

CUHK Jockey Club Institute of Ageing Launch Conference

CREATING **AGE-FRIENDLY**

共建長者友善社區 COMMUNITIES

8 OCTOBER 2015 (THURSDAY)

Shaw Auditorium
Postgraduate Education Centre
Prince of Wales Hospital



Organisers:

Funded by:



香港中文大學
The Chinese University of Hong Kong



香港中文大學
賽馬會老年學研究所
CUHK Jockey Club Institute of Ageing



香港賽馬會慈善信託基金
The Hong Kong Jockey Club Charities Trust

WELCOME MESSAGE

I have great pleasure in welcoming you all to the launch conference of the CUHK Jockey Club Institute of Ageing.

The world is facing an ageing population, and Hong Kong is no exception. Its impacts are multi-faceted, requiring early planning and innovative intervention in various domains of societies – housing, transport, financial management, healthcare facilities, employment and retirement arrangement – which means creating age-friendly communities in short.

At a global level, the World Health Organization has been advocating the call for age-friendly cities for over a decade. Efforts and results achieved in other cities provide useful examples for reflection and learning. For Hong Kong, we need larger scale and more sustained efforts with active participation from our elders identified and mobilized through various social networks in a community. The bottom-up participatory approach will ensure that the views of our elders can be heard and incorporated in planning an age-friendly community.

Frailty and long term care are significant topics faced by many countries around the world. While there are complex issues to be addressed in each society, there are ample opportunities for joint learning in many key areas. Through innovative concepts and models, we could disseminate timely messages and develop effective programmes to help maintain our elders active and provide better care for those in need.

We are fortunate to have prominent speakers here to share with us their insights in different aspects of creating an age-friendly community. I hope you find inspiration from their talks and establish useful networks with participants, and most important of all, contribute to building Hong Kong as an Age-Friendly City.



Prof. Jean Woo,
Director, CUHK Jockey Club Institute of Ageing
The Chinese University of Hong Kong
CADENZA Project Director

PROGRAMME

0900 – 0930	Registration
	Opening Ceremony
0930 – 0935	Welcoming Remarks by Prof Joseph Sung SBS JP, Vice-Chancellor and President, The Chinese University of Hong Kong
0935 – 0945	Opening Address by Mr Anthony W K Chow SBS JP, Deputy Chairman, The Hong Kong Jockey Club
0945 – 0955	Officiating Address by Mr Matthew Cheung, GBS, JP, Secretary for Labour and Welfare
0955 – 1000	Group photo
1000 – 1005	Exercise
1005 – 1030	Tea Break
1030 – 1050	A Philanthropist's Understanding of the Ageing Challenge in Hong Kong <ul style="list-style-type: none"> • Mr Leong Cheung, Executive Director, Charities and Community, The Hong Kong Jockey Club
1050 – 1150	Modern Ageing and Joint Learning <ul style="list-style-type: none"> • Dr William Haseltine, Chairman and President, Access Health International • Dr Chang Liu, Managing Director, Access Health International • Dr Wong Sweet Fun, Chief Transformation Officer, Alexandra Health System
1150 – 1250	Redesigning Communities for Aged Society <ul style="list-style-type: none"> • "Experience in Japan" by Prof Hiroko Akiyama, Institute of Gerontology, The University of Tokyo, Japan • "Importance of Space Audit" by Prof Ng Mee Kam, Department of Geography and Resource Management, The Chinese University of Hong Kong

1250 – 1415	Lunch
1415 – 1530	Session 1: Hong Kong Jockey Club Age-Friendly City Movement <ul style="list-style-type: none"> • Prof Jean Woo, Director, CUHK Jockey Club Institute of Ageing • Mrs Teresa Tsien, Director, Institute of Active Ageing, The Hong Kong Polytechnic University • Dr Carol Ma, Research Fellow, Asia-Pacific Institute of Ageing Studies; Associate Director, Office of Service-Learning, Lingnan University • Dr Vivian Lou, Director, Sau Po Centre on Ageing, The University of Hong Kong
1530 – 1550	Tea Break
1550 – 1620	Session 2: Frailty and Geriatric Syndromes <ul style="list-style-type: none"> • "Community Frailty Screening" by Dr Ruby Yu, Research Assistant Professor, Research Fellow of CUHK Jockey Club Institute of Ageing • "Comparison of Frailty in Beijing and Hong Kong" by Prof Piu Chan, Beijing Institute of Geriatrics, Beijing, China
1620 – 1650	Symposium: Age-friendly Hospital and Service <ul style="list-style-type: none"> • "Age-friendly hospital" by Prof Timothy Kwok, Deputy Director, CUHK Jockey Club Institute of Ageing • "Dementia friendly ward" by Dr Maria Chui, General Manager (Nursing Service), Shatin Hospital & Bradbury Hospice, Hospital Authority
1650 – 1700	Concluding Remarks <ul style="list-style-type: none"> • Prof Jean Woo, Director, CUHK Jockey Club Institute of Ageing

A PHILANTHROPIST'S UNDERSTANDING OF THE AGEING CHALLENGE IN HONG KONG

SPEAKER BIOGRAPHY AND ABSTRACT



Mr Leong Cheung
*Executive Director, Charities and Community,
The Hong Kong Jockey Club*

BIOGRAPHY

Mr Leong Cheung joined The Hong Kong Jockey Club as the Executive Director, Charities and Community in 2014.

Mr Cheung has an MBA from Harvard Business School and a Bachelor of Business Administration from the Chinese University of Hong Kong (CUHK). He joined Bain Capital in 2008 and was their Operating Partner. Prior to that, he was Managing Director of Global Sourcing & Supply Chain at Esquel Group, the founder and CEO of

an education related Internet venture, CampusAll, in Mainland China, and a senior consultant at the Boston Consulting Group.

Mr Cheung started working on charities and community-related work while at Esquel. He helped the firm set up an education foundation in Xinjiang in 2002, building schools and libraries in the rural areas. He is currently Chairman and CEO of RunOurCity, an innovative social enterprise he co-founded with the aim of transforming life through running. He has been an honorary advisor and director of Social Ventures Hong Kong, a pioneer venture philanthropic fund, since its inception in 2007. Mr Cheung also serves as the Honorary Court Member of Lingnan University, and the Quality Migrant Admission Scheme as a member. He is an adjunct professor at both Hong Kong Polytechnic University and CUHK.

