# Hong Kong Occupational Therapy Conference 2025

# Enhancing Health & Well-Being through Occupational Therapy

## Holistic Approaches Across the Lifespan

**6 DECEMBER 2025**

THE SALISBURY - YMCA OF HONG KONG

ORGANIZER | 香港職業治療學會 Hong Kong Occupational Therapy Association

CO-ORGANIZER | 香港教育大學 The Education University of Hong Kong

SUPPORTING ORGANIZATION | The Hong Kong Polytechnic University 香港理工大學 | 康復治療科學系 Department of Rehabilitation Sciences | 東華學院 TUNG WAH COLLEGE

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# Message from Chairperson of HKOTA

**Ms. Sanne FONG**
Senior Lecturer I, The Education University of Hong Kong,
Chairperson of Hong Kong Occupational Therapy Association

Welcome to **the Hong Kong Occupational Therapy Conference 2025**!

It is a privilege to host this bi-annual event here in Hong Kong, and I am delighted to see so many passionate occupational therapists gathered from various corners of our city.

This year's theme, **"Enhancing Health and Well-Being through Occupational Therapy: Holistic Approaches Across the Lifespan,"** invites us to explore innovative ideas, share pioneering research, and collaborate on solutions to the challenges we face in our field. Our agenda is filled with insightful presentations, engaging discussions, and invaluable networking opportunities designed to inspire and inform you all.

We are honored to have with us distinguished speakers, including Ms. Samantha SHANN, President of the World Federation of Occupational Therapists; Prof. Chetwyn CHAN, Vice-President of the Education University of Hong Kong; and Dr. Rob BROOKS from the University of Bradford. They will share valuable insights on leadership in occupational therapy, technology and social entrepreneurship in rehabilitation, and the intersection of occupation and mental health for students with special needs.

I would like to take a moment to recognize the tremendous efforts of our organizing and scientific committees. Your dedication has made this event possible, and we are truly grateful for your hard work.

I also extend my heartfelt thanks to our co-organizer, the Education University of Hong Kong, and our supporting organizations, including the Rehabilitation Science programme at the Hong Kong Polytechnic University and the School of Medical and Health Sciences at Tung Wah College. This conference would not be possible without their generous support.

Throughout our time together, I encourage you to engage actively. Ask questions, connect with fellow participants, and seize every opportunity to exchange ideas. Each interaction can lead to new insights and partnerships that enrich our work and impact.

Let us embrace the diverse experiences and perspectives that each of you brings to this conference. Our differences are our strengths, enabling us to tackle complex issues with creativity and resilience.

As we embark on this incredible journey on this OT conference day, let's keep an open mind and heart. Together, we can make meaningful strides toward a brighter future for our profession.

Thank you once again for being here. I look forward to a productive and inspiring conference!

Enjoy the sessions!

Sanne FONG

Chairperson
**Hong Kong Occupational Therapy Association**

# Message from President of WFOT

**Ms. Samantha SHANN**
President, World Federation of Occupational Therapists

It is my great pleasure to extend heartfelt greetings to all delegates, presenters, and guests attending **the Hong Kong Occupational Therapy Conference 2025**, themed **"Enhancing Health & Well-Being through Occupational Therapy: Holistic Approaches Across the Lifespan."**

This conference provides an invaluable opportunity for our professional community to reaffirm the essential role of occupational therapy in promoting health, participation, and quality of life across the lifespan. The theme aligns closely with the World Federation of Occupational Therapists' enduring commitment to advancing evidence-informed, person-centred, and culturally responsive practices. As the world continues to evolve, occupational therapists are uniquely positioned to respond with creativity, compassion, and practical solutions that help individuals and communities live fuller, more connected lives.

I would like to acknowledge the tremendous effort of the Hong Kong Occupational Therapy Association and the organising committee for bringing together such a rich and thoughtful programme. The sessions, workshops, and discussions planned offer exciting opportunities to learn from one another, share new ideas, and explore approaches that strengthen our work in practice, education, and research. Through meaningful exploration of strategies that support well-being—from childhood to older adulthood—this conference highlights the profound and transformative impact of occupational therapy on individuals, families, and communities.

As you participate, I encourage you to take full advantage of the conversations and connections that will emerge. Foster new collaborations, exchange perspectives, and draw inspiration from the expertise gathered here. I hope you leave this conference feeling energised, supported, and motivated in your ongoing contribution to our profession. May the knowledge shared over the coming days advance your practice and strengthen the continued growth of occupational therapy locally and globally.

I am delighted to join you in person for this important event. Let us make this conference a celebration of what we have achieved and a launching pad for the extraordinary possibilities ahead. Thank you for your passion, your ideas, and your unwavering dedication to advancing occupational therapy.

On behalf of the World Federation of Occupational Therapists (WFOT), I wish you a rewarding and enjoyable conference experience.

Warm regards,
Samantha SHANN

President
**World Federation of Occupational Therapists (WFOT)**

# Message from President of APOTRG, WFOT

**Prof, Stella CHENG**
President, Asia Pacific Occupational Therapy Regional Group,
World Federation of Occupational Therapists

Dear fellow occupational therapists and OT students,

It is my great pleasure to extend congratulations to the Hong Kong Occupational Therapy Association on organizing **the Hong Kong Occupational Therapy conference in 2025**. The theme of the conference **"Enhancing Health & Well-Being through Occupational Therapy"** has highlighted the focus of occupational therapy service in Hong Kong. As a locally trained OT in early days, I have witnessed the change of OT service over the past 40 years. I still remember how we worked out our mission and vision statement, 'All our clients shall lead a meaningful life of their choice' in 1995. With passion and dedication, we organized a discussion forum on 'OT Dream' in 2007 to plan for our future, and we decided to shift our focus from treatment techniques to occupations. I am sure we had make the right move! Have we achieved what we planned? I believe we had make a few steps forward. However, the destination is still somewhere ahead, we do need to work harder. Today's conference provides a good opportunity for us to learn and move forward.

OT is regarded as a core team member in the primary healthcare service team in the District Health Centers in Hong Kong since its establishment in 2019. Indeed, our service could contribute much by promoting health and well-being of the Hong Kong people through helping the general public to engage in desirable occupations. In order to have further contribution, it is important for us to establish more local clinical evidence. This conference, not only allows us to learn from overseas experts but is also a platform for us to exchange ideas on collaboration. 'Teamwork makes dream work', let us all work together for our OT Dream!
I must thank all the speakers, presenters and participants of the conference. It is your support and contribution that make this conference a success. Special thanks to the organizing committee of the conference for all the hard work over the past year. I look forward to all the sharing during the conference!

With warmest regards,
Stella CHENG

President
**Asia Pacific OT Regional Group**

# Message from Vice-President of EdUHK

**Prof. Chetwyn CHAN**
Vice-President (Research and Development)
Peter T. C. LEE Endowed Chair of Psychology,
Chair Professor of Psychology,
The Education University of Hong Kong

I am with great pleasure welcoming you to **the Hong Kong Occupational Therapy Conference 2025**. The team of occupational therapy faculty members at The Education University of Hong Kong (EdUHK) are delighted to contribute as co-organizer of this year's event. The participation not only signifies EdUHK's commitment to knowledge exchange, but also represents an early milestone of the EdUHK OT team in supporting the professional development of the discipline in Hong Kong.

The theme of this year's Conference - **"Enhancing Health & Well-Being through Occupational Therapy: Holistic Approaches Across the Lifespan"** is a shared mission that we empower individuals to lead independent and fulfilling lives. It is also one of the core values for the new Master of Occupational Therapy Programme to be launched in EdUHK in September 2026.

In addition to the panel speech and discussions, the Conference also features a session which students are given the opportunity to present their research projects. I am eager to learn from the speakers about their innovative ideas and research strategies. Apart from hospitals and rehabilitation centres, occupational therapy practices have extended to NGOs and social enterprises, and recently to health-tech companies and start-ups. The proliferation of service sectors reflects enhancement of individual's activity and participation and well-being without a boundary remains to be a core value of occupational therapists.

Last but not least, I would like to thank our guest speakers, Ms. Samantha Shann of the World Federation of Occupational Therapists and Dr. Rob Brooks of the University of Bradford, for travelling all the way from the United Kingdom to share with us valuable insights and experiences. I would also like to express my gratitude to our moderators, organizers and participants. Thank you all for making the event possible and I hope you would find this year's Conference an inspiring and fruitful experience.

Professor Chetwyn CHAN

**Co-organizing Committee**

# Organising Committee and Scientific Committee

## Organising Committee

- Dr. Alice CHAN (Convener)
- Ms. Betty HUNG
- Ms. Candy LAI
- Ms. LUI Shan Shan
- Ms. Rachel NG
- Mr. WONG Shun Yiu

## Scientific Committee

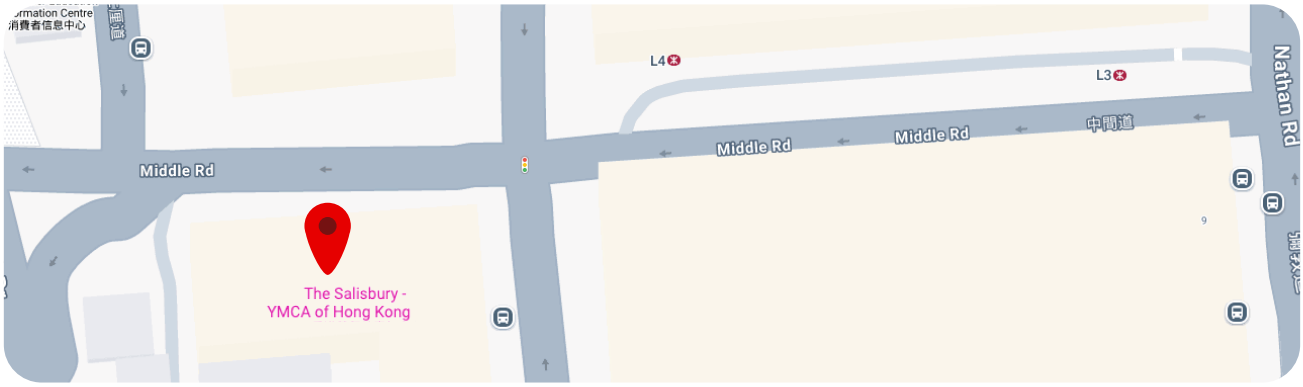
- Ms. Joyce CHEUNG (Convener)
- Dr. Calvin YIP
- Ms. Chloe MO
- Dr. Eddy CHENG
- Ms. Erina CHOW
- Mr. Johnny LAM
- Ms. Magdalene POON
- Ms. Vera LAM

# Workshop Timetable and Venue

## 5 DEC Pre-conference Workshop

**TIME:** 08:45 am - 04:45 pm
**LOCATION:** **Function Room I,**
3/F South Tower, YMCA,
Tsim Sha Tsui, Kowloon,
Hong Kong

### Venue: The Salisbury - YMCA of Hong Kong



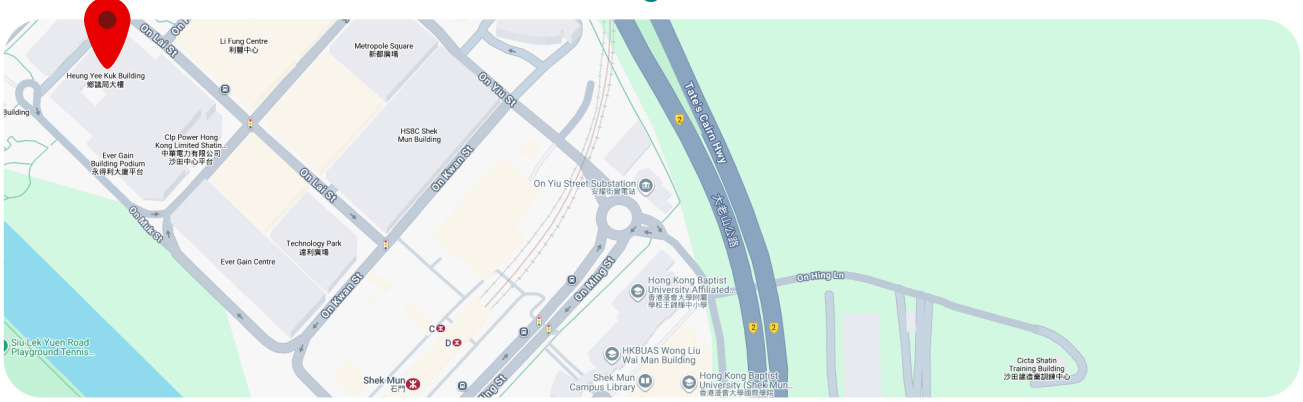

## 7 DEC Post-conference Workshop I

**TIME:** 08:45 am - 12:30 pm
**(Webinar)**

## 8-9 DEC Post-conference Workshop II

**TIME:** 08:45 am - 05:00 pm &
08:45 am - 05:10 pm
**LOCATION:** **Conference Room,**
Heung Yee Kuk New Territories
Building

### Venue: Heung Yee Kuk N.T.



# Workshop Rundown

## 5 DECEMBER

| Time | Presentation Topic | Speaker |
|---|---|---|
| 08:45 - 09:00 | Registration | |
| 09:00 - 09:15 | **Welcome, introductions and outline of the day**<br>**Sharing current knowledge of occupational formulation and measurable goals** | **Dr. Rob BROOKS** |
| 09:15 - 10:15 | **Situating occupational therapy in youth mental health and disabilities.**<br>**Using models of occupation to inform the occupational therapy process**<br>- Review of the Model of Human Occupation (MOHO)<br>- Review of the Canadian Model of Participation (CanMOP) | **Dr. Rob BROOKS** |
| 10:15 - 10:45 | Break | |
| 10:45 - 12:15 | **Introduction to Occupational Formulation**<br>- History and theoretical background<br>- Formulation and the occupational therapy process<br>- What assessments inform a formulation<br>- How to structure a formulation<br>- Examples of formulation with young people<br>- Reflections on own practice setting | **Dr. Rob BROOKS** |
| 12:15 - 13:15 | Lunch | |
| 13:00 - 13:15 | Sign in | |
| 13:15 - 14:15 | **Doing formulation**<br>- Opportunity to practise using case studies and a writing guide<br>- Formulation checklists | **Dr. Rob BROOKS** |
| 14:15 - 15:00 | **Application to practice and occupationalformulation.com**<br>- Lorrae Mynard, Monash University, Australia | **Dr. Rob BROOKS** |
| 15:00 - 15:30 | Break | |
| 15:30 - 16:30 | ***Measurable Goals***<br>- Performance-based vs. person-centred goals<br>- Ticks<br>- Practise writing goals | **Dr. Rob BROOKS** |
| 16:30 - 16:45 | **Summary and Q&A** | **Dr. Rob BROOKS** |

## 7 DECEMBER

| Time | Presentation Topic | Speaker |
|---|---|---|
| 08:45 - 09:00 | Registration | |
| 09:00 - 09:10 | **Introduction and Welcome** | **Ms. Megan CHENG**<br>**Mr. Nicolas WEBB** |
| 09:10 - 10:45 | **Introduction to Pearson Clinical's Paediatric Motor Assessments (BOT-3, MABC-3 & DASH-2)** | **Ms. Alyce SVENSK** |
| 10:45 - 11:00 | **Q&A** | **Ms. Alyce SVENSK** |
| 11:00 - 11:10 | Break | |
| 11:10 - 12:10 | **Introduction to the Bayley-4** | **Dr. Melissa J ROSS** |
| 12:10 - 12:30 | **Q&A** | **Ms. Megan CHENG**<br>**Mr. Nicolas WEBB**<br>**Ms. Alyce SVENSK**<br>**Dr. Melissa J Ross** |

# Workshop Rundown

## 8 DECEMBER

| Time | Presentation Topic | Speaker |
|---|---|---|
| 08:45 - 09:00 | Registration | |
| 09:00 - 09:05 | Welcome and Introduction to Workshop | Ms. Megan CHENG<br>Mr. Nicolas WEBB |
| 09:05 - 10:30 | Bayley-4 Preparing for an assessment administration guidelines and item type | Dr. Melissa J ROSS |
| 10:30 - 10:50 | Break | |
| 10:50 - 13:00 | Bayley-4 Scales: Cognitive & Language item administration & scoring | Dr. Melissa J ROSS |
| 13:00 - 13:30 | Break | |
| 13:25 - 13:30 | Sign in | |
| 13:30 - 15:00 | Bayley-4 Scales Language cont. & Motor | Dr. Melissa J ROSS |
| 15:00 - 15:05 | Break | |
| 15:05 - 17:00 | Group observation and Hand-scoring real time assessment - Infant | Dr. Melissa J ROSS |

## 9 DECEMBER

| Time | Presentation Topic | Speaker |
|---|---|---|
| 08:45 - 09:00 | Registration | |
| 09:00 - 10:30 | Short Welcome, Review Hand scoring from 8 December | Dr. Melissa J ROSS |
| 10:30 - 10:50 | Break | |
| 10:50 - 13:00 | Discuss infant scoring, Digital Administration & Scoring Group observation and digital scoring real time assessment - Preshooler | Dr. Melissa J ROSS |
| 13:00 - 13:30 | Break | |
| 13:25 - 13:30 | Sign in | |
| 13:30 - 15:15 | Group work: Raw score consensus & scoring, Social Emotional & Adaptive Behaviour Scales Small group work: Score SE and Adaptive Behaviour | Dr. Melissa J ROSS |
| 15:15 - 15:20 | Break | |
| 15:20 - 17:00 | Group work continues Discuss Preschooier (Oilvia), Reporting: Interpretation & Results | Dr. Melissa J ROSS |
| 17:00 - 17:10 | Finish & Closing Statement | Ms. Megan CHENG<br>Mr. Nicolas WEBB |

# Conference Timetable and Venue

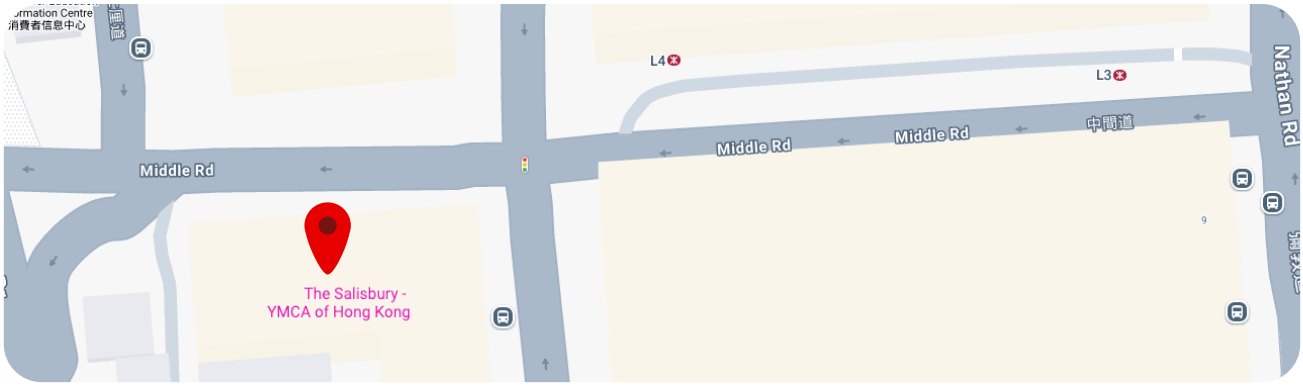
6 DEC

## Conference

**TIME:** 08:30 am - 05:30 pm

**LOCATION:** **The Grand Assembly Hall,**
4/F North Tower, YMCA,
Tsim Sha Tsui, Kowloon,
Hong Kong

## Venue： The Salisbury - YMCA of Hong Kong



# Conference Rundown

## 6 DECEMBER

| Time | Presentation Topic | Moderator |
|---|---|---|
| 08:30 - 08:45 | Registration | |
| 08:45 - 10:00 | **Free Paper Presentation I** | **Ms. Vera LAM** |
| 10:00 - 10:05 | Break | |
| 10:05 - 10:10 | *Welcome Speech*<br>**Ms. Sanne FONG**<br>Chairperson, HKOTA | |
| 10:10 - 10:25 | *Opening Speech*<br>**Prof. Stella CHENG**<br>President, APOTRG, WFOT | |
| 10:25 - 11:10 | **PLENARY I**<br>***"Building A Connected Future for OT and OT Leaders"***<br>**Ms. Samantha SHANN**<br>President, WFOT | **Dr. Calvin YIP** |
| 11:10 - 11:20 | Break | |
| 11:20 - 11:50 | **PANEL DISCUSSION**<br>***"Social Entrepreneurship & Occupational Therapy"***<br>**Ms. Samantha SHANN**, President, WFOT<br>**Ms. Karen YIP**, Senior OT, MHAHK<br>**Mr. Armstrong CHIU**, OT, HKSB<br>**Mr. Ricardo LAI**, Director, RRCS | **Ms. Sanne FONG** |
| 11:50 - 12:35 | **PLENARY II**<br>***"Technology and Social Entrepreneurship in Rehabilitation"***<br>**Prof. Chetwyn CHAN**<br>Vice-President, EdUHK | **Ms. Magdalene POON** |
| 12:35 - 14:00 | Lunch | |
| 13:45 - 14:00 | Registration | |
| 14:00 - 15:15 | **Free Paper Presentation II** | **Mr. Johnny LAM** |
| 15:15 - 16:00 | **THEMED SESSION**<br>***"Occupation & Mental Health for Students with Special Needs"***<br>**Dr. Rob BROOKS**<br>Head of School of Allied Health Professions and Midwifery, UOB | **Mr. Kason WONG** |
| 16:00 - 16:10 | Break | |
| 16:10 - 16:55 | **Student Project Presentation** | **Ms. Chloe MO** |
| 16:55 -17:05 | ***Award Presentation*** | |
| 17:05 -17:10 | *Closing Remarks*<br>**Dr. Alice CHAN**<br>OC Convener and CE Secretary, HKOTA | |

