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PHYSIOTHERAPY

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Content

Editorial

Mouths and Faces

Mr. Ivan YEUNG and Ms. Christine NG

Orofacial Myofunctional Disorders (OMDS) may be new to some physiotherapists. OMDS are disorders of muscles and functions of face and mouth, which may directly and/or indirectly affect facial skeletal growth and development, chewing, swallowing, speech, and temporomandibular joint movement, etc. Most OMDS are originated from insufficient habitual nasal breathing or with oral breathing. Orofacial myofunctional therapy (OMT) is an exercise training aiming to re-activate proper functions of facial muscles and to facilitate the coordination of facial muscles and the tongue. As physiotherapists are experts in muscle training, we endeavor to increase the awareness and use of OMT amongst our profession. In this issue, we are delighted to have Ms. Brigitte FUNG, a Senior Physiotherapist of Kwong Wah Hospital, to share her experiences and expertise applying OMT on different clienteles.

Physiotherapists working in the local public setting are well-known busy bees. How about the one works for Non-Government Organization? Following the story about a typical workday of Mr. Brian YAP, a Physiotherapist of the Buddhist Li Ka Shing Care and Attention Home for the Elderly, will give you the answer. We could also see how conventional physiotherapy combined with advanced medical technology nowadays can empower our elderly dwellers to enjoy their life in the community.

Learning from our experienced seniors is always treasurable. Mr. Charles LAI, the Department Head of the Physiotherapy Department of Shatin Hospital, was interviewed by two Year 4 Physiotherapy students, Nicholas and Francis from The Hong Kong Polytechnic University. Mr. LAI generously shared his invaluable managerial experiences and challenges in his Physiotherapist life. He also shared his viewpoints on recent hot topics, including new Physiotherapy programs in tertiary institutions and the standard qualification examination in Hong Kong.

Apology

An Apology for Underpaid Postage

HKPA

Please accept our sincerest apology for not paying enough to cover the postage on the upcoming course / talk materials. We will make sure that the same mistake will not happen again in the future.

Application of Orofacial Myofunctional Therapy in Physiotherapy

Ms. Brigitte Kim-yook FUNG
Senior Physiotherapist,
Kwong Wah Hospital

Orofacial myofunctional therapy (OMT) is a modality for the treatment of facial and oral muscles dysfunctions. It has been used for many years to eliminate poor oral habits, such as open mouth at rest and poor oral rest postures of the tongue and lips[1]. OMT was firstly advocated by an Orthodontic Dental Surgeon, Alfred Paul Rogers (1873-1959) who recommended the use of muscular exercises to improve neck, head, and tongue posture and encouraged nose breathing. He also produced color motion pictures in teaching patients correct exercises before and after appliance treatment[2]. Recently, there has been a growing recognition for the use of OMT worldwide, with a groundswell of sleep specialists recommending myofunctional therapy as an adjunct treatment for airway related sleep disorders. The Brazilian Sleep Society is the first national medical society adopts myofunctional therapy as a standard of medical care in the treatment of sleep disorders. The Asian Paediatric Pulmonary Society also adopts OMT as a standard of care with paediatric sleep apnea[3].

Components of OMT[4,5]:

1. ***Restoring Proper Rest Oral Posture (Figure 1)***

   The first step is to educate patient the correct oral habits such as proper resting posture of the tongue. It is important to remind the patients that the resting posture of the tongue should be placed at the "spot" which is located posterior to the first rugae or ridge posterior to the maxillary central incisors on the upper palate. Such posture can reinforce a good "suction-cup" effect over the hard palate, thus allowing the normal widening of the hard palate during growth.

2. ***Repattering of Facial Muscles (Figure 2)***

   Tongue exercises: to improve endurance of the tongue that aids proper position of the tongue on sleep. Facial exercises address the lip, buccinators and jaw muscles. All these aid proper posture of the jaw, thus minimizing mouth-breathing tendency.

3. ***Labial Seal and Lip Tone Exercise (Figure 3)***

   Lip exercises: to improve the lip tone thus improving closure of the mouth at rest. Nasal breathing rehabilitation is incorporated to improve the patency of nose and minimize irritation to tonsils.

4. ***Functional Posture Training (Figure 4)***

   Core stabilization exercises: to optimize the status of postural muscles. Head forward posture is corrected with both neck and scapular exercises.

There are several common applications of OMT in the following disease groups:

1. ***OMT and Obstructive Sleep Apnea (OSA)***

   Studies showed that OMT could reduce the severity of OSA[6,7]. A recent review by Felicio and coworkers concluded that OMT is effective for the reduction of Apnea-Hypopnea Index (AHI) and arousal index as well as an increased percentage of oxygen saturation in moderate OSA[8].