ABSTRACT

A PHILANTHROPIST'S UNDERSTANDING OF THE AGEING CHALLENGE IN HONG KONG

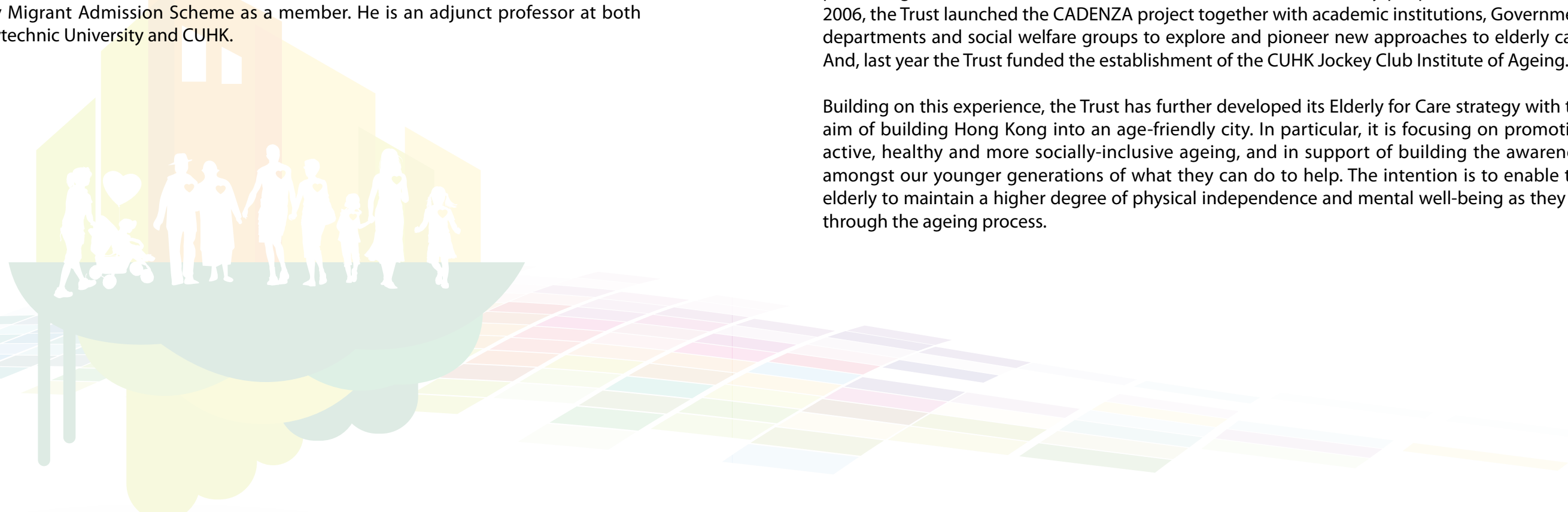
Hong Kong faces a daunting challenge with a rapidly ageing population reaching over 30 per cent in less than 30 years. Even if we were only to maintain the current caring level, our society will run into huge cost gap in providing adequate services. It is clear that Hong Kong needs innovative solutions to address its ageing challenge. At the same time, the next generation of elderly will be healthier and better educated. Given the right platform, they can continue to be active contributors to society well into their golden age.

Founded in 1884, The Hong Kong Jockey Club is a world-class horse racing operator and Hong Kong's largest community benefactor, allocating its surplus funds for charitable and community projects through its Charities Trust. In 2014/15, these donations reached a record HK\$3.87 billion, benefiting millions of citizens. The Trust has adopted a proactive approach to addressing the longer-term needs of the community in recent years. In addition to its traditional coverage, it has identified three strategic themes in the next 3-5 years:

1. Youth for Innovation
2. Elderly for Care
3. Sports for Hope

The Trust has been a long-standing supporter of projects that address the needs of the elderly. For example, this year is the 15th Anniversary of the Jockey Club Centre for Positive Ageing, a pioneering initiative established to meet the diverse needs of elderly people with dementia. In 2006, the Trust launched the CADENZA project together with academic institutions, Government departments and social welfare groups to explore and pioneer new approaches to elderly care. And, last year the Trust funded the establishment of the CUHK Jockey Club Institute of Ageing.

Building on this experience, the Trust has further developed its Elderly for Care strategy with the aim of building Hong Kong into an age-friendly city. In particular, it is focusing on promoting active, healthy and more socially-inclusive ageing, and in support of building the awareness amongst our younger generations of what they can do to help. The intention is to enable the elderly to maintain a higher degree of physical independence and mental well-being as they go through the ageing process.



MODERN AGEING AND JOINT LEARNING

ABSTRACT

The United Nations projects that forty percent of the Hong Kong population and thirty five percent of the Singaporean population will be over the age of sixty five within the next thirty years, dramatically increasing the need for long term care. ACCESS Health International hopes to play a significant role in addressing healthcare reforms in Singapore and the region. ACCESS Health International is a not for profit think tank and advisory group dedicated the vision that people everywhere, no matter where they live, have the right to high quality, affordable healthcare. The foundation has activities in Singapore, Hong Kong, Mainland China, India, the Philippines, Sweden, Morocco, and the United States.

In this session, the president of ACCESS Health International Dr. William Haseltine will first give an overview of the vision and mission of ACCESS Health International, its focused areas, and global activities relevant to Aging. Dr. Haseltine will describe the foundation's role as a think tank and advisory group in supporting public sector and engaging private sector to improve people's access to high quality, affordable health and elder care, and to achieve bigger impact.

The second speaker, Chief Transformation Officer Dr. Wong Sweet Fun, will present the findings and health and aging strategy of Alexandra Health System (AHS), a public healthcare cluster serving some 700,000 residents living in the northern region of Singapore. AHS's population health strategy has been formed building on earlier efforts in health promotion and public education for disease prevention, early detection and intervention. Today, AHS works in tandem with non-health ministries and agencies to enhance safety and well-being, creating age- and dementia-friendly communities and environments. Khoo Teck Puat Hospital, as a health-promoting hospital, exhorts its staff to be visible role models in encouraging and motivating healthy habits. It offers its experiences as a "living laboratory" for healthy living and active ageing, with much thought invested in designing a conducive physical and work environment, which is open and accessible to the public. Dr. Wong will also highlight a joint population health program between her team and ACCESS Health International.

Lastly, Director of ACCESS Health International, Dr. Liu Chang will describe several programs that highlight our current and future aging related work in Singapore, Hong Kong, Mainland China and the region. These include Modern Ageing, an ACCESS Health program designed to inspire and empower entrepreneurs to create businesses to serve the needs of the elderly; Stay Young Navigators, a community empowerment social support program by training independent elders to act as "navigators." Also, ACCESS Health brings together experts and organizations that are facing similar challenges to share their experience in a structured process known as joint learning. ACCESS Health will also work in other aging population related areas, such as caregiver training and education, community engagement, quality measures, monitoring and information systems, and housing and urban planning.

SPEAKER'S BIOGRAPHIES



Dr William Haseltine
Chairman and President, Access Health International

William A. Haseltine PhD has an active career in Science, Business and Philanthropy. He was a professor at Harvard Medical School and Harvard School of Public Health from 1976-1993. He is well known for his pioneering work on cancer, HIV/AIDS and genomics. He has authored more than 200 manuscripts in peer-reviewed journals and the author of several books. He is the Founder of Human Genome Sciences, Inc. and served as the Chairman and CEO of the Company. He is also the Founder of several other successful biotechnology companies.

William Haseltine is currently Chairman and President of ACCESS Health International, a foundation active in the United States, India, Mainland China, Singapore, Sweden and the Philippines. He is also Chairman of Haseltine Foundation for Science and the Arts. He serves as an advisor and board member of several innovative healthcare companies.

Dr Haseltine is a member of the Advisory Board of several Universities and research institutes, a member of the advisory council of the Council of Scientific and Industrial Research of India, and a Lifetime Governor of the New York Academy of Sciences. He is Trustee of the Brookings Institution, the advisory council on Creativity and Innovation of the NYU-Shanghai University, a member of the Council on Foreign Relations, a director of the International China Ageing Industry Association and the US-China Health Summit.

He is a member of the Advisory Board of the Metropolitan Opera, a Patron of the Metropolitan Museum, the Guggenheim Museum and the Museum of Modern Art, a member of the Patron's Circle of the Asia Society, a Member of Board of Directors of the Young Concert Artists, the Youth Orchestra of the Americas and the China Arts Foundation.