# List of Free Papers

## Free Paper I

| Code | Presentation Topic | Presenter | Affiliation |
|---|---|---|---|
| 25-O-001 | Predicting Factors of Successful Home Discharge among Older Adults with Fall-related Traumatic Brain Injury | Mr. YEUNG Lok Hang | Princess Margaret Hospital, Hospital Authority |
| 25-O-003 | An Independent Life Skills Program for Adults with Autism Spectrum Disorder: A Pilot Randomized Controlled Trial | Ms. Joy CHAN | Heep Hong Society |
| 25-O-008 | Transforming Community Occupational Therapy: The Impact of Telehealth Interventions | Ms. HO Pak Yee | United Christian Hospital, Hospital Authority |
| 25-O-012 | A Pilot Study on the Effectiveness of A Smart OT Delirium Program Leveraging Advanced Technologies for Delirium Patients | Ms. Corinna YUEN | United Christian Hospital, Hospital Authority |
| 25-O-026 | A Randomized Controlled Trial on the Effectiveness of ISBT-Bowen Therapy in Patients with Fibromyalgia | Ms. NG Po Chu | Prince of Wales Hospital, Hospital Authority |
| 25-O-028 | Evaluating Effectiveness of Soft Robotic Bilateral Hand Therapy on Functional Recovery in Acute and Subacute Stroke Patients: A Pre-Post Analysis | Ms. LI Yuen Man | United Christian Hospital, Hospital Authority |

## Free Paper II

| Code | Presentation Topic | Presenter | Affiliation |
|---|---|---|---|
| 25-O-007 | People-Centered Care: Enhancing Engagement and Treatment Compliance through A New Behavioral Activation Program in Psychiatric Day Hospital | Mr. Angus CHEUNG | United Christian Hospital, Hospital Authority |
| 25-O-011 | The Effects of Mindfulness-Based Music Therapy (MBMT) on Prefrontal Functional Connectivity in Healthy Young Adults Using Functional Near-Infrared Spectroscopy (fNIRS) | Mr. Armstrong CHIU | The Hong Kong Societ for the Blind |
| 25-O-022 | Development of AI-Assisted Video Identification of Executive Functioning Impairment in Cooking Activity Analysis in Older Adults with Mild Cognitive Impairment | Ms. YU Yee Ting<br>Ms. Celine ZHENG<br>Ms. TAM Hiu Ching | Hong Kong Polytechnic University |
| 25-O-027 | Effectiveness of Exergaming in Enhancing Functional Performance among Elderly with Sarcopenia - A Pilot Study | Ms. LEUNG Sze Man | United Christian Hospital, Hospital Authority |
| 25-O-029 | Virtual Reality Training: An Innovative Approach to Aid Geriatric Fall Prevention and Empowerment | Ms. WAN Chi Ting | Princess Margaret Hospital, Hospital Authority |
| 25-O-030 | Telehealth Cognitive Rehabilitation for Patients with Severe Mental Illnesses (SMI): Combination of HAGO Cognitive Apps and Compensatory Cognitive Training (CCT) | Ms. LAU Ching Man | Shatin Hospital, Hospital Authority |

# List of e-Posters

| Code | Topic | Author | Affiliation |
|---|---|---|---|
| 25-P-002 | Fall Prevention Program in Enhancing Knowledge, Attitudes and Practices among Patients in In-patient Orthopaedic Rehabilitation: A Pilot Study | **Ms. TSE Ka Yin** | Tai Po Hospital, Hospital Authority |
| 25-P-003 | Impact of Recovery Oriented Practice on Functional Outcomes for Psychiatric Day Hospital Service Users | **Mr. Angus CHEUNG** | United Christian Hospital, Hospital Authority |
| 25-P-004 | Evaluating the Effect of A Multi-Domain Group-Based Cognitive Rehabilitation Program for Mild Cognitive Impairment: Outcomes on Quality of Life, Cognitive Function and Functional Status | **Ms. TSOI Uen Shan** | Princess Margaret Hospital, Hospital Authority |
| 25-P-012 | Integrating Technology in Cognitive Rehabilitation: A 'Brain-Smart' Program for Subacute Stroke Patients | **Ms. MOK Wai Sum** | United Christian Hospital, Hospital Authority |
| 25-P-015 | Effectiveness of Internet-Based Self-Help Money Management Program in Improving in Financial Self-Efficacy and Anxiety among People with Mental Illness: A Randomized Controlled Trial | **Ms. LIU Ming** | Baptist Oi Kwan Social Service |
| 25-P-016 | Exploring the Physical and Psychological Impact of Scuba Diving Program in Severe Visual Impairment | **Mr. CHIU Yik Ho** | International Association of Hand-in-hand Divers (Hong Kong) |
| 25-P-017 | Adaptive 3D printed Depth Gauge for People with Visual Impairment in Inclusive Scuba Diving to Enhance Safety | **Mr. CHIU Yik Ho** | International Association of Hand-in-hand Divers (Hong Kong) |
| 25-P-018 | Use of Therapeutic Horticultural Activities as A Mean of Occupational Therapy (OT) Intervention to Enhance Functional Performance and Wellbeing of Elderly Patients with Cognitive Impairment (CI) in North Lantau Hospital (NLTH) | **Ms. CHEUNG Man Ching** | North Lantau Hospital, Hospital Authority |
| 25-P-019 | Pilot Study-Evaluating the Effectiveness of Mental Imagery as An Adjunctive Therapy on Improving Upper Limb Function for Patients with Cerebrovascular Accident | **Ms. CHAN Pak Ching** | Princess Margaret Hospital, Hospital Authority |
| 25-P-020 | Correlation of Self-Compassion, Cardiac Symptoms and Psychological Well-being among People with Cardiac Conditions | **Mr. HO Pak Ching** | Prince of Wales Hospital, Hospital Authority |

## List of e-Posters

| Code | Topic | Author | Affiliation |
|---|---|---|---|
| 25-P-022 | Feasibility and Acceptability of Dementia Caregiver Educational Program | Mr. Michael LEI | The Hong Kong Polytechnic University |
| 25-P-023 | "Empowering Change": Evaluation of Group-Based Lifestyle Redesign Loveliving 2.0 Programs in Community Psychiatric Services in Hong Kong | Mr. CHENG Hiu Fu | Tai Po Hospital, Hospital Authority |
| 25-P-024 | Evaluation for Children's Executive Functioning: Insights from A Scoping Review | Ms. TAM Ka Yan | The Hong Kong Polytechnic University |
| 25-P-025 | Tongue Thickness in Older Adults with Sarcopenia and Visual Impairment: A Pilot Study | Mr. Armstrong CHIU | The Hong Kong Society for the Blind |
| 25-P-026 | Integrated Career Continuum Program (ICCP): Enhancing Efficiency and Efficacy of Community Vocational Transition for People with Mental Illness | Ms. SO Ying Hei | Tai Po Hospital, Hospital Authority |
| 25-P-027 | Recovery Pattern and Functional Outcomes After Reverse Total Shoulder Arthroplasty: The Role of Occupational Therapy in Early Rehabilitation Phase | Ms. Mavis LEE | Caritas Medical Centre, Hospital Authority |
| 25-P-031 | Pilot Analysis of Risk Drill: Supplementary Training for Newly Recruited Occupational Therapists in Community Psychiatric Service | Mr. Jonathan CHEUNG | Tai Po Hospital, Hospital Authority |
| 25-P-032 | Enhancing Aging-in-Place for Older Adults with Cognitive Impairment: An Occupational Therapy-Led Model Integrating Gerontechnology and Medical Social Collaboration | Ms. TANG Ka Hei | Tuen Mun Hospital, Hospital Authority |
| 25-P-033 | Huangtu Occupation Study: Enabling Occupation Performance for Health and Well-Being in Community OT | Dr. Teresa CHIU | Huangtu Occupation Study Group |
| 25-P-034 | Integrated Dance Program on Fall Prevention among Community-Dwelling Older Adults | Ms. YIM Wan Chee | HK Registered Occupational Therapist, Centre for Community Culture Development, Hong Kong |

# Speaker and Moderator

## Plenary Speaker

**Ms. Samantha SHANN**
President, WFOT

**Prof. Chetwyn CHAN**
Vice-President, EdUHK

## Themed Speaker

**Dr. Rob BROOKS**
Head of School of Allied Health Professions and Midwifery, UOB

## Invited Speaker

**Ms. Karen YIP**
Senior OT, MHAHK

**Mr. Armstrong CHIU**
OT, HKSB

**Mr. Ricardo LAI**
Director, RRCS

## Moderator

**Ms. Vera LAM**
Assistant Professor of Practice, HKPU

**Dr. Calvin YIP**
Associate Professor (Occupational Therapy), TWC

**Ms. Magdalene POON**
Senior Occupational Therapist, KCH

**Ms. Sanne FONG**
Senior Lecturer I, EdUHK and Chairperson, HKOTA

**Mr. Johnny LAM**
Assistant Professor of Practice, HKPU

**Mr. Kason WONG**
Advanced Practice Occupational Therapist, PYNEH

**Ms. Chloe MO**
Senior Lecturer II, EdUHK

## Plenary Speaker

### Ms. Samantha SHANN

President, World Federation of Occupational Therapists

### Biography

Samantha is the President of the World Federation of Occupational Therapists (WFOT), a Board Member for the International Society of Wheelchair Professionals (ISWP) and a member of the Steering Committee for the World Health Organisation's World Rehabilitation Alliance (co-chair for the Workforce workstream).

Samantha graduated as an occupational therapist in 1992 and has worked internationally in a wide range of practice and education settings in low, middle and high-resourced settings.

Presently based in the UK, Samantha practices as an occupational therapist and is a Director of The Occupational Therapy Service, a private occupational therapy service providing rehabilitation and consultancy services. Her clinical background covers mental health, rehabilitation with older adults and developing community-based rehabilitation programmes. For 18 years Samantha worked in higher education specialising in interprofessional learning, fieldwork placements, and curricula design.

She has over 20 years' working to effect change at government, institutional and service level with expertise in organisational management including service delivery and design within the rehabilitation field. Samantha is frequently invited to speak internationally and regularly provides expertise and mentorship on leadership, advocacy and service development.

Samantha is highly respected by her peers and is a Fellow of the Royal College of Occupational Therapists (UK).

# Plenary Speaker

## Topic

**The World Federation of Occupational Therapists (WFOT); Building A Dynamic and Globally Connected Profession**

## Abstract

The World Federation of Occupational Therapists (WFOT) is the global representative body for the profession and has been in official relations with the World Health Organization (WHO) since 1959. As the world and its health landscapes continue to evolve, occupational therapists must anticipate and respond to emerging global challenges to ensure the relevance and resilience of the profession.

Aligned with the congress theme "Enhancing Health and Well-being through Occupational Therapy," this presentation will highlight WFOT's leadership and advocacy initiatives designed to enhance the visibility, credibility, and impact of occupational therapy worldwide. It will explore WFOT's engagement with member organisations, governments, and United Nations agencies, including the World Health Organisation (WHO), to promote occupational therapy's distinct contribution to global health and well-being.

The session will also reflect on the importance of advocacy as a shared responsibility within the profession, demonstrating how collective action can strengthen influence and foster sustainable change. Drawing on regional and international perspectives, it will examine strategies for building strong professional networks and collaborative partnerships that recognise diversity and inclusivity across contexts.

Central to the presentation is the role of mentorship in cultivating leadership. Using practical examples and insights from work across government, education, organisational, and service-level development, Samantha will explore how mentorship and collaboration can empower future leaders to meet the evolving needs of the populations we serve.
Ultimately, this presentation aims to inspire a shared vision for a dynamic, inclusive, and transformative profession, one that celebrates diversity, nurtures leadership, and continues to shape global health and well-being.

## Plenary Speaker

### Prof . Chetwyn CHAN

Vice-President (Research and Development)
Peter T. C. LEE Endowed Chair of Psychology,
Chair Professor of Psychology,
The Education University of Hong Kong

### Biography

Professor Chetwyn CHAN is Vice President (Research and Development) and Peter T. C. LEE Chair Professor of Psychology. He obtained a PhD in educational psychology in 1995 from the University of Alberta, Canada. Professor CHAN has been an Elected Fellow of the American Psychological Association since 2008 and a Fellow of the Hong Kong Psychological Society since 2007.

In 2008, in recognition of his contribution to psychology and rehabilitation sciences, Professor CHAN received the Global Leadership in Rehabilitation Science Award from Virginia Commonwealth University in the United States. In 2011, he received the Alumni Honour Award from the University of Alberta in recognition of his influence in research and education development in rehabilitation in Asia. In 2018, Professor CHAN and his research team won the First Prize in Science and Technology from the Chinese Association of Rehabilitation Medicine on post-stroke cognitive assessment and intervention innovation. In 2019, his research team won the Second Class State Scientific and Technology Progress Award from the State Council of the People's Republic of China for integrating Chinese medicine into innovative post-stroke rehabilitation. In 2025, Professor CHAN has received the Second-class Award of the 9th Round Higher Education Outstanding Scientific Research Output Awards (Humanities and Social Sciences) from the Ministry of Education (MoE) of the People's Republic of China and the Second-class Award of Science and technology progress award from Fujian Province.

Professor CHAN's research work focuses on exploring mechanisms underlying human learning, particularly perceptual and cross-modal learning employing brain imaging, electroencephalograms, and behavioural methods. He also applies the mechanisms to understand the behaviours of people with disabilities and older individuals, and design interventions to enhance the functional capabilities of these individuals. He has published more than 200 research papers and secured more than $50 million in competitive research and development grants. Professor CHAN is the chief specialty editor of Frontiers in Rehabilitation Science and an associate editor of Journal of Sports and Health Science. He currently leads the longevity, life and career development across the life span research clusters.

# Plenary Speaker

## Topic

**Technology and Social Entrepreneurship in Rehabilitation**

## Abstract

In this presentation, Prof. Chan will introduce the role of rehabilitation in promoting sustainable development goals (SDGs) of #3 health and well-being and #11 sustainable cities and communities. Occupational therapy discipline has placed itself in an ideal position to play such role by deploying technology and social entrepreneurship when delivering hospital- and community-based services. Prof. Chan will illustrate potential applications of a few inventions primarily by The Education University of Hong Kong researchers to benefit client groups of different ages and with special needs. For children, the two technological inventions tackle visual and auditory challenges by leveraging artificial intelligence and system integration. For adults, the AI-based system improves management of injured workers. For older adults, the digital cognitive assessment enhanced with eye-tracking and chatbot-based counselling for health promotion improve test accuracy and treatment effects in the community-settings. Challenges and opportunities for practitioners to collaborate with researchers in the knowledge transfer process will be discussed.

## Themed Speaker

### Dr. Rob BROOKS

Head of School of Allied Health Professions,
Midwifery and Social Work,
Faculty of Health & Social Care,
University of Bradford

## Biography

Dr Rob BROOKS is the Head of School of Allied Health Professions and Midwifery and an Associate Professor of Occupational Therapy at the University of Bradford.

Rob is a collaborative and experienced healthcare educator, researcher, and leader with a passion for improving health outcomes through evidence-based practice and student experience through innovation in education.
His teaching interests are occupational science, complex therapy interventions and qualitative research and his research is in the fields of children and young people, neurodisability, mental health and occupational formulation.
Rob has an interest in teaching and learning approaches, particularly problem-based learning. He has secured funding for academic projects and research and his work has contributed to advancing practice and education locally, nationally, and internationally.

Rob serves on an editorial board, and is an experienced external advisor, examiner and research supervisor. Supporting his teaching and research Rob has published in books and journals and has been delighted to work with colleagues from the UK, Sweden, Canada and Australia and speak nationally and internationally.

## Topic

**Occupation and Mental Health for Students with Special Needs**

## Abstract

Children are growing up in environments that are richer in opportunity than ever before, but also more pressured, more fragmented, and, for some, less participatory. Children and young people with neurodevelopmental disabilities have poorer education, health and life outcomes and there are more children than ever at risk of or experiencing mental health difficulties.

We need to rethink how we diagnose, measure and provide interventions for mental health conditions in children with neurodevelopmental disabilities. We must separate neurodevelopmental disorders from mental illness, and we should understand mental wellbeing on a continuum that incudes flourishing in the context of a mental illness.

Occupational therapists must prioritise occupation and participation-oriented approaches as a means of supporting mental wellbeing. This involves prioritizing participation-centered assessment and researching well-designed interventions that are embedded in real-world contexts. The current evidence for occupational therapy interventions to improve children's mental health is limited but there is emerging research and some exciting future directions.

# Invited Speaker

## Ms. Karen YIP

Senior Occupational Therapist,
The Mental Health Association of Hong Kong

Ms. Karen YIP, the senior occupational therapist from the Mental Health Association of Hong Kong. She was gradated from the Hong Kong Polytechnic University Occupational Therapy program in 2005, and obtained her Master degree in Health Services Management and Master of Business Administration from PolyU in 2013 and 2016. She also get an award of Professional Diploma in occupational safety and health from the City University of Hong Kong in 2022. She had servedas the occupational therapist in different non-government-organizations especially in the rehabilitation service. Clients with intellectual disabilities, physical disabilities and mental illnesses in hostels, day training centre, shelter workshop, support employment and outreach team were her serve targets in past. She started her management career in service development for mental disabilities since 2020, provided sharing and professional training for public in increasing the understanding and support for people with disabilities."

## Mr. Armstrong CHIU

Occupational Therapist I, Residential Services,
The Hong Kong Society for the Blind

Mr. Armstrong CHIU Tat San is an Occupational Therapist at The Hong Kong Society for Blind's Residential Services. He specializes in co-create rehabilitation for elderly individuals with sight loss, particularly integrating advanced technologies like augmented reality (AR), virtual reality (VR), and brain stimulation therapies (rTMS/tDCS) into practice. His expertise spans geriatric/psychogeriatric care, cognitive training, dysphagia management, low-vision rehabilitation and healthcare management.

CHIU is also a Clinical Educator for occupational therapy programs at several universities (HK PolyU, USC, Tung Wah College). He leverages extensive clinical experience gained previously at Hong Kong's Hospital Authority. A key focus is pioneering interprofessional research with local and international partners, concentrating on low-vision rehab, cognitive interventions, dysphagia, and adaptive tech for the elderly.

His research is highly extensive, with 13 articles on low vision and over 80 project outcomes published in conference internationally. He has successfully secured 32 charity-funded grants to support his groundbreaking work in rehabilitation and assistive technologies. CHIU advocates strongly for technology (AR/VR, wearable neurofeedback, fNIRS neuroimaging) to enhance independence and quality of life for people with sight loss.

# Invited Speaker

## Mr . Ricardo LAI

Director, Rica Rehabilitation and Consultancy Service Limited

Mr. Ricardo LAI has a distinguished career in rehabilitation consultancy and extensive involvement in the training and development of healthcare professionals. As a director and chairman of several organizations, he plays a crucial role in shaping healthcare education and policies, particularly in elderly care and women's associations. His commitment to education is evident in his roles as a clinical educator and instructor, where he works to enhance the skills and knowledge of future healthcare providers. Rich in experience and leadership, Mr. LAI's contributions have greatly impacted the fields of health care and community services.