   OMT exercises with large number of repetitions at low-level of resistance would promote adaptation of Type I muscles. This type I muscles are fatigue-resistance fibers which constitute more than half of the muscle fibers in posterior region of the tongue[9]. Therefore, training of the tongue can improve tonicity of genioglossus muscles, major upper airway dilator muscles, at the most critical phase of sleep when severity of OSA worsens.

2. ***OMT and Mouth Breathing (MB)***

   Mouth breathing and lip hypotonia increase nasal resistance in children with OSA. MB might associate with malposition of the tongue and impaired development of craniofacial morphology such as retruded mandible and narrow maxilla[10].

(Continued on Page 3)

Prevalence of MB syndrome ranges from 12 to 55% in children[11]. Traditionally adenotonsillectomy (T&A) can improve OSA but cannot eliminate it. Persistent prevalence of MB after T&A was suggested as one of the reason why T&A could not cure OSA[12]. It was observed that the group of post T&A children (n=9) who received OMT had a more significant improvement over OSA symptoms than the group (n=9) without OMT. In a recent study by Villa et al, it was found that OMT reduced MB (83.3% versus 16.6%, p<0.0002) amongst 54 children[13].

3. *OMT and Others*

A recent systematic review showed that OMT reduced snoring in adults based on subjective questionnaires and sleep studies[14]. It was suggested that the snoring intensity was reduced by 51% in 80 patients from pre-therapy to post therapy visual analogue values. Time spent snoring during sleep was reduced by 31% in 60 patients.

Another study was done to compare the treatment efficacy of low level laser therapy (LLLT) alone and OMT with LLLT[15] on treating temporomandibular disorders. It was found that the OMT with LLLT was more effective in promoting TMD rehabilitation by the LLLT alone.

Short lingual Frenulum (tongue tie) is associated with oral-facial dysmorphosis. Tongue tie decreases the size of upper airway support and increases the risk of upper airway collapsibility[16]. In a Spanish study, OMT was included in the rehabilitation pathway of 101 frenectomies and had reported 96% of correction. It was suggested that OMT should be implemented as early as one week before the frenectomy[17].

To conclude, Orofacial myofunctional therapy is an emerging field in medicine. Being a physiotherapist who is an expert in muscle training should take note of the anatomy and relationship between tongue, lips, neck and core muscles. More evidence in recent years on the use of OMT for different disease groups justifies the importance of the orofacial muscles training. Are the previous examinations that we did were only "tip of the iceberg"? Our physiotherapy examinations on a patient should include the lip and tongue in order to have a holistic approach in the treatment plan.

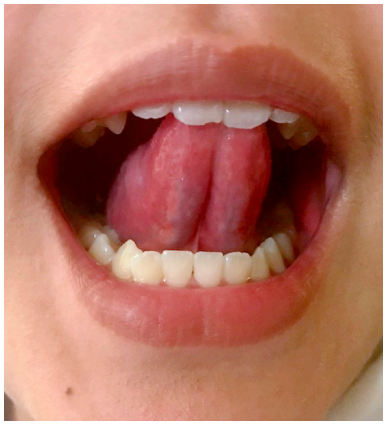

Figure 1. The spot

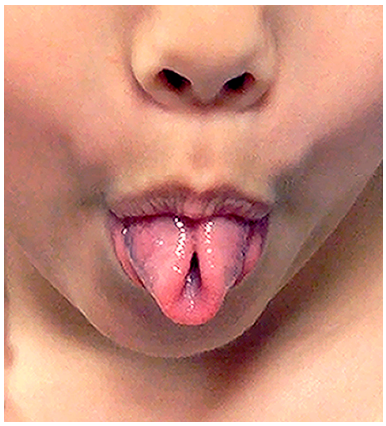

Figure 2. Tongue exercise

Figure 3. Nasal breathing Exercise

Figure 4. Functional postural training exercise

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CPD News

Enquiry of CPD News and Activities Please Visit

http://www.hongkongpa.com.hk/cpd/doc/CPD%20All.xls

A Busy Day of a Physiotherapist Working in Care & Attention Home for the Elderly

Mr. Brian YAP
Physiotherapist,
Buddhist Li Ka Shing C&A Home For The Elderly

What's really like to be a physiotherapist working in Non-Government Organization? Let me show you my work diary on a usual yet busy day.

Date: 11th June 2019 (Tuesday)

- **8:30am**

  Arrive at my workplace. Working hour starts at 8:45am but it is always good to arrive early.

- **8:45am**

  Preparing for today's schedule and getting myself ready for the first gym session of the day. Normally, there are four gym sessions every day, two in the morning and two in the afternoon. Each session lasts for one hour; and every Tuesday the third gym session is replaced by a group session. Today I need to lead this activity and exercise group for elderly clients in the afternoon, and I am now using half an hour to prepare for it.