SPEAKER'S BIOGRAPHIES



Dr Chang Liu
Managing Director, Access Health International

Chang Liu is the managing director for ACCESS Health International, a nonprofit healthcare think tank and foundation. He is also an assistant professor in Health Services and Systems Research at Duke-NUS Graduate Medical School and the Center for Ageing and Education at Duke-NUS. At ACCESS Health International, he is involved in designing and supervising ACCESS Health aging related dissemination and innovation projects in Southeast Asia and Greater China. At Duke, Chang's work focuses on health insurance policy and long term care policy. His current research examines the impact of insurance policies on the behavior of patients and providers and the economic implications using econometric study designs. He also participates in several projects on aging in Singapore, including large scale national surveys and intervention programs. Before joining Duke-NUS, he worked at the Center for Gerontology and Healthcare Research at Brown University, where he studied long term care and elder care policies in both the United States and China. He earned his PhD in Health Services Research (2013) from Brown University with a specialization in health economics. He was awarded the eXebs Friedrich J. Schoening International Scholarship and was named an eXebs Fellow during his exchange study at the European Business School, Germany. He also received a Master's degree in Finance (2009) from the Guanghua School of Management of Peking University, China.



Dr Wong Sweet Fun
*Chief Transformation Officer
Alexandra Health System*

Dr Wong Sweet Fun, Senior Consultant in Geriatric Medicine at Khoo Teck Puat Hospital, is concurrently Chief Transformation Officer of the Alexandra Health System (AHS) and Deputy Chairman, Medical Board of Yishun Community Hospital.

Dr Wong plays an important strategic role in the leadership team to better serve patient healthcare needs, and to facilitate the provision of hassle-free services for patients and their families. She oversees the Alexandra Health Transformation Office, Contact Centre, Innovation and RHS Programme Office. Her roles include driving communication and integration strategies, resource management, and stakeholder engagement for greater customer service.

Dr Wong has been actively involved for the past 20 years in the promotion of health, fitness and ageing-in-place in community-dwelling older adults. She has contributed towards the development of Preventive Geriatrics, served in inter-ministry committees, and worked collaboratively with agencies such as the Health Promotion Board, Centre for Enabled Living, Council for Third Age, and People's Association Wellness Programme.

REDESIGNING COMMUNITIES FOR AGED SOCIETY

SPEAKER BIOGRAPHY AND ABSTRACT



Professor Hiroko Akiyama
*Professor, Institute of Gerontology
The University of Tokyo, Japan*

BIOGRAPHY

Hiroko Akiyama, a social psychologist, is professor at the Institute of Gerontology, University of Tokyo and the former vice president of Science Council of Japan. Professor Akiyama has conducted a number of cross-national surveys and is widely recognized as an expert on issues of global aging. She is known for the long-running research on the elderly in Japan—tracking the aging patterns of approximately 6,000 Japanese elderly for 25 years. Recently she initiated social experiment projects that pioneer

to re-design communities to meet the needs of the highly aged society and allow the elderly to successfully 'age-in-place'. She started the Institute of Gerontology at University of Tokyo in 2006. Professor Akiyama received Ph.D. in psychology from University of Illinois, the United States.

ABSTRACT

REDESIGNING COMMUNITIES FOR AGED SOCIETY

Older-old population is rapidly increasing in Japan. By next 20 years, people age 75+ will double in number and account for 20% of the total population. More specifically, population aging is drastic in urban areas. A large number of young people seeking good jobs moved from rural areas to metropolitan areas during the period of rapid economic growth in the 1960s and 70s. They are now reaching retirement age. Population aging is becoming an urban issue in Japan. In year 2030, it is also predicted that 10% of people age 65+ will be demented and 45% will be living alone. Many people in 80s and 90s will be living alone. The existing infrastructure of communities was built when the population was much younger. We need to redesign both hard and soft infrastructure of communities to meet the needs of the highly aged society. Such effort will require research, design and actions—and collaboration of multi-stakeholders such as a range of academic disciplines, governments, industries and citizens.

One example is a project organized by Institute of Gerontology, the University of Tokyo aimed at turning the concept of "ageing-in-place" into reality in Kashiwa, a city 30km away from Tokyo. The project focuses on the Toyoshikidai housing estate in Kashiwa, which was built in the 1960s, and has been aging both in terms of its physical structure and residents. In collaboration with the municipal government, the Urban Renaissance Agency (UR), and Toyoshikidai residents, the University of Tokyo has been endeavoring to redesign the community and building in various components to meet the shifting needs created by population aging.

The plan includes replacing the old five-storey residential buildings with barrier-free condominium blocks to ensure mobility. The community will offer housing for people at various life stages, so that they can move to a place which meets their needs best throughout the life

course. It will make 'aging in place' possible. The primary concern of older persons is health care. A 24-hour care system to support home-based care has also been mapped out. One of the major objectives of the redesign is to improve networks among residents and develop various opportunities for the elderly to take a role in supporting their own community. A huge number of baby boomers who are working in Tokyo will soon retire and come back to the community. The project is creating age friendly work places and flexible scheme of employment that will allow the residents the options to work even up to the age of around 85. The plan maximally utilizes the existing ICT to reach out for people to stay safe and connected, and also pursue technological innovations and test new technology in the community.

The project is attracting interest from various stakeholders including companies in different business sectors. This is an ambitious social experiment for agents in different sectors to work together to create a community where we fully enjoy the long life.

REDESIGNING COMMUNITIES FOR AGED SOCIETY

SPEAKER BIOGRAPHY AND ABSTRACT



Professor Ng Mee Kam
Professor, Department of Geography and Resource Management
The Chinese University of Hong Kong

BIOGRAPHY

Mee Kam Ng is Vice-Chairman of the Department of Geography and Resource Management, the Director of the Urban Studies Programme, Associate Director of the Institute of Future Cities and the Hong Kong Institute of Asia-Pacific Studies at the Chinese University of Hong Kong. She is a member of the Royal Town Planning Institute, a fellow of the Hong Kong Institute of Planners and academic advisor of the Hong Kong Institute of Urban Design. She has published widely on planning, governance and sustainability issues in Pacific Asia. Her publications have earned her six Hong Kong Institute of Planners' Awards and The AESOP (Association of European Schools of Planning) Best Published Paper Award in 2015. She has been consultant to the United Nations, the European Union and the Municipal Government of Shenzhen. She is an associate editor for *Planning Theory and Practice* and a member of the editorial board of *Town Planning Review*, *DisP—The Planning Review and City, Culture and Society*, and *Business Strategy and the Environment*.

ABSTRACT

PLACE AUDIT FOR BUILDING AGE-FRIENDLY COMMUNITIES: WHY? WHAT? HOW?

The presentation addresses the questions of why should we develop age-friendly communities, what are the contents of a place audit and how to conduct one in order to promote age-friendly cities? Reasons for building age-friendly communities will be discussed but the most important one is simply because they are great communities for everyone! An ecological approach will be used to reorganize the WHO Age-Friendly Cities framework to examine what needs to be done in a place audit: know thy elderlies at the micro-system level (socio-economic and demographic information); know thy physical environment at the meso-system level (housing, buildings, outdoor space, mobility, community and health services); and know thy social environment at the exo- and macro-system levels (social participation, respect and social inclusion, civil participation and employment). A modified tripartite partnership (government, NGOs and community members) framework developed by the International Council for Local Environmental Initiatives is suggested to help deliver age-friendly communities. And overseas and local case studies involving elderly and community members in conducting place audits will be shared to inspire further efforts in building age-friendly places.