Position: Director of Rica Rehabilitation and Consultancy Services Limited
Chairman: iPassion Limited

Professional Affiliations
Co-opted Member: HKQF-CITAC - Elderly Care Services Industry Training Advisory Committee
Industry Advisor: Hong Kong Elderly Services Association
Honorary President: Hong Kong Beauty and Health Association, Federation of Hong Kong Island Women's Associations (2018 - Present), and Hong Kong Professional Training Association
First Chairman: Greater Bay Area Youth Association

Educational Roles
Clinical Educator: Occupational Therapy at Hong Kong Polytechnic University
Adjunct Lecturer: Nursing Preliminary Course at Open University
Registered Instructor: Employees Retraining Board (ERB)
Training Instructor: Hong Kong Federation of Women (2006 - Present), Tuen Mun Federation of Women (2006 - Present), New Territories Federation of Societies Retraining Centre, Evangelical Lutheran Church of Hong Kong (Instructor Training - ERB Courses) and Haven of Hope Christian Service (Instructor Training)

Free Paper I 25-O-001

# Predicting Factors of Successful Home Discharge among Older Adults with Fall-related Traumatic Brain Injury

YEUNG LH(1), FOK TY(1), YEUNG C(1), LAW WY(1) and WONG YCJ(1)
(1) Occupational Therapy Department, Princess Margaret Hospital

## Background
Fall is a prevalent cause of injury among community-dwelling older adults, leading to a substantial decline in self-care ability and quality of life. The incidence of fall-related traumatic brain injury and its associated hospitalization rate has increased rapidly. Functional decline and prolonged hospitalization pose unique challenges for patients and their families. Occupational Therapy plays a pivotal role in facilitating patients' successful transition from hospital to home. By understanding the predicting factors of successful home discharge, Occupational Therapists could thereby implement tailored interventions to enhance patients' discharge readiness. This study aims to identify the factors that predict or correlate with successful home discharge among older adults with fall-related traumatic brain injury.

## Methods
This study is a longitudinal cohort study among 85 community-dwelling older adults aged 65 or above. All subjects were admitted due to fall-related traumatic brain injury and were referred to Occupational Therapy for rehabilitation. The impact of 10 relevant factors, including sex, age, living situation, availability of caregiver, dementia history, confusion, presence of intracranial hemorrhage, premorbid functional status, cognitive function and independence in ADL, measured by Modified Barthel Index (MBI), was investigated. Multivariate Logistic Regression and Point-Biserial Correlation were used for statistical analysis.

## Results and Findings
The mean age of the patients was 77.3 years old. 77.6% of the patients were discharged home successfully. Among the 10 factors analyzed, independence in ADL at discharge and availability of caregiver were significantly associated with successful home discharge. Lower level of independence in ADL (OR, 0.900; 95% CI, 0.855-0.948; P<0.001) and unavailability of caregiver at home (OR, 0.037; 95% CI, 0.004-0.361; P=0.005) increased the likelihood of institutional care. All patients with MBI score ? 75 were successfully discharged home regardless of caregiver availability, whereas caregivers were necessary for those discharged home with MBI score < 70. There was also a significant correlation between cognitive function and discharge destination, rpb(39)=-0.336, p=0.036.

## Conclusions
In conclusion, independence in ADL and availability of caregiver are two crucial factors that predict successful home discharge for older adults with fall-related traumatic brain injury. Better cognitive function also correlates with successful home discharge. Healthcare professionals should consider patients' ADL performance, caregiver availability and cognitive function when triaging patients for home discharge. MBI score ? 75 could be considered as an indicator for triaging patients for home discharge, and caregiver availability should be taken into consideration if patients' MBI score is < 70.

## Keywords
Traumatic brain injury, Predicting factors, ADL, MBI, Fall

Free Paper I 25-O-003

# An Independent Life Skills Program for Adults with Autism Spectrum Disorder: A Pilot Randomized Controlled Trial

**Cheri YUEN and Joy CHAN**
Occupational Therapy Department, Heep Hong Society

## Background
The transition from adolescence to adulthood presents various difficulties for people with Autism Spectrum Disorder (ASD), which often lowers their quality of life. According to research, one key factor that significantly promotes well-being of adults with ASD is daily living skills (DLS). The Occupational Therapy Department of Heep Hong Society (HHS) has developed an Independent Life Skills Program (ILSP) in response to the limited programs designed to enhance DLS of adults with ASD. The fourteen weekly two-hour session ILSP comprises of six topics: personal management, home management, money management, meal preparation, community integration, and self-management. Evidence-based interventions such as self-regulated learning, self-management, video modelling and lifestyle redesign are incorporated. The present study aimed to test the feasibility and acceptability of the ILSP, and to pilot-test its effectiveness for adults with ASD in Hong Kong.

## Methods
Individuals who aged eighteen or above, diagnosed with ASD based on DSM-V and with borderline to normal IQ were recruited from HHS. Participants were randomized into the treatment group and the waitlist control group by a computer-generated random sequence. Outcome measures included the Lawton Instrumental Activities of Daily Living Scale - Hong Kong version, IADL Competency Test, IADL Confidence Questionnaire and Goal Attainment Scale. Pre- and post- assessments were conducted by blind assessors. The ILSP was conducted by well-trained occupational therapists who co-designed the program and regular supervisions throughout the program were provided to secure the consistency of delivery of the program.

## Results and Findings
Thirty-two participants were enrolled, with sixteen randomly assigned to the treatment group and sixteen to the waitlist control group. One participant from each group dropped out, with a retention rate of 96.77%. An average attendance rate of 92.86% was attained. 93.33%-100% of participants expressed satisfaction with the program contents in the acceptability survey. No significant differences were found in the demographics and baseline variables of all outcome measures between the treatment and waitlist control groups.
Statistical analyses found that participants of the treatment group achieved a significantly better outcomes in terms of DLS knowledge ($p<0.001$), DLS skills ($p<0.001$) and attainment of DLS-related goals ($p<0.001$) than the participants of the waitlist control group with a large effect size ($r=0.82$). Following treatment, the participants within the treatment group demonstrated significant improvements in all DLS outcomes.

## Conclusions
This pilot RCT provides strong evidence in the feasibility of the ILPS with high average attendance rate and low dropout rate. High acceptability was also demonstrated with 100% of the participants expressing willingness to recommend to the program to others. The ILPS was highly effective in enhancing independent living for adults with ASD in Hong Kong. Future research with a larger sample size from a diverse population was suggested to generalize the applicability of the ILSP on individuals with ASD.

## Keywords
Independent Life Skills, Autism Spectrum Disorder, Occupational Therapy, Quality of Life, Adults

Free Paper I 25-O-008

# Transforming Community Occupational Therapy: The Impact of Telehealth Interventions

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(1) Occupational Therapy Department, United Christian Hospital

## Background
Occupational therapy serves a vital role in enhancing patients' safety and independence through tailored interventions. Specifically, timely advice on home modifications significantly improves patients' functional status. Traditionally, occupational therapists (OTs) conduct on-site home visits as part of community occupational therapy (COT). With advancements in technology, telehealth has emerged as an alternative way of delivering COT services. This innovative approach maintains service effectiveness while reducing labour intensity compared to conventional method. This program evaluates the efficiency and effectiveness of telehealth COT services (tele-COT).

## Methods
During March to October 2024, OTs conducted tele-COT sessions with patients and caregivers through the HAGO telehealth platform. Patients from United Christian Hospital (UCH) medical wards and EMW, who were indicated for home assessment and modification, aids prescription or fall prevention education were eligible for recruitment. All participants received at least one pre-discharge tele-COT session, with an additional follow-up post-discharge session (either tele-COT or conventional COT) if indicated. The program efficiency was evaluated through assessing the average waiting time and re-admission rate of patients, along with intervention time and OTs manpower usage when compared with conventional COT. The program's effectiveness was assessed through satisfaction surveys completed by patients, caregivers, and OTs.

## Results and Findings
A total of 28 cases were recruited, with 20 pre-discharge and 8 post-discharge tele-COT sessions. Among them, 89% (n=25) were from medical wards and 11% (n=3) from EMW. Improvement of efficiency in both patients and OTs aspects were noticed. From the patients' perspective, reductions in average waiting time and similar re-admission rate were noted in tele-COT compared to conventional COT. The average waiting time for pre- and post-discharge tele-COT was decreased by 36% (12 days to 7.65 days) and 14% (32.3 days to 27.8 days) respectively. A shorter waiting time for pre-discharge tele-COT was expected to facilitate earlier discharges during in-patient phase, as patients could receive home modification advice and prepare home environment sooner. Moreover, the 28-day hospital re-admission rates was reduced by 16% (0.29 to 0.25) for tele-COT cases compared to conventional COT cases. From the OTs' perspective, intervention time in tele-COT was reduced. Each tele-COT session saved approximately 50% of intervention time by reducing travel and administrative time. Consequently, this enhanced the efficiency of COT services provision. Furthermore, satisfaction surveys revealed that patients, caregivers and OTs had positive opinions towards the program. Patients and caregivers rated a total score of 4.4 out of 5, expressing appreciation for the timely interventions. Meanwhile, OTs also rated a total score of 4.4 out of 5, acknowledging the efficiency gained and manpower saved. However, some highlighted that cases requiring complicated home modifications, may still require conventional approach.

## Conclusions
In conclusion, the program was beneficial for both OTs and patients, facilitating timely interventions and early discharge while saving manpower. Furthermore, this innovative approach aligns with ongoing development of smart hospital. Overall, tele-COT represents an alternative to deliver COT services, while conventional COT remains crucial in addressing diverse types of cases. In the future, the program should include a larger patient cohort to gather additional feedback and identify areas for improvements.

## Keywords
Efficiency in healthcare, Community Occupational Therapy (COT), Telehealth service, Smart hospital, Home modification

Free Paper I 25-O-012

# A Pilot Study on the Effectiveness of A Smart OT Delirium Program Leveraging Advanced Technologies for Delirium Patients

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## Background
Delirium is a common neuropsychiatric syndrome in acute hospital settings, which often leads to adverse effects on patients' cognitive and functional performance. Conventional Occupational Therapy (OT) management for delirium includes interventions such as multisensory stimulation, cognitive stimulation, activities of daily living (ADL) training and other reality-engaging activities. These interventions are proven to be clinically effective, yet primarily uni-directional and labor-intensive.
In light of technological advancement, OT begins to incorporate smart devices into patient care, including smart tablets and interactive robots, which provide interactive and patient-centered training, while also improve training efficiency by automating tasks that were previously performed manually.

## Methods
"Smart OT Delirium Program" aims to investigate the effectiveness of using additional smart and advanced rehabilitation training devices, in conjunction with conventional therapy, on improving the delirium features, cognitive function and ADL function of delirium patients.
"Smart OT Delirium Program" utilized various technology-assisted rehabilitation and non-immersive Virtual Reality (VR) training devices to provide "smart delirium" management for patients. These devices included smart cognitive training tablets, interactive attention training devices and multisensory stimulation therapeutic robots.
This study adopted a pre-post clinical outcome measure design. Patients referred to OT with delirium features and 4 A's Test (4AT) ? 4 or Abbreviated Mental Test (AMT) ?6 between March and November 2024 were eligible for recruitment. All participants received 3-5 sessions of 15 minutes "Smart OT Delirium Training". 4AT was selected to access delirium features; AMT, digit span forward test and Hong Kong Montreal Cognitive Assessment (HK-MoCA) were selected to evaluate cognitive functions; and Modified Barthel Index (MBI) was selected to access functional performance. All pre-post outcomes data comparisons were conducted using the Wilcoxon Signed-Rank Test.

## Results and Findings
A total of 37 patients were recruited for the study, with 21 patients transferred to other hospitals or discharged. 16 patients completed the program, with a mean age of 87.5 years old (SD=7.22), in which 31.3% of these patients had previously been diagnosed with dementia. The average number of sessions attended were 4.13 (SD=0.83).
After completing the program, improvement in delirium features and overall cognitive function were noted. A significant improvement in mean 4AT by 2.25 score (Z=2.934, P=0.003) were noted. Improvement in alertness and orientation sub-scales were observed in most of the cases.
For cognitive function, a significant improvement in mean digit forward span test by 1.437 score (Z=-2.429 P=0.017) and mean HK- MoCA by 1.875 score (Z=-2.691, P=0.007) were noted. Improvement in sustained attention, language and orientation sub-scales were observed in most of the cases.
Improvements were also noted in mean AMT by 1.188 score (Z=-1.867, P=0.066) and mean MBI by 3.125 score (Z=-1.886, P=0.066), they were approaching statistical significance.

## Conclusions
In conclusion, "Smart OT Delirium Program" has been shown to be clinically beneficial to delirium patients with an enrichment of training varieties, enhancement of patient-centred practice and improvement of rehabilitation efficiency. This approach is expected to be a future trend in OT for delirium care, however, larger scale studies with control groups are recommended for future research.

## Keywords
Delirium Management, Smart Technologies, Advanced Technologies, Smart Hospital

Free Paper I 25-O-026

# A Randomized Controlled Trial on the Effectiveness of ISBT-Bowen Therapy in Patients with Fibromyalgia

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(3) Department of Anaesthesia and Intensive Care, The Chinese University of Hong Kong
(4) Department of Rehabilitation Sciences, The Hong Kong Polytechnic University

## Background
The multi-disciplinary team at the pain clinic, which includes Occupational Therapists (OT), provides comprehensive care for patients suffering from Fibromyalgia Syndrome (FMS). These patients often experience significant challenges related to chronic pain, functional capacity and overall well-being. Evidence suggests that central pain sensitization in FMS may be influenced by chronic fascial inflammation and impaired healing process. The International School of Bowen Therapy (ISBT)-Bowen therapy is a gentle, non-invasive myofascial release technique that involves specific cross-fibre movements applied over muscles, tendons, ligaments, and fascia. This technique is believed to stimulate blood and lymphatic flow, thereby supporting the body's natural healing processes.

## Methods
Objective:
The objective of this study was to determine the effectiveness of ISBT-Bowen therapy in reducing pain, enhancing functional performance, alleviating sleep and mood disturbances, and improving quality of life in patients with fibromyalgia.
Methodology:
The study was a prospective randomized controlled trial (RCT) (Clinical trial no.: NCT04554784). It was conducted in collaboration with the Pain Management Centre of the New Territory East Cluster. Seventy-eight patients diagnosed with Fibromyalgia Syndrome (FMS) were randomly assigned to receive either Bowen therapy (BT) (n=40) or conventional treatment (CT) (n=38) between September 2020 and December 2023. The BT group underwent eight sessions of Bowen therapy over 12 weeks within the Department of Occupational Therapy at Prince of Wales Hospital, while the CT group continued their usual care without Bowen therapy. The primary outcome was pain intensity measured by the Numeric Rating Scale (NRS). Secondary outcomes included limb endurance, sleep disturbance, psychological distress, activity interference, and quality of life. Data collection occurred at baseline, end of intervention, and at 12-week follow-up. Generalized estimating equations (GEE) were employed to assess differential changes in outcome measures between groups over time.

## Results and Findings
The median age of participants was 58 years ( interquartile range [IQR]: 50–62 ), with a predominance of female subjects (87%, n=68). GEE analysis indicated no statistically significant differences in pain intensity between groups across time points ($p=0.519$). However, the BT group showed significant improvements after Bowen therapy, including increased lower extremity endurance ($p < 0.001$) and dominant arm endurance ($p = 0.020$), decreased pain-related activity interference ($p = 0.005$), reduced sleep disturbances ($p < 0.001$), lowered anxiety ($p = 0.003$) and depression levels ($p = 0.007$), as well as enhanced mental health-related quality of life ($p = 0.002$).

## Conclusions
In addition to the multidisciplinary team approach, the integration of ISBT-Bowen therapy into the routine pain management services provided by Occupational Therapists may facilitate improvements in limb endurance, reduce activity-related interference, and alleviate disturbances in sleep and mood among patients with Fibromyalgia Syndrome (FMS), thereby contributing to enhanced overall well-being.

## Keywords
Fibromyalgia, Myofascial pain syndrome, ISBT-Bowen therapy, Fibromyalgia Syndrome, RCT

Free Paper I 25-O-028

# Evaluating Effectiveness of Soft Robotic Bilateral Hand Therapy on Functional Recovery in Acute and Subacute Stroke Patients: A Pre-Post Analysis

LI YM (1), CHAN KK (2), MOK WS (3), HO WS (4), LEUNG CF (5), YIP CT (6), LEE HS (7)and HUI N (8)
Occupational Therapy Department, United Christian Hospital

## Background
Upper limb hemiparesis following stroke is prevalent and leads to difficulties in an individual\'s functional independence. The recovery of hand function is, therefore, an important topic in stroke rehabilitation. One neoteric and potential approach is robotic-assisted training. Soft robotic glove serves as a portable and inexpensive training equipment, providing real-time sensorimotor feedback to stimulates a patient\'s motor return and motivation. Additionally, robots facilitate more intensive and manpower-saving training compared to conventional strategies. Bilateral hand training, focusing on repetitive practice of bilateral arm movements in symmetrical or alternating patterns, has been found to enhance the coupling effects and restoration of interhemispheric transcallosal inhibition. As a result, more neural networks can be established for successful motor execution and bimanual coordination in activities of daily living (ADL). In this study, we aim to investigate the effectiveness of soft robotic bilateral hand therapy in stroke patients.

## Methods
This study adopted a pre-post-study design. Patients with cerebrovascular accidents (CVA) and Functional Test for the Hemiplegic Upper Extremity (FTHUE) level 1 to 4, admitted to UCH acute stroke unit and rehabilitation ward from March to December 2024, were eligible for the recruitment. All patients received 10 sessions of soft robotic bilateral hand training. A pneumatic soft robotic glove system was employed, assisting the healthy hand in driving the affected hand to move synchronously. Task-oriented ADL tasks, such as holding a bottle, were also integrated. During the program, participants also received functional training to further promote their independence in ADL. Pre- and post-outcome measurements, including hand grip strength, FTHUE, Fugl-Meyer Assessment-Upper Extremity (FMA-UE), Motricity Index-Arm, and Modified Barthel Index (MBI), were adopted. For data analysis, paired sample T-tests (for hand grip) and Wilcoxon Signed-Rank Tests (for FTHUE, FMA-UE, Motricity Index-Arm, MBI) were utilized.

## Results and Findings
23 stroke patients (mean age = 64.00, SD = 13.62) were recruited and completed the robotic program. Their baseline mean FTHUE level was 1.91 (SD= 0.95). They completed the 10-session training on average on post-admission day 22.91. For upper limb function, significant improvements were found in all outcome measures, including hand grip strength ($t = 3.66$, $p = 0.001$), FTHUE ($z = 3.62$, $p < 0.001$), FMA-UE ($z = 3.92$, $p < 0.001$), and Motricity Index-Arm ($z = 3.72$, $p < 0.001$). For the functional aspect, a significant increase in MBI ($z = 4.20$, $p < 0.001$) was also observed. In conclusion, significant improvements in hand function and ADL ability were demonstrated in acute and subacute stroke patients after completing bilateral robotic hand therapy.

## Conclusions
Clinically, Soft robotic bilateral hand therapy provides intensive evidence-based rehabilitation with less supervision from a therapist for stroke with severely impaired upper limb function. Moreover, the training is cost-effective and can be applied to more potential patients at a reasonable cost. Yet, a larger sample size with control group is suggested for future studies. Besides, a long-term follow-up studies from in-patient to out-patient phrase is also suggested.

## Keywords
Stroke Rehab, Smart Hospital, Robotic, Cerebrovascular Accident (CVA)

Free Paper II 25-O-007

# People-Centered Care: Enhancing Engagement and Treatment Compliance through A New Behavioral Activation Program in Psychiatric Day Hospital

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(2) Department of Psychiatry, United Christian Hospital

## Background
Majority of clients attended Psychiatric Day Hospital (PDH) with predominant negative symptoms (PNS) in schizophrenia often experience reduced motivation, social withdrawal, and diminished emotional expression. The HOPE-behavioral activation program had been conducted by encouraging engagement in meaningful activities, improving social interactions, and enhancing overall functioning and quality of life at the Yung Fung Shee Memorial Centre (YFS) and the United Christian Hospital (UCH) Psychiatric Day Hospital (PDH). The HOPE program was built upon four essential pillars: Holistic care, Orientation to PDH, Positive Emotion, and Engagement.
This study evaluated the effectiveness of the HOPE program in improving functional outcomes and motivation to participate in PDH activities.

## Methods
From January 2024 to September 2024, 33 participants were recruited and completed the 12 weekly sessions integrating the HOPE principles with behavioral activation and modification techniques. Outcomes were measured using the Social and Occupational Functioning Assessment Scale (SOFAS) for occupational functioning, attendance records for compliance of engagement in PDH treatment, and the Short-Term Outcomes Recovery Indicator (STORI-30) for recovery staging change. The completed data set were analyzed using paired t-tests and the Wilcoxon signed-rank test for attendance rate comparisons. Qualitative feedback was collected from participants.

## Results and Findings
Significant improvements were observed across all measurements. In the occupational functioning aspect, there was improvement in SOFAS scores ($p<0.05$). Attendance rate changes could not be compared for the six newly admitted to PDH. Attendance rates for the remaining 24 participants showed a significant increase, with a Wilcoxon signed-rank test yielding a p-value of $<0.05$. Regarding recovery staging assessed by the STORI-30, 27.7% of participants advanced to the next recovery stage, while 66.6% maintained their progress. Participant feedbacks highlighted improved self-awareness of strengths and resources, a greater sense of belongings to PDH as an active member, and elevated sense of accomplishment upon completion of program.