- **9:15am**

  First gym session starts. I need to provide physiotherapy treatments to clients who are the residents in this elderly home. Usually they perform exercises with a variety of equipment available in the gym; whist other clients suffer from musculoskeletal joints pain will have electrical therapies such as ultrasound therapy or other thermal therapy such as electric heat pad. Clients receive different exercise regimens according to their physical conditions; which include active and passive mobilization, strengthening exercises and balance training. Physiotherapy assistants will also assist in gym session to assure clients safety.

- **11:00am**

  Today I need to attend a case conference to discuss and review my clients' physical assessments, conditions and training progress. Case conference is normally held every two to three months. Team members of Physiotherapist, occupational therapist and nurse-in-charge, will attend the case conference. Newly admitted resident together with their family members are also invited to join the conference. As a physiotherapist, I will report physiotherapy assessments, treatment plans, short-term and long-term goals of my clients. Their family members will also give feedbacks and express their expectations in the conference. I think this is a good platform for us to communicate.

- **2:15pm**

  After lunch, I lead a 45-minute group session with daycare clients. Today there are 7 clients in the group. We sit in a circle and play fun games. Through playing games, clients can learn how to perform an interactive group task by physical, cognitive and memory trainings. To me, the most challenging part of this session is to engage them in participating the game, as they all have different physical and mental abilities.

(Continued on Page 6)

- **3:15pm**

  This is the last gym session today. I select one of my clients to use our new equipment, which is lower limb ergometer with virtual reality stimulation. Visual stimulation makes exercising more entertaining, especially for those who spend most of their time staying in the elderly home. My client is very interested and excited in doing this exercise, it seems like she is controlling her cycling speed and riding a bicycle on street. With the development of advanced medical equipment and technology nowadays, the role of gerontechnology in rehabilitation facilitates and enhances physiotherapy treatments in elderly homes.

- **4:30pm**

  Finish the last gym session today. I need to write down my clients' progress notes for there is any change of physical conditions, treatment regimens and treatment plan. Normally, progress notes are updated on a weekly basis unless there is any sudden change in condition.

- **5:15pm**

  Officially off-work today.

An Interview with Mr. Charles LAI

Date : 14 June 2019
Venue : Shatin Hospital
Interviewee : Mr. Charles LAI
Head of Physiotherapy Department,
Shatin Hospital
Interviewers : Mr. Nicholas TO, Mr. Francis LI
PolyU BSc (Hons) Physiotherapy Year 3 students

Q1

What motivates you to work at the public sector?

A1

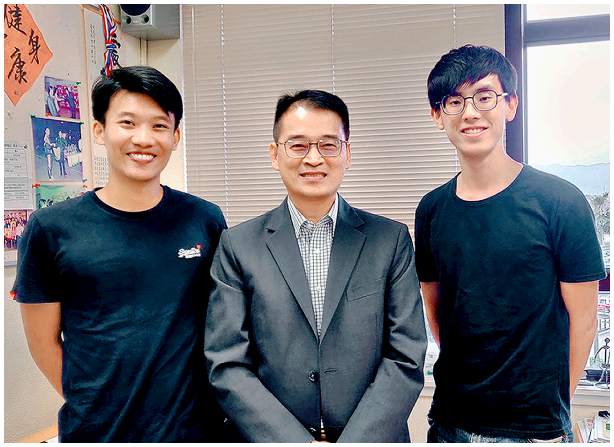
There are several reasons why I chose to work in the public sector. When I graduated from the Hong Kong Polytechnic in early 1980s, working in the public hospitals under Medical and Health Department of Hong Kong Government, was more common than working in subvented hospitals, or non-governmental organizations (NGO). In addition, I wished to serve the public using the knowledge and skills I reaped from my undergraduate training. Apart from that, working in public hospitals could grant me comprehensive exposure to various settings and specialties that could enhance my professional development. There were postings to different hospitals and settings about every nine months when I was a junior physiotherapist. I had the chance to work in acute, extended care hospitals, in-patient and out-patient setting, and in most clinical specialties including medical, surgical, orthopedic, and pediatric teams. This opportunity expanded my repertoire, consolidated the knowledge I learnt in undergraduate training. Monetary reward was not my major concern as salary in public and private sector was not significantly different.

Q2.

How would you recommend new graduates to choose between public, NGOs, and the private sector?

A2.