HONG KONG JOCKEY CLUB AGE-FRIENDLY CITY MOVEMENT

ABSTRACT

With population ageing world-wide, there has been increasing promotion of the 'age-friendly' concept in the past decade by the World Health Organization (WHO) and also among academia as well as policy makers. There is a focus on cities as older people prefer to remain or move to urban settings as the latter in general provide a more enabling environment. The WHO launched the 'Age-friendly cities' initiative in 2005, and a formal programme started in 2006 with 33 cities from 22 countries participating in a focus group research project, where older persons express their opinions about desirable age-friendly features in their day-to-day living environment. These are summarized into eight domains covering outdoor spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community support and health services. Each city can then assess how well these principles have been taken into account in responding to the rapidly growing numbers of older people. Hong Kong has also started to respond in recent years to this concept. What is still lacking is a comprehensive collection from all older people in Hong Kong, covering all educational and socioeconomic perspectives. Historically opinions from a narrow sector of the older population are sought. Furthermore, views from people in their 'third age' tend to be neglected as they are not viewed as 'old', and views from younger people are seldom included. Yet the concept of agefriendliness is all-inclusive.

The Hong Kong Jockey Club Charities Trust has initiated this Age-friendly city movement initially covering 8 districts, to assess the current situation, to identify potential areas for improvement, to work with all stakeholders in the district to carry out and evaluate these improvement projects.

The Jockey Club Institute of Ageing at the Chinese University Hong Kong will be working closely with the Hong Kong Jockey Club Charities Trust, the Sau Po Centre on Ageing (HKU), the Institute of Active Ageing (PolyU), and the Asia-Pacific Institute of Ageing Studies (Lingnan U), to take Hong Kong another giant step forwards in creating an age-friendly community in response to our rapid demographic change.



HONG KONG JOCKEY CLUB AGE-FRIENDLY CITY MOVEMENT

SPEAKERS' BIOGRAPHIES



Professor Jean Woo

Director, CUHK Jockey Club Institute of Ageing

Prof. Jean Woo graduated from Cambridge University in 1974. After medical posts in the Charing Cross, Hammersmith, and Brompton Hospitals, she worked in part time posts in general practice as well as research in the University of Hong Kong. She joined the Department of Medicine at the Chinese University of Hong Kong in 1985 as Lecturer responsible for the development of the teaching and service in Geriatric Medicine, becoming Head of the Department in 1993 until 1999, Chief of Service of the Medicine and Geriatric Unit at Shatin Hospital from 1993-2012, and Chair Professor of Medicine in 1994. From 2000-6 she was Head of the Department of Community and Family Medicine, and from 2001-5 Director of the newly established School of Public Health. Currently she is Emeritus Professor of Medicine, Henry G Leong Research Professor in Gerontology and Geriatrics, Director of the Hong Kong Jockey Club Institute of Ageing, Chairman of the Department of Medicine and Therapeutics, The Chinese University of Hong Kong, and Honorary Professor, Faculty of Social Science, The University of Hong Kong. Her research interests include chronic diseases affecting elderly people, health services research, nutrition epidemiology, quality of life issues at the end of life, with over 700 articles in peer-reviewed indexed journals.



Dr Carol Ma

Department of Sociology and Social Policy, Lingnan University

Carol HK Ma is the Research Fellow, Asia Pacific Institute of Ageing Studies; Associate Director, Office of Service-Learning and Adjunct Assistant Professor, Department of Sociology and Social Policy at Lingnan University. She has a particular passion for the promotion of Service-Learning and is an active participant in both elderly services and youth services. She has successfully finished the first pilot project of Age friendly city in Tsuen Wan with the collaboration with various elderly centers and District Council (Tsuen Wan). Other than that, she is also on the Board of Advisors for the International Center for Service-Learning in Teacher Education and on the Board of Directors for the International Association for Research on Service-Learning and Community Engagement. She co-edited *Service-Learning in Asia: Curriculum Models and Practices*, and co-authored a paper for UNESCAP related to Ageing issues. She has published in *Asian Journal of Gerontology and Geriatrics*, *International Journal of Community Research and Engagement*, *Journal of Management Education*, and *New Horizons in Education*.

HONG KONG JOCKEY CLUB AGE-FRIENDLY CITY MOVEMENT

SPEAKERS' BIOGRAPHIES



Mrs Teresa Tsien
*Director, Institute of Active Ageing,
The Hong Kong Polytechnic University*

Teresa is currently the Director of the Institute of Active Ageing, Senior Teaching Fellow of the Department of Applied Social Sciences (APSS), Hong Kong Polytechnic University. She is also a part-time visiting lecturer for the MSc in Clinical Gerontology programme at the Chinese University of Hong Kong. She specializes in aging studies and research, especially in dementia care, carer support, lifelong learning and active ageing.

Teresa is appointed as a member of the YauTsimMong South District Committee and the Kowloon City Fight Crime

Committee. She has just completed a six-year term serving as a member of the Social Welfare Advisory Committee, the Community Chest and Guardianship Board. She is the President of WINGS HK, the vice-chairman of Senior Citizen Home Safety Association, Hon. Secretary of the Hong Kong Alzheimer's Disease Association, committee member of the Age-friendly Community Project of the Hong Kong Council of Social Service, Tsimshatsui Kaifong Welfare Association and the Cheung Muk Tau Holiday Centre for the Elderly, Helping Hand. She is a reviewer for the British Journal of Social Work, the Hong Kong Social Workers Association Journal and the Hong Kong Nursing Journal. She also serves as an advisor/ consultant to the following agencies (Elderly Services, Evangelical Lutheran Church Social Service, Hong Kong; SKH Holy Carpenter Church District Elderly Community Centre; Elderly Service Division, The Neighborhood Advice; Action Council; Hong Kong Women Service Association; Hong Kong Joint Council of Parents of Mentally Handicapped; Advisory committee for the Smart Elderly Scheme, Office of the Government Chief Information Officer, HKSAR; Project Concern; Hong Kong Sustainability Development Centre)



Dr Vivian Lou
*Director, Sau Po Centre on Ageing,
The University of Hong Kong*

Dr. Lou Vivian W. Q. is the Director of Sau Po Centre on Ageing at The University of Hong Kong. She is also an Associate Professor at Department of Social Work & Social Administration. She is now teaching social gerontology, clinical gerontology, care management, and human development for both undergraduate and postgraduate students. Her research interests focus on family gerontology, in particular family caregiving for frail older adults and grandchildren, intergenerational support, social adaptation and mental health of Chinese older adult. She also

has a keen interest in practice research on factors that contribute to the enhancement of psychospiritual well-being of Chinese older adults. She had publications in journals such as Journal of Gerontology: Social Sciences, The Gerontologist, Aging and Mental Health, and Social Indicators Research. Dr. Lou is presently a council member of Hong Kong Association of Gerontology and fellow of the Gerontology Society of America.

FRAILITY AND GERIATRIC SYNDROMES

SPEAKER BIOGRAPHY AND ABSTRACT



Dr Ruby Yu
*Research Assistant Professor,
Research Fellow, CUHK Jockey Club Institute of Ageing*

BIOGRAPHY

Dr. Ruby Yu has studied the association of multiple health behaviors with physical and cognitive functioning. She has examined the factors associated with sarcopenia and frailty as well as the predictive ability of sarcopenia on fracture risk in community-dwelling older adults. She has been involved in several studies to assess the effects of mindfulness intervention (such as Dejian mind body intervention) on cognitive functions and physical fitness among older adults. She has authored and

co-authored several book chapters, reports, and peer-reviewed journal articles.

ABSTRACT

FRAILITY SCREENING IN THE COMMUNITY USING THE FRAIL SCALE

Objectives

To explore the feasibility of using the FRAIL scale in community screening of older Chinese people aged 65 years and older, followed by clinical validation by comprehensive geriatric assessment of those classified as pre-frail or frail.