## Conclusions
The findings from this study suggest that the HOPE behavioral activation program is an effective intervention for people with predominant negative symptoms in schizophrenia. The significant improvements in occupational functioning, attendance rates, and recovery staging highlight the program\'s potential to enhance the quality of life for participants. Furthermore, the qualitative feedback provides valuable insights into the personal growth and community engagement fostered through the program. Future research should continue to explore the long-term impacts of such interventions and their applicability across different disease groups, e.g. depression.

## Keywords
Predominant Negative Symptoms, Schizophrenia, Behavioral Activation, Psychiatric Day Hospital

Free Paper II 25-O-011

# The Effects of Mindfulness-based Music Therapy (MBMT) on Prefrontal Functional Connectivity in Healthy Young Adults Using Functional Near-Infrared Spectroscopy (fNIRS)

**CHIU ATS (1), YIP CCK (2), YIP BCB (3), CHAN SHW (4), YIN CQH (5), LI JWT (6), KUO MCC (7) and WONG WWS (8)**

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(8) School of Medical and Health Sciences (Occupational Therapy), Tung Wah College

## Background

Mindfulness-based interventions (MBIs) are well-established mind-body therapies for improving emotional regulation; however, the neurobiological mechanisms underlying their integration with music therapy remain underexplored. Existing studies predominantly rely on subjective scales, whereas functional near-infrared spectroscopy (fNIRS), a portable neuroimaging tool, enables real-time monitoring of prefrontal cortical activity, offering novel insights into the neural substrates of mindfulness-based music therapy (MBMT).

## Methods

Nine healthy young adults (age: 21.78 ± 3.74 years; education: 16.56 ± 2.40 years) underwent a single-session 45-minute MBMT protocol divided into four phases: resting, inspiration, enhancement, and mindfulness. A 15-channel fNIRS system (NIRSIT LITE) was employed to record prefrontal oxygenated hemoglobin (HbO) concentrations. Functional connectivity between channels was analyzed using Pearson correlation coefficients (r) and linear regression models ($p < 0.05$). The experimental protocol included mindful breathing, music-guided reflection, and movement exercises, with synchronized neural activity markers throughout the session.

## Results and Findings

Results demonstrated that MBMT significantly modulated prefrontal functional connectivity: 1) Mindfulness Phase: Strong correlations ($r > 0.8$) were observed between the dorsolateral prefrontal cortex (DLPFC) and prefrontal cortex (PFC) ($r = 0.884$) and between the left DLPFC and ventrolateral prefrontal cortex (VLPFC) ($r = 0.809$), indicative of selective neural circuit activation. 2 ? Phase-Dependent Dynamics: Neural synchrony progressively increased from resting (mean $r = 0.507$) to peak in the enhancement phase ($r = 0.702$; 77.14% of channel pairs significant), followed by a slight decline in mindfulness ($r = 0.576$; 56.19% significant). Zero-crossing rates further validated dynamic fluctuations, with resting phase signals showing the highest instability (0.0061 Hz) and inspiration phase the lowest (0.0024 Hz). 3) HbO Profiles: HbO concentrations during mindfulness (0.000228) were lower than in the inspiration phase (0.000240), yet enhanced functional connectivity patterns suggested efficient cognitive resource integration.

## Conclusions

This study provides direct neurophysiological evidence that MBMT differentially regulates prefrontal functional connectivity across intervention phases. Selective connectivity strengthening during mindfulness may reflect optimized attentional control and enhanced emotional processing efficiency. Future research should integrate multimodal neuroimaging (e.g., fMRI) and expand sample sizes to validate long-term intervention efficacy and individual-specific applications, advancing personalized mental health strategies grounded in neural mechanisms.

## Keywords

Functional near-infrared spectroscopy, Mindfulness intervention, Mindfulness-based music therapy, Prefrontal cortex, Brain connectivity

Free Paper II 25-O-022

# Development of AI-assisted Video Identification of Executive Functioning Impairment in Cooking Activity Analysis in Older Adults with Mild Cognitive Impairment

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## Background

Older adults at risks of mild cognitive impairment (MCI) are characterized by a progressive decline in executive functioning that impairs the ability to perform complex Instrumental Activities of Daily Living (IADLs) such as cooking. Cooking is a complex IADL task that demands high-level executive functions such as cognitive flexibility, inhibition and working memory. Traditional assessment methods by occupational therapists like direct observation in activity analysis are qualitative which lacks the objectivity to detect subtle deficits in mild stages of impairment. Technology-driven approaches, particularly those using artificial intelligence (AI) and markerless motion capture, offer a promising solution to develop more objective, efficient, and scalable tools for functional assessment. This study addresses the need for developing an AI-assisted video identification approach in activity analysis of food preparation to facilitate early cognitive impairment detection in community-dwelling older adults.

The primary objective was to evaluate the feasibility of using AI-assisted markerless motion capture (MMC) to detect executive function impairment in older adults with or without risks of mild cognitive impairment during food preparation.

## Methods

This cross-sectional study recruited 20 community-dwelling older adults (10 healthy controls, 10 with risks of MCI) aged above 65 from the Hong Kong Housing Society through mass screening.

Each participant prepared two standardized dishes in a simulated kitchen. Their movements were captured from different views using four synchronized iPad Pro devices equipped with a custom-developed markerless motion capture system. The system extracted 3D body-joint positions at 30 Hz to generate kinematic data. A three-step analysis was employed: 1) Trained occupational therapy students reviewed the videos to manually annotate executive functioning-related behavioral markers (e.g., sequencing errors, procedural deviations) and further validated by a registered occupational therapist to serve as ground truth; 2) The annotated behaviors and extracted kinematic features were used to train a a CNN-RNN hybrid model for action recognition and classification.; 3) Model performance was evaluated via leave-one-subject-out cross-validation, with sensitivity, specificity, F1-score, and Cohen\'s kappa for inter-rater reliability against therapists.

## Results and Findings

The trained CNN-RNN model demonstrated high performance in distinguishing among the two groups (healthy, at risks of MCI), achieving an overall classification accuracy above 90%. Analysis of the model revealed that the most significant indicators of executive function impairment were inefficient movement trajectories, irrelevant actions to cooking tasks, and a higher frequency of task sequencing errors. AI-generated probabilistic risk score for NCD showed strong, statistically significant positive correlation with clinical judgments of occupational therapists on video review.

## Conclusions

This study highlights the novelty of AI-assisted markerless motion capture for activity analysis as a feasible, sensitive tool for early identification of executive functioning of older adults at risk of MCI screened through everyday cooking tasks, overcoming limitations of traditional assessment approaches. The AI-assisted video capturing enables efficient and accurate detection in clinical and community settings. Future ecological studies could be done in tasks extended to home environments, longitudinal monitoring, and personalized interventions in occupational therapy practice.

## Keywords

Mild Cognitive Impairment, Artificial Intelligence, Instrumental Activities of Daily Living, Motion Capture, Occupational Therapy

Free Paper II 25-O-027

# Effectiveness of Exergaming in Enhancing Functional Performance among Elderly with Sarcopenia - A Pilot Study

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## Background
Sarcopenia is a geriatric syndrome that raises increasing concern due to its positive correlation with adverse health outcomes, significantly associated with fall risk and lower health-related quality of life. Exercise is the gold standard for preventing and managing sarcopenia. Exergame, a blend of innovation and entertainment in physical exercise within a virtual setting may enhance motivation in elderly to engage in physical training. A 12-sessions exergame program in addition to conventional training was piloted among patients with possible sarcopenia at Yung Fung Shee Geriatric Day Hospital since August, 2024.
This study aimed to evaluate the clinical effectiveness of using exergame-based training delivered via The Nintendo Switch Ring Fit Adventure in enhancing functional performance and quality of life among elderly with possible sarcopenia in a geriatric day hospital setting.

## Methods
A randomized control pilot study was conducted from August to December 2024 at Yung Fung Shee Geriatric Day Hospital.
Twenty-five patients (17 females and 8 males, mean age= 78.72 ±7.21 years) were recruited to participate in this 12 sessions study. All participants met the criteria of 1) handgrip strength <28 kg for male and 2nd percentile in HK-MoCA. Twelve participants were assigned to conventional training group and thirteen participants were in exergame group which they participate exergame training in addition to conventional training. The exergame comprised six different functional skill sets, including twisting torso, front press, overhead press, bow pull, stepping and legs lift, with training intensity tailored to each participant\'s functional capacity.
Outcome measures included SARC-F, a self-reported screening tool for risk of sarcopenia and measuring muscle strength through power grip. Functional performance was measured using Fall Efficacy Scale (FES) for fall efficacy and ADL independence through Modified Barthel Index (MBI), while quality of life was evaluated with quality of life for sarcopenia (SarQOL) questionnaire.

## Results and Findings
No significant between-group difference was found at baseline. Both groups of participants exhibited significant improvement in all outcome measures. Moreover, a significant difference was shown in power grip, SARC-F, fall efficacy and SarQOL between two groups, showing that incorporating exergame is more effective than conventional training alone. Feedback indicated that 92% of participants found the exergame experience satisfying, enjoyable, and motivating for training.

## Conclusions
Incorporating exergaming into conventional training can be beneficial for elderly with possible sarcopenia, leading to improvement in muscle strength, ADL independence, fall efficacy, and quality of life. The positive feedback from exergame participants reflected its potential to enhance patient's engagement in training. Future studies with larger sample sizes and extended training durations are warranted.

## Keywords
Sarcopenia, Exergame, Elderly

Free Paper II 25-O-029

# Virtual Reality Training: An Innovative Approach to Aid Geriatric Fall Prevention and Empowerment

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## Background
Falls, the leading cause of injury in older adults, are a significant public health issue due to the high incidence and recurrence. Potential complications, including functional dependence and fear of falling, can lead to physical frailty and institutionalization. Emerging evidence has shown the potential benefits of virtual reality (VR) in rehabilitation. This pilot study investigates the effects of VR training on fall prevention in terms of functional independence and self-perceived confidence in avoiding falls.

## Methods
26 fall patients were recruited by convenience sampling from the Occupational Therapy Department of Geriatric Day Hospital in Lai King Building since October 2024. This pilot study compared the treatment effects of control group – receiving 60-minutes conventional rehabilitation per session, to the VR group – receiving 40-minutes of conventional rehabilitation and 20-minutes of VR training with Kine-Sim system. The Kine-Sim system is equipped with bilateral motion platforms to provide simulated synchronized movements. Real-life activities, like taking public transportation, hiking, dancing, and dual-task cognitive games, together with the simultaneous or reciprocal platform movements, were carefully tailored by occupational therapists to best match patients' routines, interests, and deficits. All patients received an average of 20 treatment sessions. Outcome measures for functional independence – Modified Barthel Index (MBI) and self-perceived confidence in avoiding falls – Fall Efficacy Scale (FES) were assessed at baseline and upon discharge.

## Results and Findings
The VR group illustrated a significant improvement in MBI ($p = 0.02$) and significant improvement in FES ($p = 0.012$). The control group demonstrated similar results for MBI ($p = 0.02$) but showed an insignificant improvement in FES ($p = 0.108$). Compared to the control group, the VR group exhibited better improvements in MBI (mean difference: 5.9 vs 11.5) and FES (mean difference: 4.8 vs 7.1), though these differences were not statistically significant (MBI: $p = 0.053$, FES: $p = 0.252$).

## Conclusions
The integration of VR training into geriatric fall rehabilitation has shown to be more motivating and may enhance clinical effectiveness compared to conventional rehabilitation alone, particularly in empowering patients to maintain functional independence and develop confidence in avoiding falls. This study will continue to gather additional data to further explore these effects, and future research with larger sample sizes will be essential to validate these preliminary findings and assess long-term benefits.

## Keywords
Fall, Virtual Reality, Rehabilitation, Fall preventiona

Free Paper II 25-O-030

# Telehealth Cognitive Rehabilitation for Patients with Severe Mental Illnesses (SMI): Combination of HAGO Cognitive Apps and Compensatory Cognitive Training (CCT)

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**Background**
People with severe mental illness (SMI) often experience cognitive deficits that impair occupational functioning and increase the burden on caregivers and healthcare providers. Occupational therapists play a key role in cognitive rehabilitation through cognitive training and strategy coaching. With growing demand for remote delivery of cognitive training to improve service accessibility and efficiency, along with the launch of HAGo, a cross-clusters collaboration among Occupational Therapy (OT) Departments of the Hospital Authority was established to implement a pilot program on telehealth cognitive rehabilitation. The program aimed to (1) assess the effectiveness of tele-mode cognitive training in enhancing cognitive performance and occupational functioning and (2) evaluate patient acceptability and satisfaction with telehealth services.

**Methods**
The pilot targeted outpatients or Psychiatric Day Hospital patients with SMI and subjective cognitive complaints. Using a quasi-experimental design, participants were divided into two groups via convenience sampling. Both groups received face-to-face goal-setting and booster sessions. The treatment-as-usual (TAU) group underwent 20 sessions of on-site computer-assisted cognitive training and nine group-based cognitive compensation training (CCT) sessions, focusing on metacognition, goal setting, and compensatory strategies for daily tasks. The experimental group received the same CCT content via Zoom and 18 home-based training sessions using HA Go cognitive apps (three times weekly). Cognitive performance and occupational functioning were measured using the Brief MATRICS Consensus Cognitive Battery (B-MCCB) and Social and Occupational Functioning Assessment Scale (SOFAS). A satisfaction survey was also conducted.

**Results and Findings**
The pilot was conducted from September 2022 to February 2025 across seven hospitals, involving 48 participants (22 TAU, 26 experimental). Group attendance averaged over 80%, with over 70% completing the prescribed training. For the demographic data, there were no significant difference in age (Mann-Whitney U=245.500, Z=-0.840, p=0.401), gender (Chi-Square=1.813, p=0.178), diagnosis (Chi-Square=0.000, p=1.000) and educational level (Chi-Square=1.276, p=0.259). For baseline characteristic of the mean of t-scores of B-MCCB, there is no significant difference in pre-scores ($F(1,46)=2.297$, $p=0.136$ and post-scores ($F(1,46)=3.992$, $p=0.52$), as well as the mean of SPFAS in pre-score ($F(1,46)=2.462$, $p=0.123$) and post-score ($F(1,46)=2.741$, $p=0.105$), between two groups. In two-way repeated ANOVA, there was no significant time x group interaction effect in cognitive performance (B-MCCB) ($F(1,46)=1.331$, $p=0.255$) and occupational functioning (SOFAS) ($F(1,46)=0.000$, $p=1.000$), but a significant time effect in cognitive performance (B-MCCB) ($p=0.001$) and occupational functioning (SOFAS) ($p=0.001$). For paired t-tests of both TAU group and experimental group, statistically significant increases in cognitive performance (B-MCCB) (TAU group: $t21=-1.732$, $p<0.001$, experimental group: $t21=-4.062$, $p<0.001$) and occupational functioning (SOFAS) (TAU group: $t25=-3.245$, $p<0.001$, experimental group: $t25=-3.536$, $p<0.001$). About 80% of participants were satisfied with the program content and arrangement, 69% reported subjective cognitive improvements, 70% reported reduced travel time, and 60% appreciated the flexible scheduling of the telehealth program.

**Conclusions**
The telehealth cognitive rehabilitation program effectively improved cognitive performance and occupational functioning in patients with SMI, and is as effective as face-to-face training. High feasibility and positive patient feedback support the use of a hybrid delivery model to enhance patient experience and operational efficiency.

**Keywords**
Telehealth, Cognitive rehabilitation, HA Go

E-Poster 25-P-002

# Fall Prevention Program in Enhancing Knowledge, Attitudes and Practices among Patients in In-Patient Orthopaedic Rehabilitation: A Pilot Study

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**Introduction:**

Falls among elderly are significant public health concerns and have been reported as a major factor restricting independence in Activities of Daily Living and causing institutionalisation in elderly. Occupational therapists play an important role in educating elderly the risks contributing to falls and preventive strategies. A fall prevention program was proposed in in-patient phase to enhance patients' knowledge, attitudes and foster behavioural changes in reducing fall risks.

**Methods:**

- **Objective:** To evaluate the effectiveness of the fall prevention program to patients in in-patient orthopaedic rehabilitation.
- **Inclusion Criteria:** Patient admitted to Tai Po Hospital with recent fall admission and cut-off >7th percentile in HK-MoCA
- **Exclusion Criteria:** Patients with visual or / and hearing impairments
- **Outcome Measures:**
  - Post survey based on the Knowledge-Attitude-Practice (KAP) Model
  - Pre-post knowledge quiz
  - Satisfaction survey towards the program

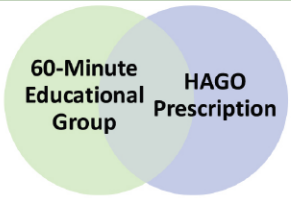

Figure 1: Fall Prevention Program

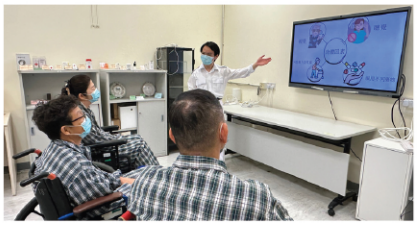
Figure 2: Fall Prevention Educational Group

**Results and Findings:**

- A total number of 26 patients (women: 22, men: 4) were recruited from Orthopaedic ward in Tai Po Hospital from 2 July 2024 to 30 November 2024.
- The mean age was 74.8 years old (SD±10.0).
- High satisfaction levels were reported by all participants (see Figure 3).
- **Knowledge:** Wilcoxon Signed-Ranks test was used. Participants showed significant improvement in all prevention knowledge ($p<0.001$) (see Figure 4).
- **Attitude:** All participants agreed that fall can lead to serious health problems. 88% of the participants agreed that fall can be prevented (see Figure 5).
- **Practices:** All participants would consider changing their habits to reduce the risk of fall (see Figure 6). They also expressed willingness in home modification to prevent fall (see Figure 7).
- Results have shown that increasing knowledge on fall prevention promotes attitude and behavioural changes.

Figure 3

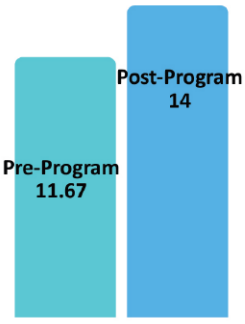

Figure 4: Mean Score of Knowledge Quiz (Pre and Post-Program)

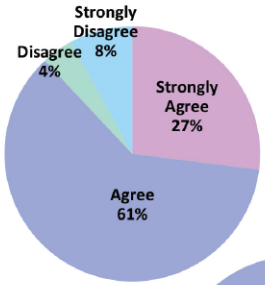

Figure 5

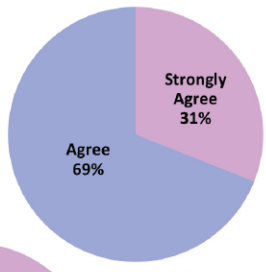

Figure 6

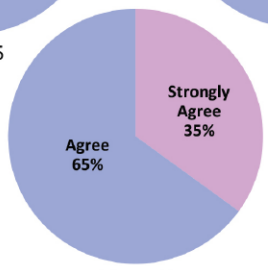

Figure 7

**Conclusion:**

The fall prevention program has shown to be effective in empowering participants with knowledge, attitudes and practices in fall prevention. For further enhancement, prescription of fall prevention home program, involvement of carers will be implemented.

E-Poster 25-P-003

# Impact of Recovery Oriented Practice on Functional Outcomes for Psychiatric Day Hospital Service Users

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**Background**
The paradigm shift towards recovery-oriented practice (ROP) in mental health care has been significant since its introduction to Kowloon East Cluster psychiatric service in 2010. ROP focuses on empowering individuals, fostering their autonomy, and promoting recovery through collaborative and person-centered approaches. This shift has catalyzed changes in treatment modalities within psychiatric day hospitals, leading to the use of service users centered assessment- Client's Assessment of Strength, Interests and Goals (CASIG) (Wallace, 2001) and establishment of modular-based interventions in 2016. These interventions prioritize respect for human choices and encourage shared decision-making among service users and mental health professionals (Davidson, 2017). This study aims to explore the effectiveness of ROP within the context of day hospital settings, specifically examining its impact on service users' social and occupational functioning and overall volition.

**Objective(s)**
The primary objectives of this study are 1) to evaluate the functional outcomes of service users in terms of social and occupational functioning, 2) to assess the overall volition of service users during their engagement in recovery-oriented practice.