In my opinion, first few years after graduation as a consolidation phase is of utmost important. This consolidation phase helps students to build



Mr. LI, Mr. LAI and Mr. TO (from left to right)

a solid foundation, allowing them to pave their career pathway. I would recommend working in public sector as higher priority. This could provide students with greater exposures and learning opportunities in various clinical specialties and settings. Specifically, the Training and Development Program for Newly Recruited Allied Health Professionals ("三年抱兩" 計劃) in the Hospital Authority provides fresh graduates precious opportunities to work in two different settings and three specialties within three years. These include acute, extended care, community, in-patient and out-patient settings. Additionally, new graduates are posted to work in various specialties, for example, medical, surgical, gynecological, paediatric and orthropaedic wards, not to mention geriatric, neurosurgical, and psychiatric wards. After being exposed to these settings and specialties, students would be able to explore and develop their career in their interested fields with solid foundation. As compared to private sector and NGOs, learning opportunity in the Hospital Authority is clearly more comprehensive. Anyhow, students should also have a clear mindset in their career plan so that they can apply their extensive knowledge to treat our patients.

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Q3.

What are the challenges of working as a PT department manager?

A3.

Unlike frontline PT, the nature and the scope of work as a PT department manager is far more comprehensive and complicated. A PT department manager must be familiar with all specialties under his/her management portfolio so as to assure and monitor both quality and quantity of service provided by the department. A PT department manager is also accountable to different stakeholders, including hospital chief executive, colleagues, subordinates, patients and patients family. Through appreciating the expectations from different levels, my job is to prioritize patient service as the fundamental target, while addressing the concerns of various stakeholders. For example, handling complaints and requests from patients, reporting to the hospital senior management about annual plans, service quality and outcome, managing human resources and financial resources, etc.

Q4.

You are the vice-president of HKPA, one of the council members of HKPGA (Hong Kong Psychogeriatric Association) and you are also the tenure of office at SMPC (Supplementary Medical Professional Council). What motivates you to take up other roles in addition to your primary role as a PT?

A4.

As a professional PT, devoting to my profession and staying aware of different issues of the field is a professional obligation. By taking up different roles, I aspire to contribute to the development of our profession through different platforms. Additionally, I have gained many opportunities to learn from different people by taking up these duties. I have been meeting people from different professional sectors and these encounters have widened my horizon, enabling me to look at things from various perspectives. I believe that the benefit is mutual. I have gained a lot in terms of personal growth and professional development by contributing to our profession.

Q5.

More institutions are planning to implement PT programmes. Do you see the need of having a standard qualification examination?

A5.

This is indeed a very controversial issue. I would like to bring in a few perspectives regarding this topic. According to the Physiotherapists (Registration and Disciplinary Procedure) Regulation, locally trained graduates, which means PT graduates from PolyU, shall be qualified to register as physiotherapists. Since 1980s, PolyU's PT curriculum has reached the standard of the World Confederation for Physical Therapy (WCPT). If the curriculum from those new institutions are benchmarked against the standard of WCPT and are granted and recognized for professional accreditation from the PT Board, the qualification of the graduates will be equivalent to those at PolyU. If that is the case, I believe that there is no immediate need to implement a standard qualification examination.

At the marco-level, according to the report of strategic review on Healthcare Manpower Planning and Professional Development, in the coming 10 years, the shortage of PT manpower will persist. Pragmatically, the implementation of a qualification examination system may affect the overall manpower supply. Furthermore, for years, there has been no entrance examination requirement for overseas PT graduates to register as physiotherapists but only an assessment of application through evaluation of the curriculum by the PT Board. I have been the Board member and the Chairman of the Preliminary Investigation Committee (初級偵訊委員會) of the PT Board, which is responsible for dealing with complaints regarding registered PTs. As far as I could remember from those complaint cases, these did not suggest any significant problem with the quality of our professional PT practice in Hong Kong. If the quality can be maintained at a reasonable standard, I don't see an immediate need to implement a standard qualification examination.

Sexual Relationship with a Former Patient (III)

Mr. Bronco BUT
Honorary Legal Advisor of HKPA

The last issue of Physiotherapy News Bulletin discussed the hypothetical scenario of a physiotherapist having sexual relationship with a former patient. The following issues were raised for discussions:

1. Is it always a misconduct for a physiotherapist to enter into a sexual relationship with a former patient?
2. If not, then in what circumstances is it a misconduct?
3. If it is a misconduct at one point, at what subsequent point in time, if any, does it cease to be misconduct?
4. Did Mr. N's conduct constitute "Unprofessional Conduct"?

Discussions

1. It was concluded in the last issue of Physiotherapy News Bulletin that in this hypothetical case the imbalance of power between Mr. N, the Practitioner and the patient which existed during the course of the formal clinical relationship continued after the conclusion of the consultation on 30 December 2013, and that there was therefore a real risk of the Practitioner being able to exploit the relationship, that he failed to maintain proper professional boundaries between himself and the patient, and that he therefore breached the Physiotherapists Code of Practice by entering into the relationship.

2. It is well established that not every breach by a practitioner of the physiotherapists' Code of Practice pertaining to his or her profession necessarily constitutes a professional "offence" which should attract a penalty. Accordingly, the next issue is whether that breach by the Practitioner of the Code of Practice constitutes "Unprofessional Conduct" in terms of the Code of Practice.