Design

Two-phase study: screening of people aged 65 years and older by trained volunteers, followed by comprehensive geriatric assessment by multidisciplinary staff for those classified as pre-frail or frail.

Setting

Elderly Centers in the New Territories East Region of Hong Kong SAR China.

Participants

A total of 816 members of elderly centers attending by themselves or accompanied by relatives.

Measurements

For phase 1, questionnaire (including demographic, lifestyle, chronic diseases) and screening tools were administered by trained volunteers. These consist of the FRAIL scale, SARC-F to screen for sarcopenia, and mild cognitive impairment using the abbreviated screening for mild cognitive impairment (Abbreviated Memory Inventory for the Chinese). Blood pressure, body mass index, and grip strength were recorded. For phase 2, comprehensive geriatric assessment include questionnaires assessing lifestyle domain (physical activity, nutritional status using the Mini-Nutritional Assessment-Short Form), the physical domain (number of diseases and number of drugs, activities of daily living and instrumental activities of daily living disabilities, geriatric syndromes, self-rated health, sleep quality), cognitive and psychological domain (Mini-Mental State Examination, Geriatric Depression Scale), and social domain (income, housing, living satisfaction, family support).

Results

The prevalence of pre-frailty and frailty were 52.4% and 12.5%, respectively. The prevalence for frailty increasing with age from 5.1% for those aged 65-69 years to 16.8% for those 75+, being greater in women compared with men (13.9% vs 4.2%). Of those who were pre-frail or frail (n = 529), 42.5% had sarcopenia and 60.7% had mild cognitive impairment. Among those who were frail (n = 102), sarcopenia and mild cognitive impairment were also frequently present: 12.8% had sarcopenia, 14.7% had mild cognitive impairment, 63.7% had both sarcopenia and mild cognitive impairment, and only 8.8% had neither. In phase 2, participants who were classified as pre-frail or frail (n = 529) were invited for further interviews; 255 participants (48.2%) returned. Compared with the pre-frail group, those in the frail group were less physically active, had higher number of chronic diseases, were taking more medications (more were taking sleeping pills), reported more falls, rated their health as poor, had higher prevalence of depressive symptoms and mild cognitive impairment, had higher prevalence of sarcopenia, and a high number of activities of daily living and instrumental activities of daily living disabilities.

Conclusion

The FRAIL scale may be used as the first step in a step care approach to detecting frailty in the community, allowing targeted intervention to potentially retard decline and future disability.

FRAILTY AND GERIATRIC SYNDROMES

SPEAKER BIOGRAPHY AND ABSTRACT



Professor Piu Chan

Director, Beijing Institute of Geriatrics, Beijing, China
Professor and Chairman, Department of Geriatrics, Capital Medical University,
Director, Departments of Neurobiology and Geriatrics, & Vice Director, Department of Neurology, Xuanwu Hospital
Deputy Director, Key Laboratory of Ministry of Education for Neurodegenerative Diseases
Director, Parkinson Disease Center of Beijing Institute for Brain Disorders
Director, Key Laboratory on Parkinson's Disease of Beijing

BIOGRAPHY

Professor Chan graduated from Hunan Medical College in Changsha and became a neurologist after the fellowship training. He later acquired his Doctor of Philosophy in neurosciences from Sun Yan-Sen University of Medical Sciences in Guangzhou followed by postdoctoral training at the Parkinson's Institute in Sunnyvale, California of USA, where he spent more than 10 years as senior scientist before returning to Beijing in 2000.

Professor Chan is the Vice President of the Chinese Society of Gerontology and Geriatrics, council member of the International Association of Gerontology and Geriatrics (IAGG), and Secretary of the IAGG Asia-Oceania Region. He is also the Vice President of the Chinese Association of Geriatrics, General Secretary of Society of Geriatrics of the Chinese Doctor's Association, and the committee member of the Society of Geriatrics of the Chinese Association of Medical. He is the director of the Chinese Parkinson Study Group and deputy director of Committee on Parkinson's disease and Movement Disorders of the Chinese Neurology Association. He has been appointed as the Deputy Director and Principal Investigator of Chinese National Human Genome Center Beijing since 2001. He was the President of the Society of Chinese Neuroscientists in America from 1998 to 2000 and the Secretary of Asia-Pacific Society for Neurochemistry from 2000 to 2006.

Professor Chan is well known for his translational research on neurodegenerative disorders and other age-related disorders. He has been working on developing models for CNS diseases including non-human primate models of Parkinson's disease and dyskinesia. He has been studying familial and susceptibility genes and a variety of biomarkers for Parkinson's and Alzheimer's diseases in a few unique cohorts in China aimed for prediction and prevention of neurodegenerative diseases. He has initiated projects investigating the role of polyphenols (funded by M. J. Fox foundation) and Traditional Chinese Medicine in two multi-center trials. He is currently the director of the National Center of GCP Trials for Neurodegenerative Disorders. He has been the PI for six registration clinical trials including Phase I-III trials of a recently approved drug developed by a domestic company by SFDA. He is an ad hoc consultant for the State Food and Drug Administration of China.



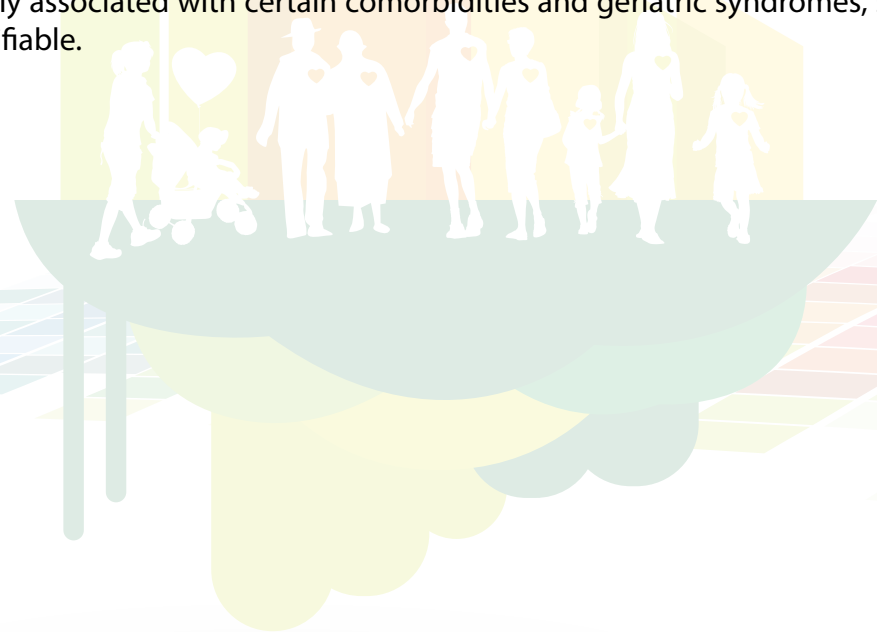
Professor Chan is the committee member for the MDS "Task Force on the definition of Parkinson's disease" and "Telemedicine Task Force". Dr. Chan's center is the only Chinese team participated the International LRRK2 Consortium and Apple's mPower project.

Professor Chan has published more than 250 peer-reviewed papers and served as editorial members of more than 15 international and Chinese journals. In 2002, he attained First Award for Scientific Achievement from both Ministry of Education and Chinese Medical Association in the People's Republic of China.