**Methodology**
*Participants*
From 2021 to 2023, a total of 33 service users from Yung Fung Shee Psychiatric Day Hospital (YFSPDH) who had engaged with recovery-oriented practice services for a minimum of six months and could complete pre-post assessments were recruited for this study.

*Data Collection*
Data on social and occupational functioning and volition were collected at two time points: baseline (0-month) and after six months of participation in the ROP. The Social and Occupational Functioning Assessment Scale (SOFAS) (Goldman 1992) was utilized to evaluate social and occupational functioning, while the Volitional Questionnaire (VQ) (Chern, 1996) was employed to measure overall volition.

*Statistical Analysis*
Pre- and post-test data were analyzed using the Wilcoxon Signed Rank Test to determine the statistical significance of changes in the measured outcomes.

**Results**
The analysis revealed statistically significant improvements in the functional outcomes of service users following their engagement in recovery-oriented practice. Specifically, there was a notable enhancement in social and occupational functioning ($p < 0.001$) and overall volition ($p < 0.05$). The findings of this study demonstrate the positive impact of recovery-oriented practice on the functional outcomes of service users in psychiatric day hospitals. The significant improvements in social and occupational functioning indicate that ROP effectively supports individuals in their recovery journey, facilitating greater engagement in community and occupational activities. Moreover, the enhancement of overall volition highlights the importance of empowering service users, enabling them to take an active role in their recovery process.

**Conclusion(s)**
This study provides compelling evidence for the positive effects of recovery-oriented practice on social and occupational functioning among service users in psychiatric day hospitals. The results advocate for the continued implementation of recovery-oriented approaches in mental health care, emphasizing their role in promoting functional improvement and overall volition within this population.

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E-Poster 25-P-004

# Evaluating the effect of a multi-domain group-based cognitive rehabilitation program for mild cognitive impairment: Outcomes on quality of life, cognitive function and functional status

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## Introduction

Occupational therapists in Hong Kong's public hospitals face challenges in delivering timely, quality cognitive rehabilitation due to high demand and resource constraints. In view of that, we reorganised our services in Princess Margaret Hospital with a novel modified 6-week multi-domain cognitive rehabilitation group program (MCIG). Structured home programs were highlighted to maximise effect within limited resources. This study evaluates the feasibility and effectiveness of the MCIG program as a potential cost-effective solution to the above-mentioned challenges.

## Objective

To evaluate the effect of the MCIG program on patients with MCI in
(1) cognitive function
(2) functional status
(3) quality of life

## Methodology

- Retrospective pilot study
- "Pre-test" &"Post-test" study design
- Data from participants aged ≥65 who attended ≥4 sessions from August 2024 to February 2025 were analyzed (n=21).

Outcome measures:

1. Montreal Cognitive Assessment Hong Kong version (HK-MoCA)
2. World Health Organization Five Well-being Index (WHO-5)
3. Activities of Daily Living Questionnaire (ADLQ)
4. Self-rated Questionnaire

Wilcoxon Signed Ranks Test was adopted in data analysis.

## Multi-domain MCIG program


Modes of service delivery:

1. Educational sharing
2. Interactive activities
3. Skills practice
4. Structured home programs including paper-and-pencil tasks and categorised mobile applications

## Result : Standardized Assessment

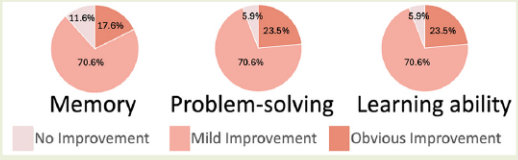
- Quality of Life & Mental Well-being
  Significant improvement in WHO-5 ($p \leq 0.05$)
- Cognitive Function
  Increase in median score in HK-MoCA
- ADL & IADL function
  Decrease in median score in ADLQ

| | Pre (n = 21) * | Post (n = 21) * | P-value |
|---|---|---|---|
| HK-MoCA | 17(14.5, 20.5) | 18(15.5, 20.5) | 0.617 |
| WHO-5 | 52(48, 66) | 66(52, 75) | 0.029 |
| ADLQ | 20.137(9, 24.6) | 17.949(10.6, 14.6) | 0.256 |

*Data is presented in median (interquartile range)

## Result : Self-rated Questionnaire

- >70% participants rated "Mild Improvement" in the following 3 areas:




- Participants rated high level of satisfaction and degree of happiness with median rating of 8 out of 10. They showed increased understanding of cognition with median rating of 7 out of 10.

## Conclusion

The intensive MCIG program significantly improved patients' quality of life. It was further supported by the high self -rated scores for happiness, satisfaction and understanding of cognition, which might indicate the value of the program in fostering patients' self-efficacy and sense of control over own condition beyond purely restoring cognitive function.
Moreover, potential benefit towards cognitive function and functional status were shown despite the insignificant results of outcome measures. This might be limited by the small sample size and lack of review on long term effect.
Overall, this pilot study serves as a crucial preliminary foundation for further program modification and future research practice.

E-Poster 25-P-012

醫院管理局 HOSPITAL AUTHORITY
基督教聯合醫院 UNITED CHRISTIAN HOSPITAL

# Integrating Technology in Cognitive Rehabilitation: A 'Brain-Smart' Program for Subacute Stroke Patients

F_P9.28

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Department of Occupational Therapy, United Christian Hospital

## INTRODUCTION

Post stroke cognitive impairment is a common yet often overlooked consequence of stroke, significantly affecting the quality of life of survivors and their families. Aiming to provide comprehensive stroke rehabilitation and following "SMART Hospital" strategic development, OT department UCH designed "Brain-Smart" cognitive rehabilitation program with smart training device for subacute stroke patients. This smart cognitive rehabilitation offers three main advantages, including personalization, engagement and data tracking. Early detection of post stroke cognitive impairment allows occupational therapists to personalize and tailor training that address specific deficits. Incorporation of interactive elements in smart training motivates and engages patients in stroke rehabilitation while it also provides real-time feedback and progress tracking, helping both patients and therapists to monitor improvement and adjust strategies accordingly.

## OBJECTIVES

To investigate the effectiveness of "Brain-Smart" cognitive rehabilitation program with smart training devices, in conjunction with conventional OT therapy, on improving the cognitive function of subacute stroke patients.

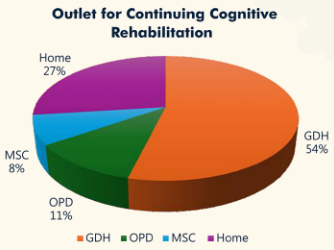
## METHODOLOGY

Recruitment of patients commenced in the rehabilitation ward from March to November 2024. Patients with first episode of stroke and Hong Kong version of Montreal Cognitive Assessment (HK-MoCA) result within two to sixteen percentile received 10 sessions of stroke cognitive rehabilitation (five days a week for two weeks) and each session lasted for 45 minutes. Two smart interactive training devices (Pablo and tablets with cognitive training software) were employed. During the program, patients also received conventional cognitive training to further promote their cognition. HK-MoCA and Digit Span Test Backward were adopted to measure the pre and post cognitive function whereas Modified Barthel Index (MBI) and Lawton Instrumental Activities of Daily Living (Chinese Version) were used to measure the functional performance. Wilcoxon signed rank test was utilized in data analysis.

| Outcome Measure | Baseline, Mean | Post Treatment, Mean (After 10 sessions) | Difference Mean | Sig. (two-tailed) |
|---|---|---|---|---|
| HK-MoCA | 14.62 | 16.54 | +1.92 | 0.013 |
| Digit Span Backward | 2.02 | 2.63 | +0.61 | 0.003 |
| Modified Barthel Index (MBI) | 58.15 | 76.46 | +18.31 | <0.001 |
| Lawton Instrumental Activities of Daily Living Scale | 9.73 | 11.68 | +1.95 | 0.01 |

## RESULTS

A total of 23 stroke patients with mean age 73.2 completed the "Brain-Smart" program. The recruited patients had statistically significant improvement in HK-MoCA total score by 1.92 ($p=0.013$) and Digit Span Test Backward score by 0.61 ($p=0.003$). In particular, patients' delayed recall ($p=0.04$) and orientation sub score ($p=0.009$) improved significantly. In addition to HK-MoCA total score, there was also significant improvement in HK-MoCA indication from mild cognitive impairment level at baseline to mild neurocognitive disorder level after training ($p=0.004$). In functional aspect, significant improvement was found in both mean MBI by 18.31 score ($p<0.001$) and mean Lawton by 1.95 score ($p=0.01$). 53.8% of recruited patients continued stroke cognitive rehabilitation in geriatric day hospital while 11.5% and 7.7% of patients continued rehabilitation at home under medical-social collaboration (MSC) and out-patient setting respectively upon their discharge.




## CONCLUSION

"Brain-Smart" cognitive rehabilitation program brought benefits on patients' global cognition and functional performance through enhancing neuroplasticity. Furthermore, timely in-patient cognitive rehabilitation and health education can empower patients and caregivers to navigate the challenges of recovery from stroke and lead to improved functional independence and higher engagement in rehabilitation journey. A larger sample size with control group will provide more insight for future studies.

Kowloon East Cluster

E-Poster 25-P-015

# Effectiveness of internet-based self-help money management program in improving in financial self-efficacy and anxiety among people with mental illness: A randomized controlled trial

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## BACKGROUND

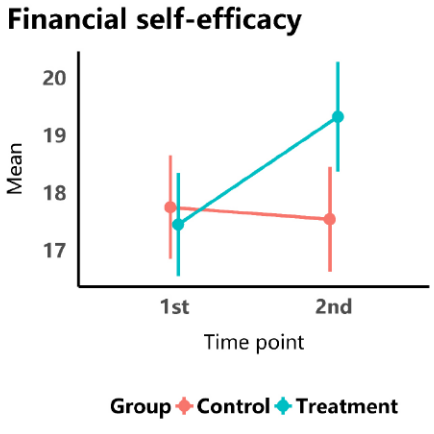
- Individuals with mental illness are at an increased risk of experiencing financial adversity.
- Effective money management is a crucial skill for individuals with serious mental illness (SMI), as it directly affects their quality of life and mental condition.
- This study examines the effectiveness of an online, self-paced money management training program, designed with the principles of the Model of Human Occupation (MOHO). The program aims to enhance financial self-efficacy and reduce anxiety, addressing the unique challenges faced by people with mental illness.

## METHODS

- A two-arm parallel randomized controlled trial was conducted to investigate the effectiveness of an internet-based self-help program for money management (MMP).
- Participants were randomly assigned to either the intervention or control group.
- The MMP consisted of a four-week program that focused on critical components of money management, including managing finances, developing money management skills.

## RESULTS

- Participant recruitment took place from October 2022 to July 2023, enrolling 155 eligible participants who completed baseline assessments.
- A multilevel model predicting financial self-efficacy showed that there was a significant group X time interaction effect at T1 (B = -2.23, $p < 0.005$, 95% CI = [0.96, 3.49]).
- Between-group comparisons revealed a significant group difference, with the intervention group showing higher financial self-efficacy at T1 ($t_{(238.41)} = 2.96$, $p < 0.005$, Cohen's $d = 0.87$, 95% CI = [0.71, 3.54]).




## DISCUSSION

- The majority of participants in our study exhibited high levels of motivation, a factor that diverges from real-life scenarios.
- Participants experienced technical difficulties during the online self-help MMP.

## CONCLUSIONS

- Online self-help MMP has proven effective for individuals with mental illness.
- With minimal therapist involvement, MMP can alleviate the workload of healthcare professionals.
- As a low-cost and highly accessible intervention, MMP can offer a viable option for individuals with mental illness who may be hesitant to seek in-person help.
- Future studies may explore the efficacy of MMP in specific mental health conditions.

E-Poster 25-P-016

25-P-016

# Exploring the Physical and Psychological Impact of Scuba Diving Program in Severe Visual Impairment

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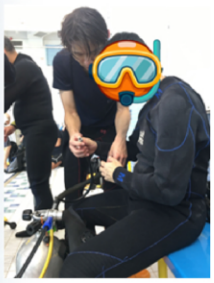
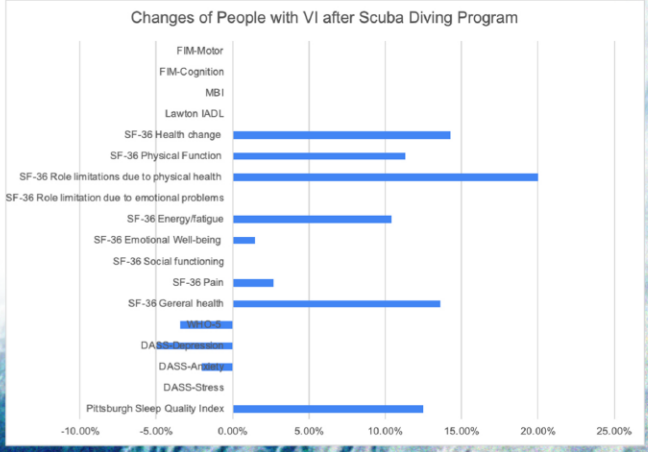
**Background** As society increasingly recognizes the importance of social inclusion, individuals with visual impairment are finding it easier to participate in various adventure activities. Among these activities, scuba diving has experienced the most significant increase in participation among individuals with visual impairment in recent years. Many studies revealed that scuba diving may offer physical and psychosocial benefits for people with physical and psychological disabilities, but the evidence for people with visual impairment (VI) is limited. This pilot study evaluated the feasibility and preliminary effects of a structured pool scuba diving training program for adults with significant VI.

**Methods** Seven adults with severe VI, recruited from the Hong Kong Network for the Promotion of Inclusive Society and medically cleared to dive, participated in monthly 3-hour pool scuba training sessions run by The International Association of Hand-In-Hand Divers (Hong Kong) from April 2025 over four months. Participants completed baseline assessments before training and post assessments after completing the program. Outcome measures included the Functional Independence Measure (FIM), Lawton Instrumental Activities of Daily Living (IADL) scale, SF-36 Health Survey, WHO-5 Well-Being Index, Pittsburgh Sleep Quality Index (PSQI), and the Depression, Anxiety, Stress Scales (DASS-21). Completion rates and changes in outcome measures were evaluated descriptively.



**Results** Four of the seven participants (57%) completed all four training sessions and both assessments. Among them, notable improvements were observed mainly on the SF-36: Role change due to physical health (Mean score increased 20%), Health change (increased 14%), General health (increased 14%) and PSQI (reduced 13% sleeping problems). Changes in other measures were smaller or inconsistent in this small sample. No participant reported adverse effect or injury during the




**Conclusion** Monthly pool diving training appears feasible for some adults with profound VI and may yield benefits in role changes, health and sleep quality. These preliminary findings support further investigation with a larger sample and optimized retention strategies. A second cohort of six visually impaired individuals is planned to join the training to expand evaluation of outcomes.

E-Poster 25-P-017

25-P-017

# Adaptive 3D printed Depth Gauge for People with Visual Impairment in Inclusive Scuba Diving To Enhance Safety

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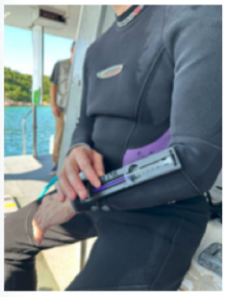
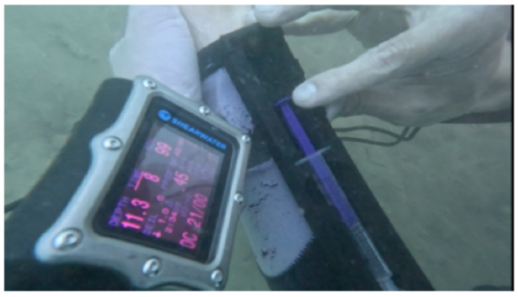
**Background** There is a growing number of visually impaired individuals exploring the underwater world through scuba diving. However, most of the existing scuba equipment is not user-friendly for people with visual impairment. Visually impaired divers typically rely on dive guides who signal depth and other information by touch (e.g., pinching to indicate approximate depth). These methods are imprecise, non-linear, and reduce the diver's autonomy and enjoyment of underwater exploration. Also they often have difficulty maintaining a 3-6 meter depth safety stop, a procedure used to reduce the risk of decompression sickness.

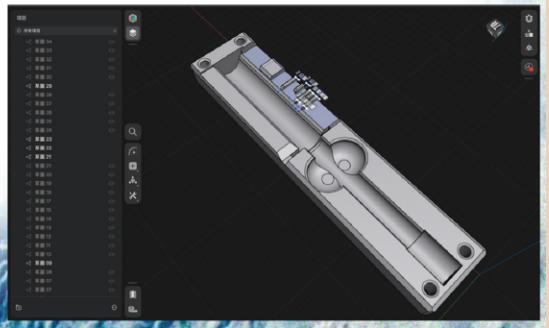
**Methods** A tactile depth gauge was designed by integrating a standard syringe with a custom 3D-printed device that functions as a tactile depth scale. External hydrostatic pressure pushes the syringe plunger into the barrel as depth increases; because ambient pressure rises by roughly 1 atmosphere per 10 m of seawater, plunger position can be mapped to depth. The syringe plunger total stroke length is 7.0 cm; measured correspondences are approximately: hydrostatic pressure of water at 3 meters depth equaled to syringe length 5.4 cm, 6 meters equaled to 4.4 cm, 10 meters equaled to 3.5 cm, 15 meters equaled to 2.8 cm. The device was designed with a software - Shapr3D and printed with a dual-extruder printer at 100 µm layer resolution using Acrylonitrile Styrene Acrylate (ASA) filament as ASA has excellent UV and weather resistance, good mechanical strength and low water uptake behavior. The printed device contains tactile ridges aligned to the plunger to form a physical depth scale. The assembly was tested to withstand at least 20 m water pressure. To reduce internal friction and improve repeatability, a light application of WD-40 was applied to the syringe barrel/plunger interface. The tactile depth gauge was attached with two rubber bands and strapped on diver's forearm..





**Results** Three visually impaired recreational divers trialed the device in ocean environment. All reported positive feedback in a questionnaire form: increased sense of autonomy, clearer interaction with the underwater environment, and greater enjoyment of the dive compared with traditional guide-dependent signaling.

**Conclusion** The 3D-printed tactile depth gauge integrated with a syringe offers a simple but reliable aid that improves the diving experience and also safety for scuba diver with visual impairment. Future work will refine durability and ergonomics and explore additional adaptive aids to further enhance independent underwater navigation and exploration.



E-Poster 25-P-018

# Use of therapeutic horticultural activities as a mean of Occupational Therapy (OT) Intervention to enhance functional performance and wellbeing of elderly patients with cognitive impairment (CI) in North Lantau Hospital (NLTH)

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## Introduction

Horticulture Therapeutic (HT) Group have been implemented for elderly patients with CI in NLTH OT department since 2015 and different HT activities, such as sowing, plant-cutting and cultivating, have been attempted throughout these years. It is believed that HT activities helps to increase patients with CI 's mental and physical functions, social interaction, and alleviating psychological symptoms, hence to supplement conventional cognitive rehabilitation. Therefore, a pilot program was implemented in 2024 in order to test out a newly refined program model and with the good will to determine the most effective means of therapeutic intervention for patient with CI.

## Methodology

MoCA was conducted for patient age 60 or above, referred to OT for cognitive assessment and training. Once patient was detected with CI (MoCA below 16th percentile), or subjectively complained of cognitive declines with expression of low mood (screened by Geriatric Depression Scale 4-item (GDS-4) - Cantonese Version > 0), they were invited to join an 8-sessions HT group. Various gardening activities were practiced and each patient was engaging at own functional level with progressive challenges offered in physical, cognitive and social aspects for enhancement of functions. Using plants in other therapeutic activities like handicrafts were also incorporated to improve their self-efficacy and instill happiness to them and transfer the graceful appreciation to their caregivers.

## Objectives

To evaluate the effectiveness and feasibility on the structured HT group for patient with CI, in different aspects including the cognitive function, hand function, self-care and level of psychosocial wellbeing

## Results

| Domains | Assessment Tools | Pre-test | Post-test | Outcome |
|---|---|---|---|---|
| Cognitive | Montreal Cognitive Assessment (MoCA) | 18.1 / 30 | 18.5 / 30 | ↑ |
| Hand function | 9-Hole Peg Test (9HPT) | | | |
| | - Left hand | 32.4 sec | 30.3 sec | ↑ |
| | - Right hand | 32.3 sec | 31.6 sec | ↑ |
| Self-Care | Modified Barthel Index (MBI) | 98 / 100 | 99/100 | → |
| Psychosocial | Visual Analogue Scale (From 0 – 6) | | | |
| | - Happiness | 3.6 / 6 | 4.9 / 6 | ↑ |
| | - Enjoyment | 3.6 / 6 | 3.8 / 6 | ↑ |
| | - Anxious | 2.7 / 6 | 1.7 / 6 | ↑ |
| Well-being | Wellbeing with Warrick-Edinburgh Mental Wellbeing Scale (WEMWBS) | | | |
| | - % Low Wellbeing | 22% | 11% | ↑ |
| | - % Moderate Wellbeing | 78% | 89% | ↑ |

Table 1: Summary of outcome measures in different domains, ↑ = improvement ; → = static ; and ↓ = declines.