3. In considering that issue, the following may be the critical factors to be considered by the physiotherapists' Board:

    3.1 There was a significant age gap between Mr. N, the Practitioner and the patient, with the Practitioner being the patient's senior by more than twenty years;

    3.2 This was a standard professional engagement involving a lay patient. As a result, there was an imbalance insofar as clinical knowledge was concerned.

4. The considerations that have identified might lead the physiotherapists' Board to conclude that there was in this case a significant power imbalance in the relationship between Mr. N, the Practitioner and his former patient, which certainly had the potential to undermine the latter's capacity to make an independent judgement. The power imbalance was not of the magnitude which would exist between our hypothetical senior psychiatrist and his young patient, but appreciably greater than any power imbalance which might be said to exist between our junior practice nurse and his or her senior medical practitioner patient. The physiotherapists' Board might take this view that the power imbalance might render it improper for the Practitioner to embark upon any romantic or sexual relationship with this former patient.

5. A physiotherapist is guilty of "Unprofessional Conduct" when he, in the pursuit of his profession, does something or omit to do something, which in the opinion of his professional colleagues of good repute and competency, might be reasonably regarded as disgraceful or dishonourable or which falls below the standard of competency that such a colleague might regard as reasonable.

6. The physiotherapists' Board might take the view that professional colleagues of good repute and competency might opine that the conduct might be regarded as disgraceful or dishonourable. Accordingly, the physiotherapists' Board might conclude that the Practitioner's behaviour constituted Unprofessional Conduct.

Conclusion

The golden rule for all physiotherapists is to avoid entering into sexual relationship with former patients. It is advisable to seek independent legal advice of necessary.

Meeting with representatives of the Hong Kong Association of Health Care Professionals

Date : 22 July 2019
Venue : A restaurant in Central
Physiotherapists : Prof. Marco PANG and Mr. Brian MA

A meeting was held to discuss the planning of activities for celebrating the 70th anniversary of the founding of the People's Republic of China.

Health Topic Interview by "U Magazine"

Date : 26 July 2019
Physiotherapists : Mr. Sam WAN and Mr. Eric LI

Mr. Sam WAN and Mr. Eric LI, on behalf of HKPA, were interviewed by a local media, U Magazine. The health topic is "Postural Problem Induced Back Pain". Mr. WAN and Mr. LI explained the anatomy of lumbosacral region and the mechanism of poor posture with excessive anterior pelvic tilt induced back pain. They also advised practical tips on back care and demonstrated useful back exercises to the general public.

Study Visit to Smart Elderly Centres in the Greater Bay Area 大灣區智慧長者院舍考察

Date : 1 August 2019
Venue : Futian Welfare Centre and the Country Place Senior Living in Huizhou
Physiotherapist : Dr. Ivan SU

HKPA was invited to a study visit organized by the Hong Kong Productivity Council on 1 August 2019. Around 20 local elderly service providers, gerontechnology developers and product distributors participated in the visit. Practical applications of gerontechnology in various elderly settings were showcased and demonstrated. The event also served the purpose of building connections among elderly institutions, gerontechnology industry, and professional bodies between Hong Kong and the Great Bay Area. Dr. Ivan SU, on behalf of HKPA, attended the visit and advocated a train-the-trainer approach to ensure quality care in the use of such technologies. Hong Kong healthcare professionals might share this training model to potential trainers in the Greater Bay Area.

Dr. SU and the visitors at the Country Place Senior Living in Huizhou

Second Workshop on "Orthopaedic Rehabilitation in the Greater Bay Area"

Date : 3 and 4 August 2019
Venue : Huadu District People's Hospital of Guangzhou
Physiotherapist : Ms. Roselyn CHAN

Second Workshop on "Orthopaedic Rehabilitation in the Greater Bay Area" was jointly organized by HKPA and Association of Hong Kong Health Care Professionals on 3 and 4 August 2019. Objectives of this workshop were to enhance orthopaedic rehabilitation skills and knowledge of healthcare professionals in the Greater Bay Area.

Demonstration of rehabilitation skills in the workshop

Group photo of participants in the workshop

Ming Pao Series

Date : 5 August 2019 and 2 September 2019
Physiotherapists : Mr. Johnson SIN and Mr. Calvin KWAN


長揸滑鼠 揸出媽媽手
拇指肌發炎 扭門匙都痛

DeQuervain Syndrome


腳跟刺痛 足底筋膜炎作惡
長站勞動族高危

Plantar Fasciitis

Meeting to Discuss Progress of Direct Access Issue on Modified Referral System for Physiotherapy Services

Date : 7 August 2019
Venue : Hong Kong Polytechnic University
Physiotherapists : Prof. Marco PANG, Ms. Judy WONG and Ms. Annabella SUEN

HKPA EC members attended a meeting with Ms. Violet Choy, Convener of the Working Group on Implementation of Modified Referral System for Physiotherapy Services. In the meeting, progress of work on physiotherapy direct access issues and the way forward were discussed.

