



Hong Kong Psychogeriatric Association Ltd.

香港老年精神科學會

c/o Psychogeriatric Team, Castle Peak Hospital, Tuen Mun, N.T. HONG KONG

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Date : 12 March 2008

Hon Frederick FUNG Kin-kee, SBS, JP
Chairman
Subcommittee on Elderly Services
Panel on Welfare Services
Legislative Council
Legislative Council Building
8 Jackson Road
Central
Hong Kong

Dear Hon FUNG

I write on behalf of the Hong Kong Psychogeriatric Association. The Association is formed by professionals working in the field of Mental Health for the Elderly and includes doctors, nurses, social workers and the like.

We understand that your Committee is debating on issues relating to residential services for the elderly particularly concerning service quality of Private Old Age Homes. This is an area of great interest to our Association and therefore we would like to express our views.

1. There is a recent news (see attached) about an elderly man suspected to be suffering from mental illness hurting a female resident in the same Private Old Age Home. The injured soon died. This is most tragic and unfortunate.
2. This is, however, not an isolated incident. The Association has a rough estimate that up to 20,000 elderly residing in Private Old Age Homes are suffering from various degree of mental problem. A significant proportion of these would need professional help.
3. The Government has moved wisely in its latest budget by creating a limited outreach service to Private Old Age Home. This would help about 10% of the 500 plus Private Old Age Homes. The Association applauds this move but thinks that the Government should go much further by providing this service to *ALL* Private Old Age Homes in the next one to two years.

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4. This would then allow timely professional help to all residents in Private Home with mental disorders or behavioural problem. This would also mean the residents can get the help in a non-stigmatising way.
5. In due course, the Association hopes that restraint to resident with behavioural problem and improper use of sedative medications in Private Homes will be decreased or stopped.
6. The Association believes that manpower planning and staff training are also vital to improving the quality of Private Old Age Home.
7. The Association is most happy to assist the Committee further if needed. We would also be grateful if a representative from the Association is able to attend your Committee Meeting.

Yours faithfully

Dr. LI Siu-wah

President

The Hong Kong Psychogeriatric Association

患精神病會打人 覆診還須等半年 躁狂翁涉舞凳扑死女院友

灣仔護老院發生女院友遇襲兇殺案，一名躁狂老翁被醫院驗出有**精神病**，前日上午已排快期覆診，但仍要等半年後，埋下「計時炸彈」即晚終**爆發**，老翁涉持鋁凳襲擊一名長期臥病女院友，令其頭部受重創，送院後死亡，老翁被捕，警方列兇殺案處理。至於女死者是遇襲致死抑受驚過度嚇死，有待剖屍驗明。

兩名有不同嚴重病患長者同住一家護老院，釀一死一被捕兇殺案。有立法會議員炮轟政府**醫療服務不足**，指出本港**醫療服務**「樣樣有，但樣樣都不足」，提出討論**醫療服務**方案一年多，但政府無動於衷，致使悲劇不斷重演，反映當局忽視**醫療服務**。

案發現場為莊士頓道十八號嘉寧大廈三樓瑞康護老中心，面積三千多呎，分男、女院友區，約有六十名長者住宿。女死者盧焯珍，七十八歲，入住中心多年，因患心、腎衰歇，需長期臥牀。被捕老翁姓江，七十五歲，無親無故，一年多前由灣仔一個家庭服務中心轉介入住。

院方建議提早覆診不果

中心姓呂負責人表示，去年十一月發現江情緒不穩，脾氣暴躁，自言自語常吵鬧，有**精神病**徵狀，開始留意其舉動。十二月十七日江病發，持木板敲打，有襲擊他人傾向，職員報警將他送院，醫生診斷證實江有**精神病**，排期達一年，今年十二月一日才回東區醫院覆診，江被送返護老中心。

呂稱，**精神病人**要等一年才覆診，時間太長不合理，要求盡早接受治療，但向有關政府部門求助卻不獲受理。今年一月十四日江病發欲打人，職員報警將他再送院，但覆診日期沒變，只安派精神科護士兩日後到護老中心探訪。該護士前日早上再到護老中心，發覺江病情惡化，建議提早覆診，但亦要排期至今年八月一日，護老中心無奈接受。

死者腎腫脹疑受驚過度

前晚深夜十一時許，江突破口大罵，衝入女院友區，一名女護士勸阻，但有人激動奪取一張有靠背鋁通凳揮舞，混亂中臥牀盧婦在毫無躲避能力下被扑中頭流血，其他職員和院友合力搶去鋁凳，將疑人制服報警，並通知盧的家人。

救護員到場為盧婦止血，然後由家人陪同送院搶救；涉嫌傷人老翁情緒激動亦送院治療。消息稱，醫護人員為盧婦傷口縫針後，發覺她的腎出現腫脹，不排除受驚過度，惜經搶救後不治，警方列作兇殺案處理，拘捕姓江老翁。