A tailor-made HT group evaluation questionnaire was adopted to collect patient and caregivers' feedback after the program completion. Most of the participant agreed that the program could increase their awareness to the environment, provide opportunity in learning new things and increase participation in physical activities. More than half of participant agreed that the program could enhance their cognitive performance (attention, sequencing and problem solving) and psychosocial wellbeing (positive thinking, mood expression). Both patient & caregiver expressed positive attitude towards group-based activities and moderately satisfied with this program.

## Conclusion

The use of therapeutic horticultural activities as an OT intervention exhibited benefits in enriching patient's psychosocial wellbeing and function performance.

E-Poster 25-P-019

# Pilot Study-Evaluating the effectiveness of mental imagery as an adjunctive therapy on improving upper limb function for patients with Cerebrovascular Accident

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## Introduction:

Upper limb function impairment is often a major impairment seen in patients with **CVA**. **Mental imagery (MI)** is the mental rehearsal of a movement without performing the actual movement. It is generally held that there is brain activation after mental imagery. This study aims to evaluate the effectiveness of mental imagery as an adjunctive therapy in improving **upper limb function** for patients with CVA attending the GDH in Lai King Building.

## Method:

This is a randomized controlled study with newly diagnosed CVA patients actively attending the GDH. Upper limb functional assessments would be performed for both groups on week 1 and 4. In the control group, patients received conventional stroke rehabilitation along with a daily 30-minute usual upper limb home program prescribed by case therapists. For the experimental group, as an adjunctive treatment, participants received **a video of mental imagery** to guide their self-practice at home with a **log sheet** for re-enforcement. The video consisted of **4 movement-based tasks and 3 activities of daily living.** The treatment regimen was set as 2 sessions (~30 minutes) per day for 4 weeks. Study protocol was approved by Central Institutional Review Board in Sep 2023.

## Results:

17 Subjects were recruited from Nov 2023 to Feb 2024. No inter-group differences were found on the age and baseline assessments for primary and secondary outcome measure. Statistically significant improvement in hand function (WMFT) and self-care (MBI), were shown in both groups (Table 1). Whereas additional significant improvement (FTHUE-HK) was shown in experimental group. No significant difference was shown in between group comparison.

Table 1. Outcome measure of control and treatment group

| | Control group (n=9) | | | Treatment Group (n=8) | | | Between group | |
|---|---|---|---|---|---|---|---|---|
| | Baseline * | Outcome* | P value | Baseline * | Outcome * | *P* value | | *P* value |
| WMFT | 51 (53.5) | 55 (56.5) | 0.017 | 41.5(59) | 44.5(58.25) | 0.026 | WMFTΔ | 0.329 |
| ARAT | 44(55) | 45 (53.5) | 0.180 | 33(53.25) | 36 (52.25) | 0.180 | ARATΔ | 0.243 |
| FTHUE-HK | 3 (4.5) | 3 (5) | 0.083 | 4 (5.5) | 5 (4.75) | 0.025 | FTHUE-HKΔ | 0.796 |
| MBI | 76 (22) | 80 (22.5) | 0.012 | 67.5 (39.75) | 78 (23.25) | 0.028 | MBIΔ | 0.663 |

Abbreviations: WMFT- Wolf Motor Function Test, ARAT (Action Research Arm Test), FTHUE-HK-The Hong Kong version of the Functional Test for the Hemiplegic Upper Extremity, MBI- Modified Barthel Index
*Data expressed as Median (Interquartile range)
*p<0.05* set as significant values.

## Conclusion:

The study did not show a definite inferiority over conventional treatment. Mental Imagery may be an effective adjunctive treatment in stroke rehabilitation for improving hand function, especially for those with minimal or without active motor control. A larger sample size is required for a more detailed analysis.

First-person perspective Video instruction

*Scan me for instruction video!*

**7 MI tasks**

**4 single/ multiple joints movement**

- Shoulder flexion
- +Elbow flexion / extension
- + Wrist extension
- Forward Reaching

**3 activities of daily living**

- Drinking tea from cup
- Drinking soup with spoon from bowl
- Sorting pills to medication box

**Home program log sheet**

| 日期（星期） | 第一節訓練 | 第二節訓練 |
|---|---|---|
| （星期 ） | ✓ / X | ✓ / X |
| （星期 ） | ✓ / X | ✓ / X |
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E-Poster 25-P-020

# Correlation of Self-Compassion, Cardiac Symptoms and Psychological Well-being Among People with Cardiac Conditions

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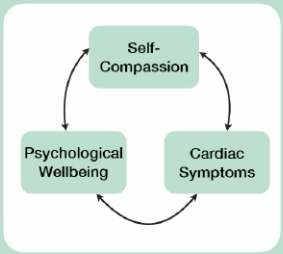
## Introduction

Psychological wellbeing is gaining clinical attention in cardiac rehabilitation (CR). In clinical context, cardiac conditions have high reoccurrence rate, comorbidity and mortality, requiring continuous medical care, and thus substantial medical resources; previous studies suggested psychological interventions could be beneficial. The concept of self-compassion and related therapies are gaining clinical attention; yet the role of self-compassion (SC) and self-criticism (SCr) in CR is to be recognised. Study regarding self-compassion and psychological wellbeing among cardiac patients is limited. Preceding studies focused predominantly on SC and physical cardiac parameters, and its relation with cardiac symptom experience (CSE), the manifestation of cardiac health and disease condition, remains unclear.



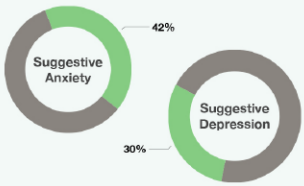

## Objectives

(1) To investigate level of self-compassion and psychological wellbeing among persons with cardiac conditions
(2) To extend the literature on the association among self-compassion and cardiac health among persons with cardiac conditions
(3) To explore correlation among self-compassion level, psychological wellbeing (depression, anxiety and stress level), cardiac outcome as reflected by cardiac symptom experience and medical resources utilisation rates, among individuals with cardiac diseases

## Methodology

This study was a cross-sectional survey study with convenience sampling, using a self-administered, self-report questionnaire packet with Self-Compassion Scale (Hong Kong Chinese Version), Depression Anxiety Stress Scale DASS-21 (Chinese version), and cardiac symptom questionnaire modified from Memorial Symptom Assessment Scale.

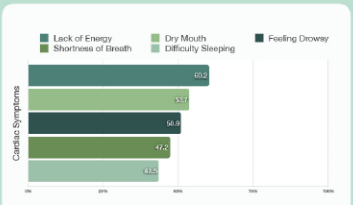
Community-dwelling adult patients who were diagnosed with cardiac diseases, with prior history of hospital admission due to cardiac condition within one year, and able to understand spoken and written Chinese were recruited in this study. Final sample comprised 108 cardiac patients under Occupational Therapy care at Prince of Wales Hospital.

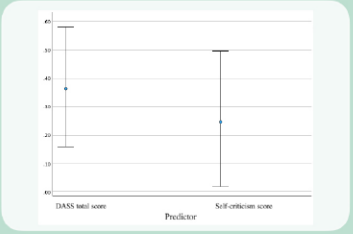



## Results

Participant age ranged from 39 to 93, with mean age of 67.3, with 88 (81.5%) male participants and 20 (18.5%) female participants. Most common cardiac diagnosis was acute myocardial infarction (heart attack) (n = 62, 57.4%). Mean score of SC factor score was 2.34 out of 5 and the mean score of SCr factor score was 1.58 out of 5.

Cardiac patients were of psychological need, with 29.6% participants suggestive suffering from depression at varied levels, and 41.7% participants suggestive suffering from anxiety. Cardiac patients with higher level of SCr were more likely to experience higher level of depressive, anxiety and stress symptoms, and higher level of CSE. Mood was positively correlated with medical resource utilisation, in terms of AED visit and hospitalization ($p < .05$); CSE was positively correlated with frequency of hospitalization ($p < .05$). Multiple linear regression analysis showed DASS-21 total score together with SCr factor score could better predict CSE, than single use of either predictor. Both of them were of similar statistical significance and the model remained significant after controlling age and sex ($F(4,103) = 13.366$, $p < .001$, Adj $R2 = .316$). indicating this model explained approximately 31.6% of the variance in total cardiac symptom score, and there is no statistical evidence of age or sex influence. SC factor score is found to be positively correlated with SCr factor score in this study, and its correlation with negative psychological outcome were negative yet not statistically significant, suggesting probable moderators influencing SC.




## Discussion and Conclusion

**Cardiac Symptom = Negative Psychological Wellbeing + Self Criticism**

This study provided updates and support for the psychological need of persons with cardiac conditions, which is of clinical significance. Including interventions targeting self-criticism in CR may bring additional clinical benefits in terms of psychological wellbeing and cardiac symptoms. Further study is suggested to explore the SC moderators and the effect of related interventions for persons with cardiac conditions.

E-Poster 25-P-022

POLYU REHAB

# Feasibility and Acceptability of Dementia Caregiver Educational Program

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## Introduction

**Background**

- With Hong Kong's rising prevalence of dementia who lives at home, informal caregivers' role in taking care the daily life of people with dementia become prominent. Most of the caring go to the care-recipients' daily activities. However, programs examining from a comprehensive approach and rendering lists of effective strategies in caring for daily activities remained scarce.

**Objective**

- To pilot test the feasibility of the Dementia Caregiver Educational Program that focuses on alleviating the demand in assisting people with dementia's daily activities.
- To explore how the intervention and control arms compare on well-being outcomes.

## Methods

**Study Design**: Pilot Randomized Control Trial

**Participants:** Dyads of people with dementia and informal caregivers were recruited

**Inclusion Criteria**

- The care recipient had dementia living at home
- The informal caregiver was aged ≥18 years
- The informal caregiver was the primary caregiver and assumed responsibility for the care-recipient
- Primary care took place at home

**Exclusion Criteria**

- Care recipients' impairments in ADLs were primarily due to other medical conditions rather than dementia; and/or
- The informal caregiver experienced a cognitive impairment that hindered their understanding and engagement with the educational package

**Interventions**

- Participants were randomly assigned to either an experimental or control group.
- Experimental group: received the individualized Caregiver Educational Program which focused on educating caregivers about assisting people with dementia in their daily activities.
- Control group: received general dementia information and support.
- In the 7-week program, both groups attended one workshop, received three telephone follow-ups biweekly, and take-home resources.
- The Dementia Caregiver Education Program included a strategy package with a list of available strategies, and related examples in which the content were elaborated and practiced in the educational workshop.

**Outcome Measures**

- Feasibility was evaluated by participants' retention rate and intervention adherence
- Acceptability was evaluated by a tailored Acceptability Survey posttest
- Effectiveness was evaluated by:

1. Zarit Burden Interview, for caregiver burden
2. Centre for Epidemiologic Studies Depression Scale, for depression level
3. Adult Carer Quality of Life Questionnaire, for quality of life
4. Disability Assessment for Dementia, for person with dementia's functional performance

## Results

- Program overall retention rate for the program: 78.9%
- Intervention adherence: 100%
- Acceptability rating: broad agreement in all areas
- No significant differences were found in the four overall outcome measures
- Caring Stress, a subdomain of the Adult Carer Quality of Life Questionnaire, was significantly better in the experimental group after intervention.

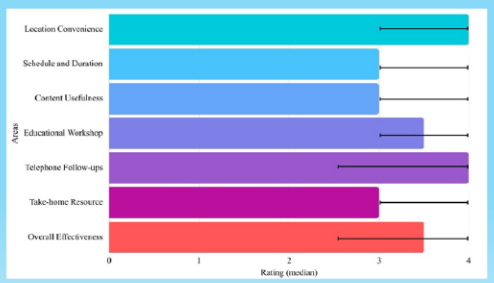


***Fig.1*** Participant Acceptability Rating (Median) by Areas (N=15)

## Conclusion

- The findings support the feasibility and acceptability of the Dementia Caregiver Educational Program. Although limited by a small sample size and program duration, the results provide insights for a future larger and longer trial.

## Acknowledgement

- We thank all participants for their involvement, as well as the Hong Kong Family Welfare Society and the Christine Service Family Centre for their support in recruiting participants.

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Reimagine Rehabilitation, Empower Communities.
創新康復，惠澤社群。

E-Poster 25-P-023

# "Empowering change": Evaluation of Group-based Lifestyle Redesign Loveliving 2.0 Programs in Community Psychiatric Services in Hong Kong

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## Introduction

Presence of lifestyle imbalance among individuals with mental illnesses has higher likelihood of heightening severity of mental illnesses, which further develops vicious cycle between lifestyle imbalance and severity of mental illnesses (Haggett, 2016). Occupational Therapy specialised in Lifestyle Redesign is playing vital role in breaking this vicious cycle for the purposes of optimising service users' lifestyle balance, facilitating their mental health recovery and strengthening the roles of occupational therapy in community-based care (Pyatak, Carandang, Rice Collins & Carlson, 2022). Therefore, this program aimed to evaluate the effectiveness of the "Group-based Lifestyle Redesign Program" on lifestyle balance and mental wellbeing

## Methods

From July 2024 to July 2025, this program recruited 40 participants presented with stable mental condition from Tai Po Hospital (TPH) Psychiatric Day Hospital, TPH's Community Psychiatric Services and North District Hospital's Community Psychiatric Services. The program consisted of 6 biweekly group sessions integrated with 9 "Loveliving 2.0" videos through HA GO prescription for off-site education and knowledge enhancement. Occupational Balance Questionnaire (OB-Quest), the Short Warwick-Edinburgh Mental Wellbeing Scale (SWEMWBS) and patient's satisfaction survey were selected as the outcome measures to be conducted before and after the program.


Figure 1: Group composition

## Results

27 out of 40 participants completed the program. The non-parametric t-test showed participants' level of lifestyle balance increased from pre-program (M=19.70) to post-program (M=21.89, p=0.034). Participants described an expansion and adaptation into different meaningful life roles, such as hobbyist or volunteer etc. Additionally, participants' level of mental wellbeing heightened from pre-program (M=19.33) to post-program (M=22.59, p=0.002). Satisfaction survey showed increase in 26.7%, 29.3% and 28.7% in the aspects of knowledge, attitude and practice towards lifestyle balance respectively after the program.

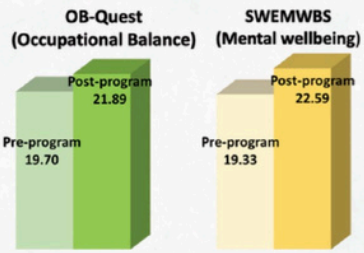


Figure 2: Mean score of QB-Quest & SWEMWBS (Pre & Post-program)


Figure 3: Percentage change in knowledge, attitude and practice towards lifestyle balance after the program

## Conclusion

Group-based Lifestyle Redesign Program was effective in promoting the level of lifestyle balance and mental wellbeing for this target group in mental health field. Further studies are considered to evaluate program outcome for longer term sustainability and minimise the program's attrition rate.

## References

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Hong Kong Occupational Therapy Conference 2025

E-Poster 25-P-024

# Evaluation For Children's Executive Functioning: Insights From a Scoping Review

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## Introduction

Integration of a set of skills to accomplish complex, goal-directed behavior is collectively referred to as Executive Functioning (EF) (Best et al., 2009).

EF is crucial for adapting to complex situations and achieving goals (Diamond, 2013; Miyake et al., 2000) which significantly influences learning, behavior, and overall life success (Barnes et al., 2023; Escolano-Pérez et al., 2022).

Early intervention before age 12 can strengthen EF skills and prevent behavioral issues (Denworth, 2020), highlighting the importance of effective tools for evaluating EF in children.

This paper aims to identify and evaluate the psychometric properties of most commonly used tools for gauging EF in children.

## Methods

Performed an electronic search from inception of articles published between 1 Jan 1998 and 31 Oct 2024 across the following databases: EBSCOhost, Embase, PubMed, and Scopus. The search used these keywords in the title or abstract: evaluation or assessment or test, and executive function* or skills or executive dysfunction or dysexecutive, and child*.

Inclusion criteria were as follows: the test focused on assessment of EF or at least one component of EF; participants included aged below 12 years; the study did not solely present methodology or a study protocol; and the work was peer-reviewed.

Exclusion criteria: studies for which no full text was available or were not published in English.

Categorized tools from identified papers according to types of administration:

- Observation-based rating scales
- Computerized/ paper-pencil based performance task
- Performance-based (ecological) assessment

Frequency count of ≥ 5% in each category would be included for further evaluation of the psychometric properties.

## Results

From around 600 peer-reviewed articles, 255 assessment tools with 1356 counts were identified. The distribution of tools according to types of administration is listed in Figure 1.

Tools included for evaluating psychometric properties are listed in Table 1.1

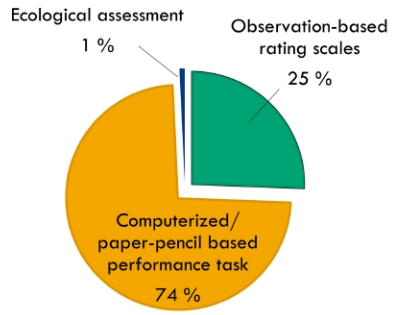



**Figure 1.** Distribution of EF tools according to types of administration

| Name of tools | % Frequency |
|---|---|
| Observation-based rating scale | |
| Behavior Rating Inventory of Executive Function (BRIEF) | 67.44 |
| Behavior Rating Inventory of Executive Function - Preschool Version (BRIEF-P) | 10.09 |
| **Subtotal in this category** | **77.53** |
| Computerized/ paper-pencil performance task | |
| Stroop Color-Word Test [a] (SCWT) | 7.91 |
| Wisconsin Card Sorting Test [b] (WCST) | 7.11 |
| Tower of London [c] (ToL) | 6.41 |
| **Subtotal in this category** | **21.43** |
| Ecological assessment | |
| Children's Cooking Task (CCT) | 50.00 |
| Children's Kitchen Task Assessment (CKTA) | 20.00 |
| Birthday Task | 10.00 |
| Do-Eat | 10.00 |
| Preschool Executive Task Assessment (PETA) | 10.00 |
| **Subtotal in this category** | **100.0** |

**Table 1.** Name of tools included for evaluation of psychometric properties

Note:

[a] test included: Stroop Color-Word Test/ Day-Night/ Moon-Sun

[b] test included: Wisconsin Card Sorting Test (WCST), Revised WCST, Keio version of WCST, Modified WCST, computerized WCST

[c] test included: Tower of London, Tower of Londa – Drexel University, Tower of Hanoi, Tower of California

## Results – cont'd

Various EF tools measure distinct EF skills.

Observation-based rating scales have strong psychometric properties but low inter-rater reliability.

Computerized or paper-pencil based performance tasks measuring flexibility have low test-retest reliability. In addition, tasks measuring inhibitory control did not report validity, and the one-factor model was not confirmed in tasks measuring planning skills.

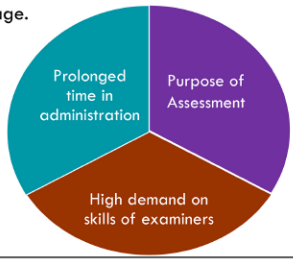
Ecological assessments have acceptable reliability; however, their validity warrants further investigation.

## Discussion

Rating scales have low inter-rater reliability because of various perceptions, experiences, and attitudes of parents and teachers.

Computerized/paper-pencil based performance tasks documented specific EF skills in a controlled environment but were weak in capturing integrated EF skills used in daily life.

Ecological assessments reflect EF in a naturalistic setting, but factors shown in the graph below limited their usage.




## Conclusion

Use a combination of rating scales and ecological assessment to identify EF skills comprehensively.

There is a need to develop an ecological and performance-based assessment to evaluate EF by providing a real-time analysis of the EF problem from observed behavior and having less skill demand on the examiner.

Explore the possibility of using AI-assisted ecological assessment for identifying specific EF problems and guiding targeted treatment.

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E-Poster 25-P-025

# Tongue thickness in older adults with sarcopenia and visual impairment: a pilot study

Chiu ATS& Wong WWS, Wong TKK, Yip CCK, Ng JHY, Chan CT, Chan SY, Cheung KY, Shu YW, Tam SH, Tse PS, Yip BCB

## BACKGROUND

- Sarcopenia is a progressive muscle disorder characterized by progressive and generalized loss of skeletal muscle mass and functions and it is strictly correlated with physical disability and functional decline. When sarcopenia presents itself as the atrophy of tongue muscles which is further manifested by a reduction of tongue thickness, the reduction of suprahyoid muscle strength may result in difficulties in swallowing and increased risks of aspiration, which can be fatal.
- Owing to the adverse impacts of sarcopenia on swallowing, there is a need for using a more cost-effective and universal method to measure tongue thickness for the screening of sarcopenia.
- This study aimed at measuring the tongue thickness using ultrasound, examining the correlation between sarcopenia and tongue thickness and generalizing the use of ultrasound in the screening of sarcopenia.

