/3/13 (每月首個星期六) 下午 2:30 至下午 4:30 地點：灣仔石水渠街 85 號總會一樓 102 室	全免	查詢/報名： 2831 3224 黃姑娘 *設暫託服務，歡迎與長者一同出席！
			2/3/13 上午 10:30 至中午 12:00 地點：筲箕灣健頤中心	全免	經驗分享、學習照顧技巧 查詢/報名： 3583 0670 麥姑娘
	<b>東華三院渣打香港 150 週年慈善基金長者智晴坊 (TWGHs)</b> 地址：北角道 16 號蘇浙大廈地下 電話：2481 1566	「照顧者健康系列」之關節舒緩有辦法	17/1/2013, 24/1/2013 (星期三) 晚上 7:00 至晚上 8:30	\$20	由中醫師講解膝關節病症成因及注意事宜，介紹穴位按摩及食療。
		「認知障礙症照顧技巧工作坊」—初階	7/1/2013, 14/1/2013, 21/1/2013 (星期一) 晚上 7:00 至晚上 8:45	會員 \$200/3 堂 \$80/堂  非會員 \$300/3 堂 \$120/堂	一連三節工作坊探討認知障礙症行為，提升照顧技巧。
	<b>香港認知障礙症協會 芹慧中心 (HKADA)</b> 地址：灣仔皇后大道東 282 號鄧肇堅醫院一樓 電話：3553 3650	星期六親子興趣班：香薰按摩班	5,12,19,26/1/2013 ; 2,9,23/2/2013 ; 2,9,16,23/3/2013 ; 6/4/2013 (12 堂) 上午 10:30 至中午 12:00	長者 \$2000/12 堂  照顧者 \$1000/12 堂	對象：輕度認知障礙／初期認知障礙症患者 鼓勵照顧者陪同長者一起練習香薰按摩，增強親子接觸及了解，另可抒緩情緒，護理皮膚等 (自備毛巾)
		星期六親子興趣班：園藝班	5,12,19,26/1/2013 2,9/2/2013 (6 堂) 下午 2:00 至下午 3:30	長者 \$1000 / 6 堂  照顧者 \$500 / 6 堂	對象：輕度認知障礙／初期認知障礙症患者 鼓勵照顧者陪同長者一起製作園藝手作，發揮創意，增進親子感情
		*上環通善中心上課 六藝興趣訓練班 星期一：記憶訓練班 星期二：園藝班 星期三：香薰按摩班 星期四：絲花製作班 星期五：活力太極班	1 月至 4 月期間 逢一至五 (每班共 12 堂) 上午 11:00 至下午 1:00	長者 \$2160/12 堂  照顧者 \$1080/12 堂	對象：輕度認知障礙／初期認知障礙症患者 透過六藝興趣訓練班及現實導向訓練，增加長者運用大腦的機會，讓長者從興趣中發揮大腦潛能

\*\*\* 歡迎直接向各機構查詢及申請 \*\*\*

(活動詳情以機構的最後公報作實)

Strong **Hospital** Based Support to  
Keep Dementia Patient Cared at  
**Home** as long as possible!

Thank You !