ABSTRACT

TRANSITION IN FRAILTY STATUS AND ASSOCIATED FACTORS IN COMMUNITY-DWELLING CHINESE: THE BEIJING LONGITUDINAL STUDY ON AGING II (BLSAII)

Frailty is a state of vulnerability to adverse outcomes in elderly. Unlike disability, it is described as a dynamic stage and reversible to robust conditions. However little evidence is known about the characteristics associated with frailty transition. We investigated the frailty transition and associated factors in community-dwelling elderly with both prevalence and incidence data from the Beijing Longitudinal Study on Aging II (BLSAII) cohort. A multi-stage cluster random sampling method was used to select a representative community cohort of residents older than 55. Frailty status, assessed at baseline and 12-month follow-up visit, was defined using a frailty index (FI) as the number of deficits in 34 health variables. $FI \geq 0.25$ was used as the cut-off criteria for frailty. Participants presenting frailty at the baseline, 451 (50.79%) transitioned to robust condition and 437 (49.21%) remained frail. Women were more likely than men to change their frailty status. There was an increased risk of transition from robust to frailty and staying in frail with ageing. After adjustment for other predictors, hypertension (adj. OR 0.539, 95%CI 0.324, 0.896), cardiovascular diseases (CVD) (adj. OR 0.568, 95%CI 0.393, 0.821), arthritis (adj. OR 0.401 95%CI 0.276, 0.584), hearing loss (adj. OR 0.48, 95%CI 0.29, 0.81), and Tinetti's mobility score (POMA < 24) (adj. OR = 0.49, 95%CI 0.33, 0.75) negatively related with transition from frailty to robust and positively related with transition from robust to frailty [adj. OR = 1.8 for hypertension (95%CI 1.419, 2.284), 2.13 for CVD (95%CI 1.67, 2.70), 2.13 for arthritis (95%CI 1.65, 2.74), 2.00 for deaf (95%CI 1.2, 3.32), and 1.67 for POMA (95%CI 1.13, 2.44)]. Our findings suggest that frailty is a dynamic process, characterized by frequent transitions between frailty states over time, particularly for women. Ageing is the most important factor for frail status. Transitioning into frail status is primarily associated with certain comorbidities and geriatric syndromes, some of which are readily modifiable.



AGE-FRIENDLY HOSPITAL AND SERVICE

SPEAKER BIOGRAPHY AND ABSTRACT



Professor Timothy Kwok

Deputy Director, CUHK Jockey Club Institute of Ageing

BIOGRAPHY

Professor Timothy Kwok had undergraduate medical education and postgraduate training in Geriatric Medicine in the United Kingdom. He joined the Department of Medicine & Therapeutics in the Chinese University of Hong Kong in 1994, and became professor in 2006. His main research interest has been on the prevention and care of dementia. Since 2004, he has been director of the Jockey Club Centre for Positive Ageing, a day and respite centre for people with dementia. He has conducted clinical trials of vitamin supplements, Tai chi and cognitive training in the prevention of cognitive decline. His other

research interests include osteoporosis, nutrition in old age, and health care services. He is also the deputy director of CUHK Jockey Club Institute of Ageing and director of Jockey Club Centre for Osteoporosis Care and Control.

ABSTRACT

AGE FRIENDLY HOSPITAL

Older people are major users of hospital services. Yet hospitals are more focused on their own operational needs than the needs of older people who may have impairment in mobility, vision, hearing and cognition. In the outpatient setting, the inconvenience may lead to the need for escort or overnight stay in hospital, indirectly limiting access to outpatient services. One stop service at day units e.g. geriatric day hospital is an existing attempt to alleviate this problem of hospital design.

The consequences of age unfriendliness in the hospital ward setting are more serious. The risk of falls in older inpatients is high because of their underlying frailty and the hazardous ward environment. The nursing staff manages the fall risk by confining older patients to beds, even to the extent of using physical restraints. The consequence is deconditioning which can occur within a few days. In addition, the ward environment and many ward practices increase the risk of acute confusion which is usually managed by sedative drug use and physical restraints, both of which contribute greatly to deconditioning. It is therefore not uncommon for older patients to have long hospital stay and fail to regain previous functional status, leading to nursing home placement.

Age friendly hospital design may therefore have direct impact on the quality of outpatient and inpatient hospital services. More importantly, it may indirectly lead to age friendly ward practices by encouraging and empowering staff initiatives in quality improvement. To face the challenges of ageing population in Hong Kong, there is an urgent need to promote age friendliness in our hospitals.

AGE-FRIENDLY HOSPITAL AND SERVICE

SPEAKER BIOGRAPHY AND ABSTRACT



Dr Maria Chui

General Manager (Nursing Service) of Shatin Hospital & Bradbury Hospice

BIOGRAPHY

Dr Maria Chui is a registered nurse in general nursing and obtained her doctoral degree in Health Science in 2011. She developed special interest in Gerontological nursing since working at Shatin Hospital in 1993. In 2007, she conducted an action research towards a planned change in use of physical restraint on older hospitalized adults. She has spearheaded "Restraint-free care" in Shatin Hospital and has been awarded the HA Outstanding Team in 2011 on fall and restraint reduction.

Have been invited to give presentations and share experiences in conferences, radio, and television on restraint reduction and fall prevention. Have led initiative on Nurse-led model on end-of life care. Is now leading hospital projects on a productive ward on releasing nurses' time to care, Nursing at night program and elderly-friendly ward design.

ABSTRACT

DEMENTIA FRIENDLY WARD: WHAT ARE WE EXPECTING?

The baby boom generation born between 1946 and 1964 began turning 65 in 2011. According to the Hong Kong Census (2015), for the age group of 85 years or over, there will be an increase from 118,800 persons in 2010 to 168,900 in 2016, and 244,400 in 2031, representing growth of around 42% and 106% respectively, compared to 2010. This explosive growth will place great demands on our healthcare system. Almost half of adults who occupy hospital beds are ≥ 65 year. Furthermore, elderly people (aged 65 years or over) accounted for 53% of all accident and emergency admissions, and 68% of all unplanned emergency readmissions to hospitals, in 2010. About 30 to 40% of elderly patients who attend the emergency department are cognitively impaired.

Modern acute hospitals are very busy, noisy places with a very fast throughput of patients. Admission to hospital can be distressing for average, and could be much worse for people with dementia. Dementia patients often have more difficulty understanding time and place and can become confused in unfamiliar environments. General hospitals are rarely designed to take account of the cognitive and perceptual problems of people with dementia. While patients are in hospital, poorly designed ward environments can lead to further disablement, with the result that they may not be able to return to their previous level of functioning.