## OBJECTIVE

- To compare the tongue thickness between healthy subjects and older individuals with sarcopenia.

## CONCLUSION

- Our findings suggested that tongue thickness had a positive and significant correlation with skeletal muscle mass and body weight.
- The results revealed that tongue thickness might be an indicator of sarcopenia, and hence ultrasound could be used in the screening of sarcopenia.

## FUTURE IMPLICATIONS

- Early screening may help to minimize the health consequences of dysphagia and aspiration that could otherwise be avoided and the economic burden sarcopenia has exerted on the healthcare system.
- In addition, the use of ultrasound in measuring tongue thickness has the potential to monitor the progress of oral-motor training and rehabilitation process of older individuals with sarcopenia.

## METHODS

### Data collection

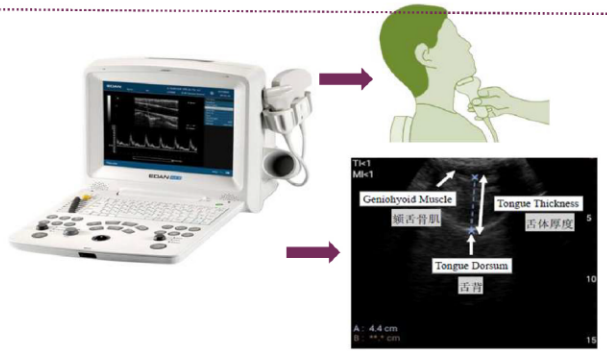
- A population-based sample of 35 male and female were recruited by convenience sampling.
- The sample met the selection criteria and was comprised of the sarcopenia group (n=15) who were recruited from the Kowloon Home for the Aged Blind and the healthy subject group (n=25) who were recruited in the community.

| | 肌少症患者组 | | 健康成人组 | | |
|---|---|---|---|---|---|
| | 平均值 | 标准差（S.D.） | 平均值 | 标准差（S.D.） | |
| 年龄（岁） | 87.73 | （8.78） | 21.10 | （0.64） | p < 0.001* |
| 体重（kg） | 49.41 | （11.44） | 53.50 | （5.65） | p = 0.364 |
| 身高（cm） | 151.13 | （9.13） | 162.45 | （7.19） | p = 0.001* |
| 体重指数（kg/m²） | 21.63 | （4.64） | 20.25 | （1.43） | p = 0.298 |
| 舌体厚度（cm） | 4.40 | （0.40） | 4.09 | （0.17） | p = 0.017* |
| 骨骼肌质量（kg） | 15.07 | （3.24） | | | |
| 骨骼肌质量指数（kg/m²） | 6.56 | （1.04） | | | |
| 平均握力（kgf） | 10.13 | （2.51） | | | |
| 舌肌力量（kPa） | 20.82 | （9.21） | | | |
| 唇肌力量（kPa） | 15.71 | （6.66） | | | |

表 1 健康受试者与老年肌少症患者临床特征比较
注：*采用曼惠特尼 U 检定进行统计分析

### Tongue thickness Measurement

- The tongue thickness of the subjects was examined by the MIRUKO ® Portable Ultrasound (Nippon Sigmax Co. Ltd, Tokyo, Japan).
- The mean value of the distance between the midpoint of the lower end of the geniohyoid muscle to the tongue dorsum obtained from the three trials was considered to be the tongue thickness.




### Data collection with Sacropenia group

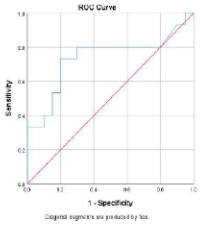
- Muscle mass, Skeletal Muscle Mass(SMM) and skeletal muscle index (SMI) were measured by bioelectrical impedance analysis (BIA) using InBody S10 (InBody Co. Ltd, Seoul, Korea).
- This study adopted the EWGS cut-off thresholds for skeletal muscle index (SMI) hand grip strength was 7.4 kg/m2 and 22 kg for females with sarcopenia. (Bahat G et al., 2016).

| 指标 | 肌少症患者组 | 健康成人组 |
|---|---|---|
| 舌厚度（cm） | 4.4 | 5.30（Tagami et al，2022） |
| 骨骼肌重（公斤）SMM | 15.07 | N/A |
| 骨骼肌质量指数（公斤/米²）SMI | 6.56 | N/A |
| 平均手握力（千克力） | 10.13 | 24.20（Nakamori et al.，2020） |
| 舌头肌肉力量（千帕） | 20.82 | 35.70（Tagami et al，2022） |
| 唇部肌肉力量（千帕） | 15.71 | N/A |

表 2 反映这项研究肌少症与社区健康长者，各样参数指标作比较

## RESULT

1. Receiver operating characteristic curve on the tongue thickness revealed that the tongue thickness at 4.145cm displayed the sensitivity and specificity to classify the sarcopenia at 80% and 70% respectively.




2. The area under the curve at 0.737 with p = 0.018. In people with sarcopenia (N= 15), there were significant correlation between tongue thickness, the skeletal muscle mass (r = 0.643, p = 0.01) and skeletal muscle index (r = 0.564, p = 0.028).
3. Regression model on the prediction of the SMM by the tongue thickness showed that the tongue thickness explained 35.7% of the SMM (F = 7.223, df =1, p = 0.019).
4. We incorporated Height, Weight, Tongue thickness, Tongue strength and Lip strength into the regression model, which explained 95.1% of the SMM (F=19.367, df = 7, p<0.001). However, only the coefficient of height and weight were significant in the model.

*Artwork illustration credited to Armstrong Chiu, OTI, Clyde Sze, OTII and Ayvis Shek, OTII*

E-Poster 25-P-026

# Integrated Career Continuum Program (ICCP): Enhancing Efficiency and Efficacy of Community Vocational Transition for People with Mental Illness

So YH (1), Ho ECM (1)
Occupational Therapy Department, Tai Po Hospital (1)

## Introduction

The growing demand for psychiatric services highlights the need for effective post- hospitalization support. While advancements in community vocational rehabilitation services (CVRS) have expanded resources, patients may face challenges in keeping up with updates. To adapt to these advancements and enhance career integration, the ICCP was established in February 2024 after a six-month pilot study. This program was instituted through collaboration between the Tai Po Hospital Occupational Therapy (OT) Department and various non-governmental organizations (NGOs) to facilitate the transition from hospital-based care to community support. The ICCP provides smoother vocational transitions for inpatients and community-based patients.

## Objective

- Increase patients' knowledge and readiness for updated CVRS.

*Fig.1 ICCP Service Model*


## Methodology

- The ICCP collaborates with 7 NGOs for continuation of vocational rehabilitation. Model elements include:
  1. CVRS roadshows organized by various NGOs for inpatients with ZOOM for community-based patients.
  2. Early referral for inpatients, followed by ZOOM or in-person job matching interviews.
  3. Effective communication with NGOs, including work assessment reports and progress evaluation meetings. The evaluation process involved a roadshow questionnaire to assess patients' knowledge and readiness for the updated CVRS.

## Result

From February 2024 to September 2025, 365 patients participated in 33 CVRS roadshows. Results showed that 65% had never received information about CVRS. After the roadshow, participants averaged 86% accuracy on a 4-question knowledge test about the latest CVRS updates. Additionally, 45% expressed strong interest in pursuing CVRS, with 31% being referred. Overall satisfaction with ICCP was reported at 72%. In addition, the rollout of ICCP demonstrated greater service efficiency compared to the pilot phase. This improvement can be attributed to the expansion of service users to include both inpatients and community-based patients, as well as the increase in community partners from five to seven.

*Fig.2 Collaboration with NGOs*

*Fig.3 CVRS Roadshows*


*Fig.4 Strong interest in pursuing CVRS*


*Fig.5 Overall Satisfaction with ICCP*

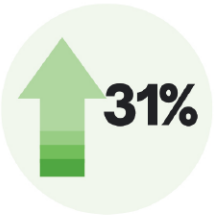



*Fig.6 CVRS Referral rate*

## Conclusion

The ICCP has significantly enhanced patients' knowledge and readiness for updated CVRS. Additionally, the rollout of the service from inpatient care to include community-based patients, along with broadening community partnerships, has led to higher participation and referral rates compared to the pilot study. In the future, we can continue the rollout by strengthening engagement with service users and further expanding our community partners to enhance the program's impact.

E-Poster 25-P-027

# RECOVERY PATTERN AND FUNCTIONAL OUTCOMES AFTER REVERSE TOTAL SHOULDER ARTHROPLASTY: THE ROLE OF OCCUPATIONAL THERAPY IN EARLY REHABILITATION PHASE

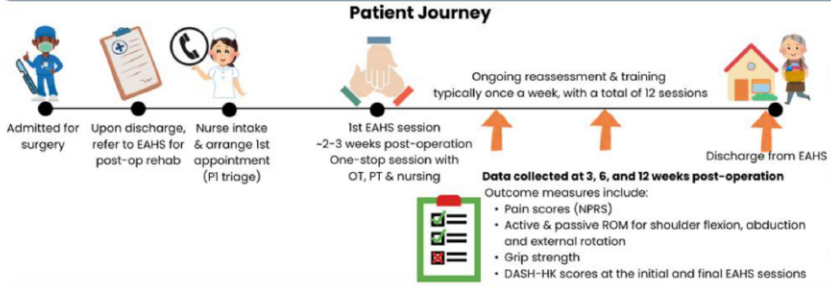
Lee MHM (1), Ho WHA (2), Wong KHB (2), Leung WYF (1), Cheng CKJ (1)
(1) Department of Occupational Therapy, Caritas Medical Centre, Hong Kong (2) Department of Orthopaedics & Traumatology, Caritas Medical Centre, Hong Kong

## INTRODUCTION

The indications for reverse total shoulder arthroplasty (RTSA) have broadened significantly, now including not only older patients with rotator cuff arthropathy but also those with fractures, revision surgeries, and younger individuals. This procedure accounts for over 70% of shoulder arthroplasties in the U.S. Research indicates rapid improvements in shoulder function, with recovery rates exceeding 70% at 12 weeks post-operation. However, there is a notable evidence gap in local research regarding early rehabilitation outcomes following RTSA, which are crucial for patient satisfaction. This study aims to identify key recovery timeframes and establish evidence-based functional goals to guide early rehabilitation strategies.

## METHODS

A retrospective review was conducted on patients who underwent RTSA at Caritas Medical Centre from January 2020 to March 2025, all of whom received post-operative rehabilitation through the Enhanced Allied Health Support (EAHS) service.

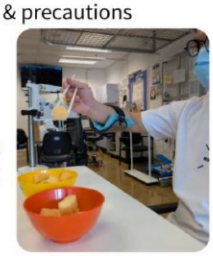



## RESULTS

A total of 20 patients were reviewed. Pain scores show a notable decrease after six weeks. Most measures of ROM exhibited highly statistically significant improvements over time ($p < 0.001$). The most substantial enhancement in active shoulder flexion occurred between 6 and 12 weeks, with a median increase of 35 degrees, rising from 65 degrees to 100 degrees ($p < 0.001$). Additionally, there was consistent progress in passive ROM with significant statistical changes occurring even early in the recovery process. By 12 weeks, recovery rates for active shoulder flexion and abduction were 74.6% and 79.7% respectively. The median improvement in the DASH-HK score for symptoms and disability was 28.15, demonstrating clinical significance as exceeded the MCID of 10 points.

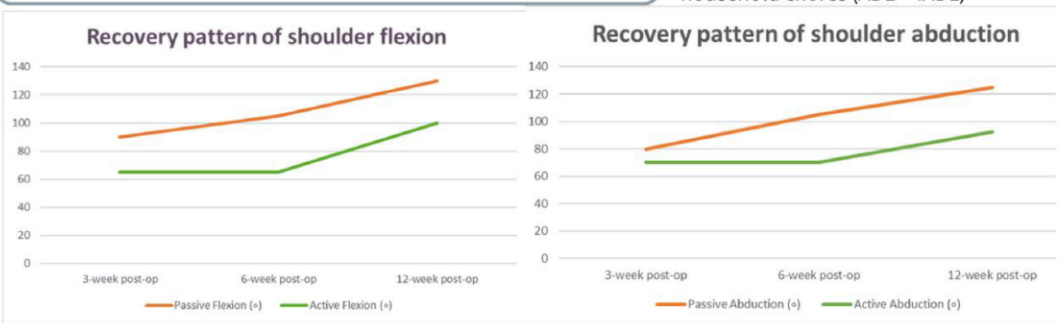
## OCCUPATION-BASED INTERVENTIONS

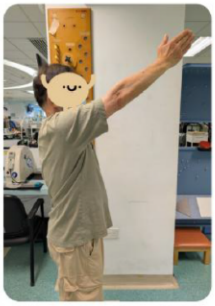
**0-3 WEEKS** • Respect pain and aware of inflammation
• Independent in ADL's with modifications & precautions
• Sling 24/7 except grooming and exercise



**3-6 WEEKS** • Slow regain in AROM
• A crucial time point for motivating patients to apply physical improvements to functional performance

**6-12 WEEKS** • Most significant improvement in AROM
• Empowering patients from basic grooming activities to household chores (ADL-> IADL)





12 weeks after RTSA

## CONCLUSION

This study identified crucial components for grading training activities and guided occupational therapists in enhancing functional performance, emphasizing the importance of early, intensive rehabilitation in empowering patients to engage in daily activities.

E-Poster 25-P-031

# Pilot Analysis of Risk Drill: Supplementary Training for Newly Recruited Occupational Therapists in Community Psychiatric Service

Cheung CCJ(1) & Ho CM(1)
(1) Occupational Therapy Department, Tai Po Hospital

## Background

**Occupational therapists (OTs) form about 20% of the Community Psychiatric Service (CPS)** workforce in the Hospital Authority (HA) and are core members of the service. Alongside generic case management, OTs deliver discipline-specific interventions that support recovery in daily living, vocational functioning, and social participation.

Most newly recruited OTs enter CPS with only one year of in-patient psychiatric experience. To qualify as Case Managers (CMs), they complete the six-month Multi-professional Case Management Program (MCMP) jointly offered by the Institute of Advanced Allied Health Studies and the Institute of Advanced Nursing Studies. While MCMP establishes essential competencies, **many new OTs report practical difficulties in emergency response,** drug supervision, documentation, and translating occupational therapy (OT) interventions into community contexts.

To address these gaps, a monthly Risk Drill was launched in June 2025 at Tai Po Hospital (TPH) and North District Hospital (NDH), later extending to the TPH in-patient service. This structured training uses **case presentation, peer discussion, and simulation** to strengthen Resident Occupational Therapists' (ROTs) preparedness in clinical emergency handling and risk prevention.


Figure 1. Key Component of Risk Drill

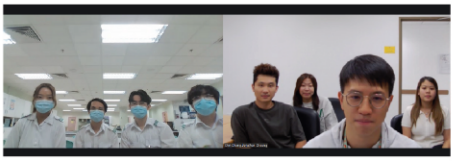


Figure 2. Image of the Training Session

The objectives of this study are as followings.
1. To evaluate the **user experience** of the Risk Drill program.
2. To identify gaps between existing training and actual clinical needs by collecting feedback from junior OTs and supervisors.
3. To inform the design of supplementary training for new CPS recruits.

## Methods

ROTs and senior staff completed a post-session survey. Beyond demographic data, the survey a**ssesses achievement of objectives**, including risk identification, integration of protocols, clinical reasoning in emergencies, and compliance with reporting systems; rates the **effectiveness of group discussions and simulation** using a 5-point Likert scale; and collects **qualitative feedback** on participants' experiences, training gaps, and suggested improvements.

## Results & Findings

21 responses were collected: 14 ROTs and 7 APOTs or above, of which 11 were first-time participants and 14 were not currently in CPS practice. Participants unanimously reported improved competence in clinical emergency handling and risk prevention.


Figure 3. Highlights of Feedback Collected

Qualitative feedback described the training as comprehensive, noting that involvement of in-patient staff fostered broader perspectives and richer discussion. Participants valued **the opportunity for mental rehearsal** compared with passive guideline review.

## Conclusion

The pilot evaluation indicates that Risk Drill **provides a positive learning experience**, enhancing ROTs' preparedness for risk management in CPS settings. Both group discussion and simulation emerged as core components of its effectiveness. Additionally, participants **benefited from peer learning** and increased awareness of blind spots in clinical reasoning.

However, due to the small sample size and limited qualitative data, this study could not fully identify training gaps between existing programs and clinical practice. Future evaluations should employ **refined questionnaires and larger cohorts** to better inform supplementary training for new CPS recruits.

E-Poster 25-P-032

# Enhancing Aging-in-Place for Older Adults with Cognitive Impairment: An Occupational Therapy-Led Model Integrating Gerontechnology and Medical Social Collaboration.

Carrie Tang (1), Cheung TY (1), Chan WY (1), Lam CM (1)
(1) Occupational Therapy Department, Tuen Mun Hospital

## Introduction

The ICM - Case Management (CM) program provides transitional and integrated support services to high-risk patients aged 60 or above upon discharge. Within the ICM-CM program, incidents from cognitive decline such as forgetting appointments and difficulties in adhering to medication schedules were frequently observed. With progressive cognitive decline, dementia-related memory impairments can significantly disrupt daily functioning. Therefore, this pilot initiative aimed to enhance patient safety and support in community living.

## Methods

The holistic support system for patients with cognitive impairment integrated teamwork among individuals, families, and organizations to achieve common objectives through gerontechnology prescriptions, increased family engagement, and strengthened medical social collaboration.

- Coordination of Early Transitional Care Service Upon Discharge
- Remote Family Monitoring
- Other Social Services Collaboration
  Such as medication reminder telephone services, transitional volunteer home support, funded gerontechnology initiatives and carer support programs.

Gerontechnology

**Supporting Device**

Fall Detection & Tracking Device

**Surveillance Technology**

Alarm System for Medication or Cooking

## Results

An evaluation of the service model from April 2023 to June 2025 recruited 19 eligible patients with neurocognitive disorders or memory complaints who lived alone or had limited support

84% of the patients were prescribed supportive devices to enhance safety in cooking, medication management and outdoor activities e.g., shopping and social engagement. Of the 84% of patients with identifiable family support, 50% had surveillance devices arranged; all of these cases reported prevented home accidents. However, 12.5% of patients declined support, and 37.5% of family members refused to assist or arrange surveillance. For patients without family support, timely referrals to long term care assessment, community support services or other community initiatives were arranged.

Following the program, the average HK-MoCA score increased to 11.7, with 47% of patients showing improvement , 37% remaining unchanged and 16% with deterioration. Functional scores on mBI and Lawton IADL Scale also improved. Additionally, incidents of missing dose observed were reduced.

## Conclusion

The strategic integration of gerontechnology within a coordinated, multidisciplinary framework significantly enhances the capacity for safe aging-in-place among cognitively impaired older adults.

E-Poster 25-P-033

# Huangtu Occupation Study: Enabling occupation performance for health and well-being in community OT

Chiu, ML Teresa, Huangtu Occupation Study Group

## Background

- Community occupational therapy can help people who experience difficulties in doing occupations (將生活事情做好) .
- Effective community OT is built on solid professional reasoning. Yet, there are conceptual gaps of professional reasoning between the East and the West as well as the English and Chinese languages.
- Huangtu Occupation Study (黃土学说 Huangtu OS) aims to address the conceptual and linguistic gaps by providing a culturally relevant professional reasoning tool written in Chinese for use in Chinese-speaking communities.
- This paper will highlight the core concepts of Huangtu OS in community OT.

## Methods

1. Conceptualization of OT terms written in Chinese that support effective professional reasoning.
   - Using a re-contextualization approach, the meaning of each English OT term was deconstructed, how the term is expressed in the Chinese culture was identified, and the OT concepts was reconstructed in Chinese language.
2. Historical literature review of OT literature and textbooks published in China.
   - The relationship of the authors and occupational therapy, the content source of English literature and textbooks, and the missing links of professional reasoning were analyzed.
3. Evaluation of the impact of using Huangtu OT terms and professional reasoning in practice and education.
   - How occupational therapists reflected on the process and outcome of enabling occupational performance of the clients was analyzed. The way educators use professional reasoning in course design, curriculum development and teaching methods were examined.