Hong Kong Society for Rehabilitation - Dialogues on Primary Health Care

Date : 8 August 2019
Venue : Dream Impact, Lai Chi Kok
Physiotherapists : Prof. Marco PANG and Dr. Ivan SU

In the meeting, speakers highlighted the role of the physician, nurse and pharmacist in the primary health care service model. Prof. PANG also expressed his strong view that physiotherapists play a critical role in the prevention and management of chronic diseases, as well as patient education.

The 1st Meeting of the Management Committee of the Kwai Tsing District Health Centre

Date : 9 August 2019
Venue : Room 1801,
18/F, East Wing, Central Government Offices
Physiotherapist : Dr. Ivan SU

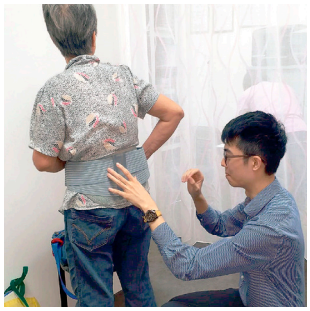
HKPA was invited by Primary Healthcare Office (PHO) of Food and Health Bureau (FHB) to nominate a physiotherapy representative from social and private sector as one of the Management Committee members in Kwai Tsing District Health Centre (KTDHC). After the selection process, Dr. Ivan SU was appointed as the Management Committee member. A VIP visit to the KTDHC was arranged and the first management committee meeting was held on 9 August 2019. The meeting was chaired by Dr. Cissy CHOI (Head of PHO). Attendees included Dr. CHUI Tak-yi (Under Secretary for FHB) as one of the official members, Dr. Teresa LI (Assistant Director, Department of Health) as one of the ex-official members; and Dr. SU with other 4 representatives from different professions as non-official members. In the meeting, Dr. SU raised the concern on distinguishing between the role of post-acute rehabilitation currently provided by NGOs and future DHC tertiary prevention programs, as all of the clients' referrals are issued from the Hospital Authority. Main office of the KTDHC locates on the 30th floor of Tower II Kowloon Commerce Centre, Kwai Chung. It occupies 15,000 square feet and will provide primary, secondary and tertiary prevention programs on chronic diseases management. Manpower includes nurses, physiotherapists, occupational therapists, dietitians, pharmacists and social workers. Full functions will be commenced by end of September 2019.

VIP visit to the Kwai Tsing District Health Centre on 9 August 2019

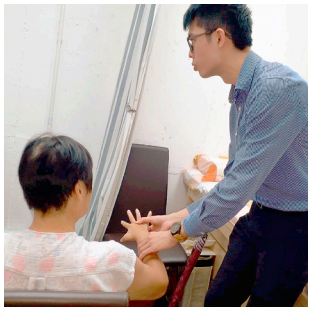
《義診義講♡健康關愛月》Voluntary Physiotherapy Services

Date : 15 and 22 August, 3 and 12 September 2019
Venue : 關愛病患基金會葵青區服務中心
PhysiotherapistS : Mr. Calvin KWAN and Mr. Gorman NGAI

《義診義講♡健康關愛月》involved a series of activities co-organized by Love & Care for the Sick Foundation Limited, Wong Bing Kuen District Council Member Office, and HKPA. The activities included free consultation services provided by voluntary medical doctors, physiotherapists and nurses, blood glucose tests, blood pressure measurements and health talks. Mr. Calvin KWAN and orthopaedic doctors provided free assessments and treatments to 24 older people in August and September. Mr. NGAI and medical doctors also provided treatments to older people in September.



Mr. KWAN was providing treatment to a senior



Mr. KWAN was assessing a patient

3rd World Conference on Exercise Medicine 2019 in Kuala Lumpur

Date : 16-18 August 2019
Venue : Malaysia
Physiotherapist : Mr. Sam WAN

Mr. Sam WAN, on behalf of HKPA, was invited by the organizing committee of World Conference on Exercise Medicine 2019 to share physiotherapy management of knee osteoarthritis. Mr. WAN also conducted a workshop to demonstrate knee assessment skills and exercises on osteoarthritic knee patients.

Mr. WAN conducted a workshop to demonstrate knee assessments and exercises

Mr. WAN received a certificate from the organizing committee

World Transplant Game 2019 - Newcastle, the United Kingdom

Date : 17 to 23 August 2019
Venue : Newcastle, the United Kingdom
Physiotherapists : Ms. Cynthia SUNG and Mr. Chris KWOK

Ms. Cynthia SUNG and Mr. Chris KWOK were invited as Hong Kong team physiotherapists to provide pre-game exercise stress test, on-field physiotherapy service, physiotherapy clinic service and onsite coaching service. In the game, the Hong Kong team won 14 gold medals, 6 silver medals and 14 bronze medals, and broke world records in 7 different events.