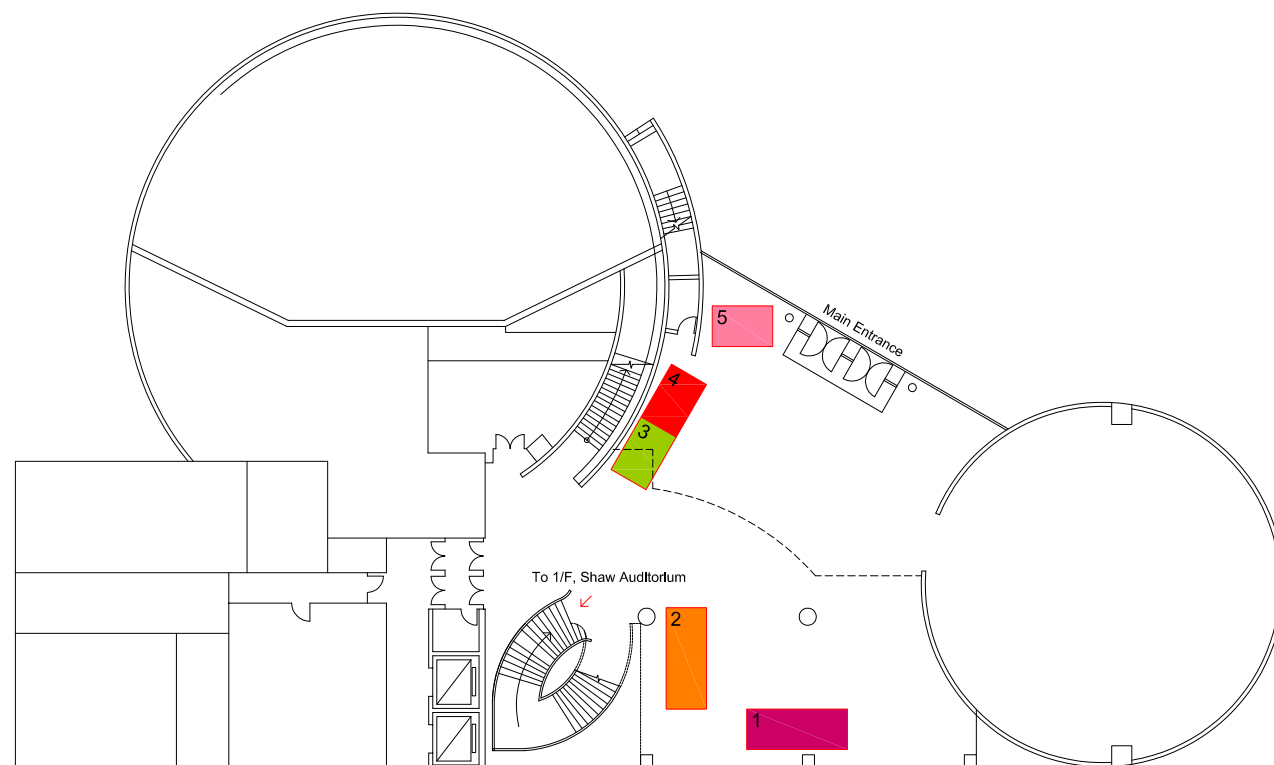
Chaudhury, Hung and Badger (2013) commended the physical environment as a critical component of a therapeutic setting for people with dementia. There has been a growing body of literature that has provided evidence the effect of a well-designed supportive physical environment can reduce behavioral and affective symptoms associated with cognitive losses, agitation, and less dependence in conducting activities of daily living. Hence, the ward

environment has to be designed to compensate for them rather than relying on the person to make the adjustment. Good dementia design promotes good care. It also assists staff to perform better and to have more time for patients.

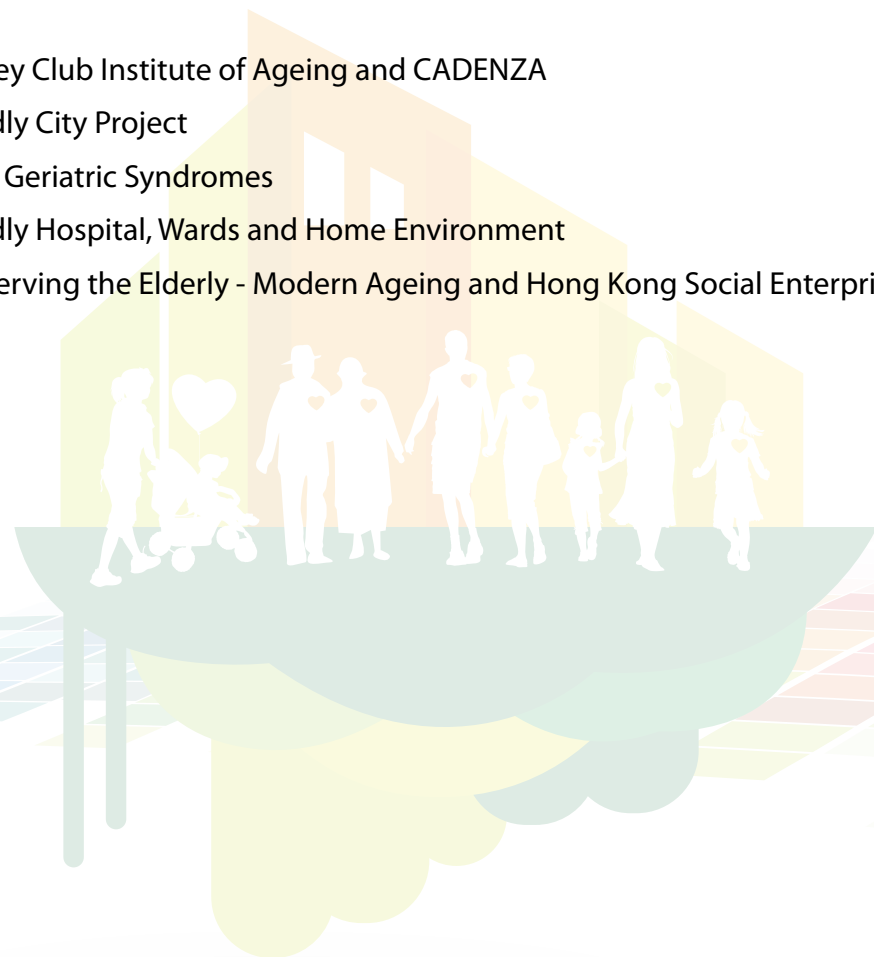
The key design features of a dementia-friendly physical environment range from lighting, color and contrast, floors, orientation and signage, sound, furniture, getting outside, and communal areas. We have already attended to people on wheelchair; and physical or visual impairment, with the development of barrier free access. It is now time for policy makers and hospital management to take serious thought in supporting design principles founded on an understanding of the impact that the physical environment can have on people with dementia.

Infection control is a key issue for all hospitals. Yet, we need to balance between infection risks and maintaining an environment that helps people with dementia to orientate themselves. Therefore, simply a good physical environment alone means nothing to a therapeutic setting. It has to be meaningfully aligned with the recognition of the importance of person-centred care philosophy and practice.

EXHIBITION MAP



1. CUHK Jockey Club Institute of Ageing and CADENZA
2. Age-Friendly City Project
3. Frailty and Geriatric Syndromes
4. Age-Friendly Hospital, Wards and Home Environment
5. Business Serving the Elderly - Modern Ageing and Hong Kong Social Enterprise Challenge



ABOUT THE CUHK JOCKEY CLUB INSTITUTE OF AGEING, ITS VISION AND MISSION

In support of the Chinese University of Hong Kong's (CUHK) aspiration to overcome the challenges brought by the ageing population to society, CUHK has established The CUHK Jockey Club Institute of Ageing in 2014 with the generous support from the Hong Kong Jockey Club Charities Trust.

Since its establishment, the Institute has embarked collaborative researches in gerontechnology, healthy ageing and community intervention programmes for health promotion and prevention of frailty. Efforts to promote ageing messages have been made through a dedicated series of TV programme; announcing the results of the first multi-dimensional AgeWatch Index of Hong Kong; and launching the Age Friendly City Movement led by The Hong Kong Jockey Club Charities Trust. In view of the importance of training and joint learning, the Institute has formed partnership with ACCESS Health International with the shared goal of improving elderly and long term care in Hong Kong.

Building on the University's long-standing efforts of ageing researches and cooperating with charitable organizations, the Institute will continue to build its capacity and serves as a platform of ageing-related researches, training and community outreach programmes.

Vision

To make Hong Kong an age-friendly city in the world.

