



## Service Priorities and Programmes Electronic Presentations

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### **Kaizen\_project - Introduction of Health Qigong with OT colleague**

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#### **Introduction**

As Occupational Therapists, we believe that “occupations” shape human health and well-being, and so selection of meaningful activities of training is paramount important. Use of Health Qigong (HQG) as a training medium has been gaining its popularity across different cultures. HQG has been defined as a traditional Chinese national sport event (HQG Administration Center 國家體育總局健身氣功管理中心, and the Chinese HQG Association 中國健身氣功協會). It emphasis on a state of balance of “Body Regulation”, “Breathing Regulation” and “Mind Regulation” (Xiang, 2006). More and more RCT studies have been conducted, supporting the use of HQG in various diseases, e.g. hypertension, diabetes, cancer, COPD, cardiac diseases, pain management, etc. (Quo, Zhou, Nishimura, Teramukai, and Fukushima, 2008; Liu, Miller, & Brown, 2007; Chen, 2002; Ng and Tsang, 2009; Stenlund, Lindstro, Granlund and Burell, 2004; Wu, Bandilla, Ciccone, Yang, Cheng, Carner, Wu and Shen, 1999). At present, the Health Qigong Administration Center has standardized four forms of HQG and one of it is “Ba Duan Jin” (BDJ). Training of HQG for OT colleagues in HK started in 2005. Since then, various local trainings have been conducted by the HKOTA and the HQG Administration Center. Many local therapists have been already certified as HQG coaches and some of them have even achieved the technical degree of “Duan” level.

#### **Objectives**

The aim of this Kaizen project is to promote health by establishing a regular HQG training habit to all OT staff in TMH MB & RB. In addition, the use of HQG as an activity for patients’ training can also be explored with more colleagues having acquired the knowledge and skills.

#### **Methodology**

Method: The training is led by certified coaches. It starts at 8:35 (from Mon to Fri, before our daily work with patients start); with 3-5 mins’ warm up exercise and then the 12 mins’ training of BDJ, and then 2-3 mins’ cool down exercise. Colleagues participate on a voluntary basis. The first phase of training started on 16-9-2013 with 10 OTs and 9 supporting staff from the RB Medical Team. The second phase was

launched on 28-10-2013, with 10 OTs and 4 supporting staff in RB 4/F. Evaluations: Evaluations are based on two folds. Firstly, feedbacks from those regularly receiving training were collected after 3 months' time. A self-designed questionnaire composed of 7 questions was used in this survey. Secondly, days of sick leaves of participants having regular training were compared with (1) same group in same duration (Oct-Jan) in previous year and (2) those who have not been involved as a control.

### **Result**

33 colleagues received training regularly. We have received 30 questionnaires for evaluation. Results showed that 57% of the colleagues would only practice BDJ during the routine training. 40% of them would have 1-2 times (per week) self-practice, and only 3% of them has 3-4 times of self-practice per week. Regarding the effect of BDJ training on the physical domains of our colleagues, results have showed that majority of colleagues have reported improvements of U.L (87%), L.L.(77%) and neck / back functions (90%). In addition, 80% and 87% of them have also reported immediate improvement of stamina and work performance respectively after the training. For descriptive comments, most of them have positive feedbacks e.g. improved team spirit, having a tranquil mind, etc, apart from the improvements of the physical domains mentioned above. Only one colleague has feedback that he / she doesn't has the interest in the training. In comparing the number of sick leaves days, the BDJ group has showed significant\* decrease in average sick leave days / staff as compared with same period in previous year and also significantly\* lower than the control group. Av SL days/staff 10/12 - 1/13 10/13 - 1/14 p value BDJ group 1.27 (1.38) 0.63 (1.07) 0.012\* Control group 1.07 (1.62) 1.47 (1.71) 0.262 p>0.05 \*p<0.05 HQG seemed to have positive effects in promoting health in OT colleagues.