Annual Dinner Committee Meetings by Hong Kong Association of Health Care Professionals

Date : 12 August 2019 and 2 September 2019
Venue : 中環皇后大道中138號威享大廈13樓B室
Physiotherapists : Prof. Macro PANG and Mr. Brian MA

HKPA was invited by Hong Kong Association of Health Care Professionals as one of organizing committee members for an annual dinner on 19 Sept 2019.

Meeting with leadership of Sik Sik Yuen on Future Collaborations

Date : 22 August, 2019
Venue : Wong Tai Sin Plaza
Physiotherapists : Prof. Marco PANG and Dr. Billy SO

On behalf of HKPA, Prof. PANG and Dr. SO attended the meeting and discussed with the representatives of Sik Sik Yuen about future collaborations. Launching of a collaborative flagship program on child health was particularly highlighted. This program will provide outreaching services in different communities and a kick-off ceremony will be held in January 2020. It will also be presented in the World Physiotherapy Day Celebration in 2020.

深水埗基層健康發展 - 推動「醫社民合作」論壇

Date : 24 August 2019
Venue : Dream Impact
Physiotherapist : Dr. Arnold WONG

The Hong Kong Society for Rehabilitation held a forum to solicit opinions from different stakeholders regarding the District Health Center in Shum Shui Po. Dr. Stephen Kam-So FOO (Past President, Honorary Fellow of The Hong Kong College of Family Medicine), Mr. Yik-Ho CHOW (President of Kwai Tsing Safe Community and Healthy City Association), Mr. William Chun-Ming CHUI (President of The Society of Hospital Pharmacists of Hong Kong), and Mr. Siu-Lam YUEN (Chairman of Hong Kong Alliance of Patients' Organization Limited) were four invited speakers to share their experiences of patient self-help groups, education, drug compliance and drug consultation in the primary care setting. After the sharing session, Professor Albert LEE (Director of Center for Health Education and Health Promotion, Jockey Club School of Public Health and Primary Care) acted as the moderator of panel discussion. Dr. WONG raised a question regarding the role of Physiotherapists in primary care. All panel members deemed that physiotherapists play a very crucial role in primary care by providing education, assessments, and exercise prescription for patients with non-communicable diseases.

From left to right: Prof. LEE, Mr. CHUI, Dr. FOO, Mr. YUEN and Mr. CHOW in the panel discussion session.

Group photo of Dr. WONG, speakers and forum organizers.

Inauguration Ceremony of Department of Rehabilitation Sciences, The Hong Kong Polytechnic University

Date : 28 August 2019
Venue : The Hong Kong Polytechnic University
Physiotherapist : Professor Marco PANG

Prof. PANG attended the RS Inauguration Ceremony, Academic Year 2018-19 on behalf of HKPA. In the Ceremony, Prof. PANG presented the Outstanding All-rounded Student Award and the Best Student Project Award.

The Outstanding Students gladly received the Awards from Professor PANG.

RTHK Daily 8:30 interview

Date : 9 September 2019
Venue : RTHK Head Office
Physiotherapist : Mr. Willis CHAN

Mr. CHAN was invited by RTHK Daily 8:30 to share his experience regarding sports injury prevention and pain management.

Mr. Willis CHAN (middle) sharing in RTHK Daily 8:30.

A Dinner Organized by Hong Kong Medical Association and Hong Kong Dental Association

Date : 10 September 2019
Venue : The Academy of Medicine, Wong Chuk Hang
Physiotherapist : Prof. Marco PANG

Prof. PANG attended this event on behalf of HKPA.

Meeting with PT Board Chairman

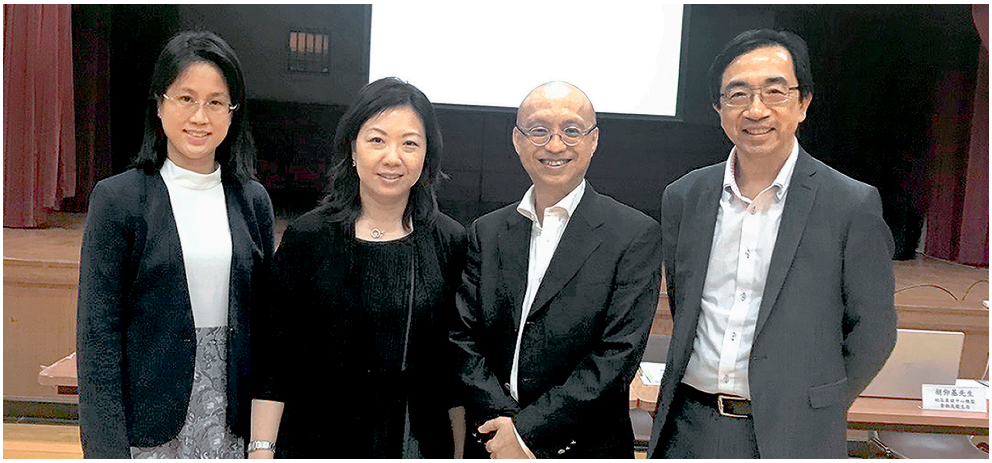
Date : 11 September 2019
Venue : Wu Chung House, Wan Chai
Physiotherapist : Prof. Marco PANG