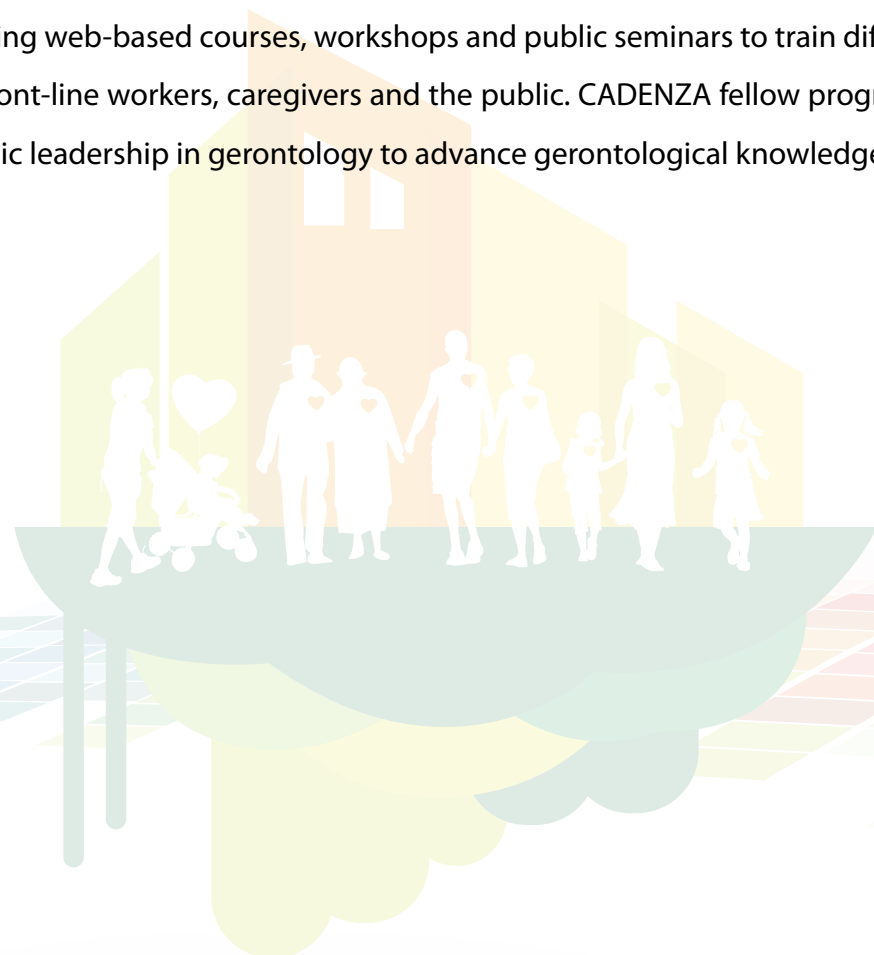
Mission

To synergize the research personnel and efforts on ageing across disciplines to promote and implement holistic strategies for active ageing through research, policy advice, community outreach and knowledge transfer.

ABOUT CADENZA

CADENZA: A Jockey Club Initiative for Seniors is launched and funded by The Hong Kong Jockey Club Charities Trust in light of the rapidly ageing population. It is a HK\$380 million project in partnership with the Faculty of Social Sciences of the University of Hong Kong and the Faculty of Medicine of The Chinese University of Hong Kong. The project aims at creating an elder-friendly environment in Hong Kong to foster positive community attitude towards ageing and continuously improve the quality of care and quality of life of older people.

Since its launch in 2006, many activities under CADENZA have been carried out in the areas of public education, community projects, training programme, and leadership training and research, which are the four main components of the project. Public Education promotes positive ageing and raises awareness of the important issues pertaining to elderly population. CADENZA has collaborated with non-governmental organisations and other community partners to launch community projects, which are innovative and sustainable service models, to cope with the changing needs of seniors. The training programme covers a wide range of training activities including web-based courses, workshops and public seminars to train different levels of professionals, front-line workers, caregivers and the public. CADENZA fellow programme aims to nurture academic leadership in gerontology to advance gerontological knowledge.



EVALUATION FORM

CUHK Jockey Club Institute of Ageing Launch Conference on “Creating Age-Friendly Communities” Event Evaluation Form

Please assist us to evaluate this conference by completing this form. This information is valuable for planning future events.

1. General comments (Please circle as appropriate)

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Meeting was relevant to educational needs	1	2	3	4	5
Meeting contained new ideas and materials	1	2	3	4	5
Meeting was worth the time I invested in it	1	2	3	4	5
Meeting fully met my expectations	1	2	3	4	5
Satisfaction with registration handling	1	2	3	4	5

2. Programme Evaluation (Please circle as appropriate)

	Poor	Fair	Neutral	Good	Excellent
A Philanthropist's Understanding of the Ageing Challenge in Hong Kong	1	2	3	4	5
Modern Ageing and Joint Learning	1	2	3	4	5
Redesigning Communities for Aged Society	1	2	3	4	5
Hong Kong Jockey Club Age-Friendly City Movement	1	2	3	4	5
Frailty and Geriatric Syndromes	1	2	3	4	5
Age-friendly Hospital and Service	1	2	3	4	5
Exhibition	1	2	3	4	5

Please comment on any presentations / speakers you enjoyed or the otherwise; and any suggestions on the topics for the conference:



3. Social Events and Organisation of the Conference

	Poor	Fair	Neutral	Good	Excellent
Opening Ceremony	1	2	3	4	5
Coffee Breaks / Lunch	1	2	3	4	5
Conference Materials	1	2	3	4	5
Venue Facilities (access, traffic, etc.)	1	2	3	4	5

Please comment if you have other suggestions to the social events and organisation of the conference:

Was there an event you found particularly enjoyable or interesting?

Please provide any other comments on this conference or suggestions of topics for future events.

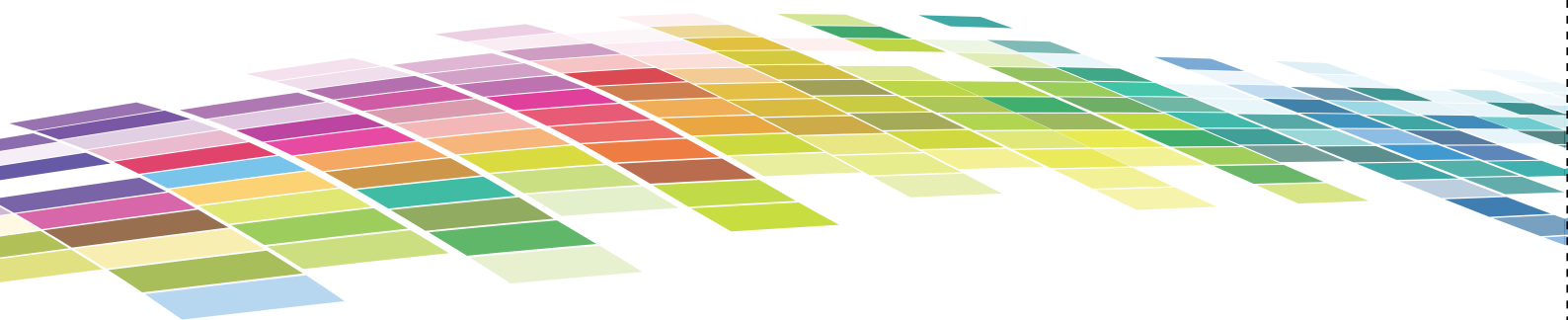
Please return the completed form to the Reception Desk.

Thank you.



NOTES





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