## Findings


### 心想事成有動力

- Refers to the understanding of the inner drive that supports a person to do daily occupations well (將生活事情做好) .
- By situating the volition (內在做事原動力) of a doer (做事的人) within the context (做事處境) of meaningful occupations (要緊的事情) , OTs gain an in-depth understanding of the occupational performance (生活本事) of the doer, the difficulties he/she encounters and the potential to change.

### 并肩而行靠互信

- Refers to the development of a collaborative relationship (協作共創) with the doer to address the occupational performance problem of the chosen occupations.
- Based on mutual trust (互信) , the doer develops the confidence to try new ways of doing the chosen occupations.
- The collaborative relationship throughout the therapy supports the doer to perform the chosen occupations satisfactorily.

### 做事就是治療中

- Refers to the process of doing occupations (做生活事情) in therapy that results in an improvement of occupational performance.
- Throughout the process, OTs a) facilitate the doer to make decisions that energize him/her to do occupations, b) monitor the dynamic transaction between the occupational context and occupational performance that impacts the occupational performance, and c) modify the therapy based on the changes of the doer's volition and the ability to do.

## Conclusion

- Huangtu OS provides a set of Chinese OT terms that support the professional reasoning of occupational therapists who serve Chinese-speaking communities.
- Using Chinese professional terms to communicate and think with Chinese-speaking doers supports us to identify effective solutions that are culturally appropriate.
- Occupational therapists in Hong Kong can use the terms to explain what we do and why we do so to diverse stakeholders in the community.
- The Huangtu OS can serve as a sound professional reasoning tool to enable occupational performance for health and well-being through occupational therapy.

E-Poster 25-P-034

# INTEGRATED DANCE PROGRAM ON FALL PREVENTION AMONG COMMUNITY-DWELLING OLDER ADULTS

By Yim WC, V[1], Kwok YY, Crista[2], and Wu ST, Cynthia[3]

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[2]US Board Certified Dance/Movement Therapist, American Dance Therapy Association, Hong Kong
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Standing Strong – 銀舞翩翩—樂齡舞動防跌計劃 Silver Age Fall Prevention Programme through Dance

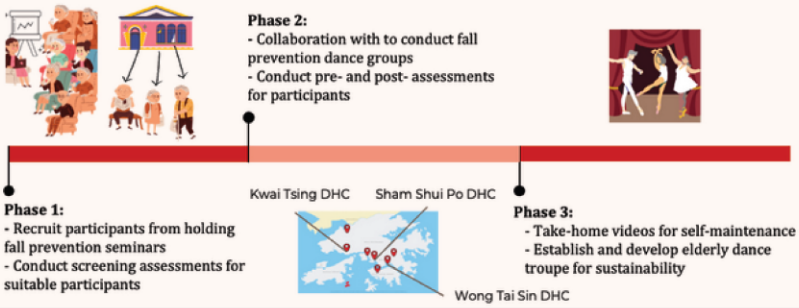
## BACKGROUND

The growing aging population in Hong Kong has increased the demand for community care programs to prevent falls among older adults. However, the majority of studies conducted on fall prevention have been done overseas, focusing primarily on either physical or psychological outcomes, with limited evaluation of their combined effects. From recent meta-analysis and systematic review, the studies were also controversial. Some supported dance interventions combines rhythmic motion with physical, emotional, cognitive, and social benefits, improves balance, gait, strength, and flexibility (Li et al., 2024), but some counter proposed the evidence didn't support dance as an alternative to strength and balance training for fall prevention (Lazo et al., 2024). However, scholars both suggested dance intervention is multifactorial intervention, which is a low-cost, easily accessible option to addresses physical, cognitive, and emotional aspects of health for older adults (Lazo et al., 2024; Nieciecka et al., 2023).

Therefore, a community-based fall prevention program integrating occupational therapy and dance movement therapy was launched in the local community. This approach aimed to address both physical and psychological changes, exploring health outcomes among older adults in the Hong Kong context. The program facilitated physical exercises, rhythmic dance movements, sensory experiences, and well-being awareness of body and mind. A total of 230 community-dwelling older adults participated in the dance groups. The study aimed to evaluate the effectiveness of this integrative fall prevention program.

Dance Prevents Fall

Integrated dance, dance & movement therapy, and physical exercise




## METHODS

To maximize the effects of fall prevention, an integrative and holistic approach combining occupational therapy, dance and dance/movement therapy was implemented. This approach included physical training, increased body awareness through sensory stimulation, and enhanced psychological well-being. Additionally, the dance choreography incorporated social and emotional expressions, body-mind elements of dance therapy, and take-home videos for participants to practice at home. A total of six fall prevention groups were implemented for community-dwelling older adults through collaboration with District Health Centers (DHCs). Recruitment for the program was conducted via fall prevention seminars by occupational therapist organized at the DHCs. Each group participated in a ten-session dance-based program, and it was sustained as a community dance troupe after the program.

The study employed a pre- and post-test design with paired dependent groups. Physical health outcomes were measured using the uni-pedal stance (Balance) test and the Timed-Up & Go (TUG Mobility) test. Psychological outcomes, such as fear of falling and well-being, were assessed using the revised Fear of Falling Questionnaire (FFQ-R) and the 5-Item World Health Organization (WHO-5) Well-Being Index, respectively. Descriptive analysis, paired-sample t-tests, and Wilcoxon tests were used to evaluate the effects of the integrated dance program on mobility, balance, fear of falling, and well-being.

## RESULTS AND FINDINGS

The balance test (bilateral uni-pedal test) scores were significantly higher ($p < 0.001$) after the program, while mobility, measured by the Timed-Up & Go (TUG) test, also improved significantly ($p < 0.001$). The Wilcoxon test revealed that the fear of falling scores were significantly reduced ($p < 0.001$), and the state of positive well-being (WHO-5) was significantly enhanced ($p < 0.001$). This study contributed valuable knowledge and evidence regarding the effects of integrated dance and dance/movement activities on fall prevention among older adults.

## CONCLUSION

The findings of this study indicate that the integrated dance program positively impacted mobility, balance, fear of falling, and well-being in older adults. Future studies employing experimental designs with control groups are recommended to increase the generalizability of these findings.

**KEYWORDS:** Fall prevention; Dance; Dance movement therapy; Mobility; Balance; Wellbeing

**Main Reference:**

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3. Nieciecka, A., Cyls, D., Pasek, K., & Kędziora-Kornatowska, K. (2023). Dance as an Element of Prevention and Treatment of Falls, Depression and Dementia in the Geriatric Population. Journal of Health Study and Medicine, 2023(1), 73–86. https://doi.org/10.2478/jhsm-2023-0005

Publication

## Student Project 25-SP-01

# Impact of Qigong Liu Zi Jue (LZJ) on Prefrontal Oxygenated Hemoglobin Concentration and Executive Function in Elderly Individuals with Visual Impairment in A Residential Care Setting

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### Background
Older adults residing in institutional settings demonstrate accelerated cognitive decline, particularly in memory, attention, and executive functions. Those with visual impairment are at an even greater risk due to reduced cognitive stimulation. Liu Zi Jue (LZJ), a technique involving six exhalation sounds, was introduced as a low-intensity, accessible leisure activity to potentially mitigate this decline.

### Objectives
This pilot study aimed to evaluate the effect of a 14-day LZJ intervention on cognitive function and changes in prefrontal oxyhaemoglobin (O2Hb) concentration among elderly individuals with visual impairment living in a residential care home.

### Methods
Eligible subjects who met the inclusion and exclusion criteria were recruited and randomly assigned to an intervention or control group. The intervention group practiced LZJ under supervision twice daily for 14 days, while the control group adhered to their usual residential routine. Outcome measures, assessed at baseline and post-intervention, included changes in prefrontal O2Hb concentration during a Category Fluency Test (CFT), measured using functional near-infrared spectroscopy (fNIRS), and performance on a battery of cognitive assessments (Digit Span tests, Conflicting Instructions Task, and Go/No-Go test).

### Results
Twenty visually impaired residents were recruited, with one subject withdrawn due to hospitalization, resulting in 19 subjects for data analysis. The intervention group exhibited a significant decrease in prefrontal O2Hb concentration during the CFT post-intervention compared to the control group. Furthermore, connectivity within the frontal lobe increased significantly in the intervention group. On behavioural tests, a significant between-group difference was observed in inhibition, as measured by the Go/No-Go test.

### Conclusions
The findings suggest that the Liu Zi Jue intervention can reduce cognitive load during a mental flexibility task and enhance inhibitory control, a higher-order cortical function, in visually impaired institutionalized elders. A large-scale study is warranted to confirm these findings.

## Student Project 25-SP-02

# Mechanisms of Decision Making: Computational Modelling and/or Neuroscience

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### Background
This controlled experimental study aimed to investigate whether complex decision making can be improved by modulating Frontopolar Cortex (FPl) activity and subsequently enhance occupational performance using Transcranial Magnetic Stimulation (TMS) – which could be a potential treatment for patients with complex decision-making difficulties.

### Methods
Twenty-one healthy young adults (n=21) participated in a two-stage decision-making task after receiving either Continuous Theta Burst Stimulation (cTBS) or Intermittent Theta Burst Stimulation (iTBS) over the FPl or cTBS over a control region. With a within-subject experimental design, measured accuracy and reaction times under these conditions across complex and simple choice types.

### Results
FPl excitation via iTBS significantly improved decision-making accuracy in making complex decisions and vice versa for FPl inhibition via cTBS, whereas did not yield similar effects in making simple decisions. Reaction time was not significantly affected by modulation.

### Conclusions
FPl excitation over FPl through TMS can enhance complex decision-making accuracy, suggesting a potential treatment pathway for improving occupational performance, independence, and quality of life in individuals with impairment in complex decision making. This study lays the groundwork for clinical applications of TMS in occupational therapy.

## Student Project 25-SP-03

# Effects of Transcranial Direct Current Stimulation on Cognition in Older Adults with Cognitive Impairment: A Randomized Controlled Trial

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### Background
In recent years, transcranial direct current stimulation (tDCS) has emerged as a widely utilized approach for modulating brain activity by either enhancing or diminishing the excitability of brain tissue. While research examining its effects on individuals with mild cognitive impairment (MCI) remains limited, existing findings suggest that tDCS applied to the frontal scalp regions may offer potential benefits in cognitive enhancement. Nevertheless, previous studies in this area exhibit certain limitations, as they predominantly relied on self-reported data, centered on memory-related outcomes, and lacked assessments of long-term effects.

### Objectives
This randomized controlled trial aims to examine the impact of tDCS applied to the left dorsolateral prefrontal cortex on cognitive functions in MCI.

### Methods
A total of 18 participants with MCI were recruited and randomly assigned to either the experimental or control group. The study protocol included a pre-assessment, post-assessments, and a follow-up evaluation conducted one month after the intervention. Participants underwent 10 sessions of tDCS, administered two to three times per week over a four-week period. Each session lasted 20 minutes and involved either real or sham stimulation. Cognitive performance was assessed using multiple outcome measures, including the digit span test, colour trail making test, verbal fluency test, the Chinese version of the Verbal Learning Test, and the Hong Kong adaptation of the Montreal Cognitive Assessment (MoCA). This study introduced a novel approach by examining multiple cognitive domains—such as attention, memory, and executive function—while also evaluating the long-term sustainability of tDCS effects in individuals with MCI.

### Results
The experimental group demonstrated significant enhancements in general cognition (MoCA); however, no notable improvements were observed in other specific cognitive domains.

### Conclusions
tDCS is effective in improving MCI patients' global cognitive function but not for specific cognitive domains. Further investigation is needed to find out the reason for no significant improvement shown in specific cognitive domains.

## Student Project 25-SP-04

# Effects of Imagery-Based Training on Cognitive Functions of Older Adults with Mild Cognitive Impairment

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**Department of Rehabilitation Sciences, The Hong Kong Polytechnic University**

### Objectives
Action Observation and Motor Imagery (AOMI) has been recognized to be an effective training strategy to enhance the motor function of individuals with physical disabilities. Yet, its therapeutic effects on those with mild cognitive impairment (MCI) have remained unaddressed. Thus, this study aimed to examine the effects of a 6-week physical program which utilised action observation and motor imagery (AO+MI) strategy, on working memory, attentional control, executive function and motor performance among the older adults with MCI.

### Methods
Sixty-six participants with MCI were randomly allocated to a six-week AOMI physical program with prior-program training (experimental group) (n=34; mean age= 67.65±4.52) or AO-only physical program (control group) (n=32; mean age= 67.00±3.37) to learn eight sets of upper and/or lower choreographies. Prior to and after the programs, participants' cognitive and motor baseline performance were measured using Digit Span Test-Backward (DST-B) for working memory, Colour Trails Test (CTT) for shifting attention, Stroop Colour and Word Test (SCWT) for conflict resolution and 6-Minute Walk Test (6MWT) for motor function.

### Results
Two-way repeated measures ANOV A revealed significant group × time interaction effect in the AOMI group in DST-B (sequence score: $p<0.01$; span score: $p<0.05$) and CTT2-CTT1 ($p<0.01$) when compared with the AO-only group. Post-hoc tests showed that the participants in the AOMI group had more improvement in DST-B and CTT (CTT1, CTT2 and CTT2-1). While the participants in both groups demonstrated significant improvements in 6MWT ($p<0.001$), no significant changes were found for the inference score of SCWT ($p>0.05$).

### Conclusions
The newly designed AOMI physical program has the potential to be a new therapeutic strategy to enhance working memory and selective attention of the MCI population. The incorporation of the prior-program training in the AOMI intervention program was shown to enhance the engagements of older adults with MCI, which in turn would foster the effects of AOMI to enhance their cognitive functions. Studies with a longer follow-up period could be conducted to investigate the effects of the AOMI program in the long term.

### Keywords
Action Observation Motor Imagery, Physical Training combine cognitive training, Executive Functions, Cognitive Decline

# HKOTA STAR Award


## Dr. Kathleen Allred SINCLAIR

## Congratulatory Messages

### HKOTA STAR Award – Honouring Excellence in Occupational Therapy

The Hong Kong Occupational Therapy Association (HKOTA) is proud to announce the **STAR Award**, celebrating exceptional contributions to the field of Occupational Therapy in Hong Kong and the Chinese Mainland. This prestigious award recognises excellence in **Service, Teaching, Achievement, and Recognition** within the profession.

For 2025, the **STAR Award** is presented to **Dr. Kathleen Allred SINCLAIR, PhD, OTR/L, FWOT, FAOTA**. Dr. SINCLAIR's lifelong dedication has shaped occupational therapy locally and globally. Through pioneering work in education, clinical practice, and international outreach, Dr. SINCLAIR has inspired generations of therapists and expanded rehabilitation services across continents.

Dr. SINCLAIR graduated in occupational therapy in 1967 from Washington University School of Medicine in St. Louis, MO. Since then, she has been actively developing occupational therapy services worldwide. As a young graduate occupational therapist, she joined the Peace Corps and spent two years in rural Korea, working in orphanages and clinics. In 1969, Dr. SINCLAIR continued her journey in Hong Kong, where she was one of just 25 expatriate occupational therapists. She worked in children's hospitals and for the Medical and Health Department.

In 1978, when the Hong Kong Polytechnic (HKP, now the Hong Kong Polytechnic University, HKPolyU) started an occupational therapy education programme, Dr. SINCLAIR became a founding faculty member. She has practised and taught occupational therapy in Hong Kong since then. Today, the Hong Kong Special Administrative Region boasts over 3,600 working occupational therapists. Dr. SINCLAIR's determination and focus in education have nurtured a tremendous number of occupational therapists who are now serving both locally and internationally, mimicking her path as dedicated occupational therapists.

In 1984, Dr. SINCLAIR represented the Hong Kong Occupational Therapy Association and successfully led the association to join the World Federation of Occupational Therapists (WFOT) as a member. WFOT has 111 professional organization members and represents over 680,000 OTs around the world.

## HKOTA STAR Award

Furthermore, Dr. SINCLAIR has driven the transfer of skills taught in Hong Kong to China. In conjunction with the Rotary Club of Hong Kong, she and her rehabilitation colleagues produced Putonghua videos and books that have been distributed as teaching aids for rehabilitation professionals throughout China. She has lectured and taught at many universities and teaching hospitals, including Shijiazhuang, Nanjing, Guangzhou, Hefei, Wuhan and Handan. Her consultancies have taken her to remote country areas where professional care for people with disabilities and methods of helping them lead meaningful lives were previously unknown.

Internationally, she has provided voluntary consultation in diverse countries such as Venezuela, Chile, Italy, Austria, Uganda, Zimbabwe, Kenya, South Africa, Singapore, South Korea and Thailand. Dr. SINCLAIR has served as chairperson of the Hong Kong Occupational Therapy Association and has held two terms as president of WFOT, the official representative of the occupational therapy profession worldwide. She has also been the editor of the prestigious WFOT Bulletin, the official journal of WFOT.

Throughout her tenure on the WFOT executive board, Dr. SINCLAIR has offered voluntary consultation for national associations and government ministries in developing occupational therapy services and educational programmes in South America, Africa, and Asia.

Representing WFOT, she has consulted with the World Health Organisation (WHO), the United Nations Department of Public Information, and other international non-government organisations. In 1998, Dr. SINCLAIR was named an honorary fellow of WFOT, the highest honour awarded by the organisation. In 2000, she was recognised as a fellow of the American Occupational Therapy Association (AOTA). She was also named a Rotary International Fellow for her outreach work in China, and the Chinese Association for Rehabilitation Medicine has named her a Special Consultant.

Dr. SINCLAIR continues to live in Hong Kong where she remains devoted to higher education and global advocacy for the occupational therapy profession. She has maintained her position as Adjunct Assistant Professor at Hong Kong Polytechnic University, where most of its 15 occupational therapy professors were her former students. She also serves as Honorary Professor in the Department of Rehabilitation at Tung Wah College in Hong Kong and as Adjunct Professor at Cebu Doctors' University in the Philippines.

Dr. SINCLAIR has a love of adventure and incorporates her occupational therapy interests with her passion for travel. Many wonderful opportunities have emerged throughout Dr. SINCLAIR's professional life. Hong Kong is honoured to have this magnificent lady who built the recovery path for our patients in need.

HKOTA celebrates Dr. SINCLAIR's remarkable achievements and unwavering commitment. Her legacy empowers occupational therapists to deliver meaningful care and foster recovery for those in need.

Congratulations to **Dr. Kathleen Allred SINCLAIR**, and heartfelt thanks for advancing the profession and making a lasting impact on communities worldwide.

**Hong Kong Occupational Therapy Association**
6 December 2025

# HKOTA STAR Award

## Heartfelt Gratitude for Your Support to Occupational Therapy in Chinese Mainland

**Dear Professor Kit SINCLAIR**,

We are writing on behalf of China Occupational Therapy Association to express our deepest appreciation for your enduring support and dedication to the development of OT profession in Chinese Mainland.

Your leadership has been instrumental in advancing education, practice, and global integration in our field. We are especially grateful for your commitment to enhancing OT education. Your insightful interpretation of WFOT's Minimum Standards for the Education of Occupational Therapists during academic exchanges—such as your memorable lectures in many universities, OT education forums and OT teachers training courses significantly broadened the perspectives of our students and especially our OT educators. Your expertise not only enriched our academic programs but also inspired a generation of OT professionals to strive for excellence. Your efforts in promoting the international recognition of China's OT initiatives have been pivotal. Through your guidance, we have established our China Occupational Therapy Association in 2017 and became a full member of WFOTin 2018, a historic milestone that has opened doors for collaboration and knowledge exchange not only national but also international level. This accomplishment not only validates China's growing role in global rehabilitation but also motivates our practitioners to engage more actively in worldwide dialogues. Moreover, your focus on elevating practice standards in diverse settings—from clinical environments to community-based rehabilitation—has fostered evidence-based and client-centered approaches across our mainland China. Your emphasis on culturally adapted methodologies has ensured that global standards are implemented in ways resonant with Chinese unique social and healthcare system. We also deeply value your attention to sustainable development, such as advocating for training programs that address language and culture barriers and supporting the inclusion of local resources. Your thoughtful approach has empowered our OT professionals to build resilient and inclusive models of care. As we continue to build upon the foundation you helped establish, we remain inspired by your legacy of innovation and collaboration.

We look forward to future opportunities to learn more from your expertise and to further strengthening ties between our OT association and other over sea OT professions. Please accept our heartfelt thanks for your extraordinary contributions. You have not only elevated professional standards but also touched countless lives through your work. We wish you continued success and warmly welcome you join with us again soon.

Yours sincerely

**China Occupational Therapy Association**
23 November 2025

# Occupational Therapy Education Programmes in Hong Kong

## Master of Science in Advanced Occupational Therapy
## The Hong Kong Polytechnic University


## Master in Occupational Therapy
## The Hong Kong Polytechnic University


## BSc (Hons) in Occupational Therapy
## Tung Wah College


## Master of Occupational Therapy
## The Education University of Hong Kong