A meeting with the PT Board Chairman was held to discuss several important issues, including accreditation of new PT education programs, mandatory CPD, and direct access.

Wong Tai Sin District Health Centre Service Partner Forum

Date : 12 September 2019
Venue : Wong Tai Sin Community Centre
Physiotherapist : Dr. Ivan SU

HKPA was invited by Primary Healthcare Office (PHO) to attend the Wong Tai Sin (WTS) and Sham Shui Po (SSP) District Health Centre (DHC) service partner forums. Dr. Ivan SU, on behalf of HKPA, attended the WTS Forum. It was announced that premises have been identified and reserved for the main offices of the SSP and WTCDHC. SSP DHC main office will be completed by the third quarter of 2019 while WTCDHC in 20/21. Service bidding announcement will be made in due course. In the forum, Dr SU raised the concern of non-renewable arrangement of physiotherapy session number cap for tertiary prevention of target chronic conditions; and the issue of flat-rate arrangement for each physiotherapy session might prevent the patients from receiving appropriate rehabilitative intervention that requires surcharge (for examples, shockwave therapy and robotic exoskeleton training). The panel suggested that top-up service on user-pay principle would be applied.



From left to right: Dr. Wanmie LEUNG (Deputy Head, Department of Health Office), Dr. Cissy CHOI (Head, PHO), Dr. Ivan SU (HKPA), Mr. Jimmy WU (Director, DHC Team).

Promotion of HKPA Membership to Physiotherapy Students

Date : 16 September 2019
Venue : Tung Wah College
Physiotherapist : Prof. Marco PANG

Prof. PANG met up with Year 1 physiotherapy students at Tung Wah College to promote HKPA student membership.

Prof. PANG (2nd from the Left) with Dr Grace SZETO (3rd for the Left) and other Tung Wah College representatives.

Annual Dinner Organized by the Hong Kong Association of Health Care Professionals

Date : 19 September 2019
Venue : City Hall, Central
Physiotherapists : Prof. Marco PANG, Mr. Charles LAI, Ms. Annabella SUEN, Mr. Brian MA, Ms. Mandy MAK and Mr. Sam WAN

The event was attended by professionals from different healthcare disciplines.

Prof. PANG, Mr. LAI, Mr. WAN, Ms. SUEN, and Ms. MA and Prof. David SHUM (Dean of Faculty of Health and Social Sciences, PolyU).

Lower Quarter – Peripheral Joints, Lumbar Spine and Sacroiliac Joints (Mulligan Concept)

Date : 21 and 22 September 2019
Venue : GH016, The Hong Kong Polytechnic University
Physiotherapist : Mr. Gorman NGAI

It has been a while Mulligan Course has not been arranged by HKPA. Twenty-two participants enjoyed the course so much with very practical skills and enjoyed a very nice weekend with Gorman. With the consideration of overwhelming application, more courses for Mulligan Concept will be arranged in the future.

Look forward to seeing you again in the coming courses!!!

Promotion of WCPT-AWP Congress 2020 at the 17th Congress of Japanese Society of Neurological Physical Therapy (JSNPT)

Date : 28-29 September 2019
Venue : Pacifico Yokohama, Japan
Physiotherapists : Prof. Marco PANG and Dr. Ivan SU

A free exhibition booth was given to HKPA to promote the WCPT-AWP Regional Congress at the 17th Congress of JSNPT 2019. This was a large conference with more than 2,000 delegates. Prof. PANG gave an oral presentation of his study on stroke rehabilitation. He also grasped the opportunity to promote WCPT-AWP Regional Congress 2020 in Hong Kong. The Department of Rehabilitation Sciences of The Hong Kong Polytechnic University will be the co-organizer.

From left to right: Mr. Tetsuya TAKAHASHI (JPTA), Mr. Kazuto HANDA (President of JPTA), Prof. Marco PANG, Mr. Yasushi Uchiyama (Vice President, JPTA), Mr. Koji OHATA (JSNPT)

Prof. PANG and Dr. Ivan SU at the HKPA exhibition booth

Prof. PANG gave his presentation in the congress

More than 2000 delegates attended the congress

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