



Service Priorities and Programmes Electronic Presentations

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Submitting author: Ms Suet Lan Polly FONG

Post title: Advanced Practice Nurse, Princess Margaret Hospital

Cultivating an Occupational Health & Safety Culture-Occupational Medicine Care Services of Kowloon West Cluster

FONG SL Polly

PANG SH Kathy; Dr. SO HP; SO ML Eric; CHAU SL Stanley

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Introduction

The Occupational Medicine Care Service (OMCS) of Kowloon West Cluster (KWC) provides a comprehensive range of Occupational Health and Safety services for the cluster staff, which included: Health Promotion, Workplace Surveillance and Assessment, Injury Management & Sickness Absence Management, etc. The aims are to improve staff's health and safety at work, early health / safety hazard detection and enhance the cluster overall performance by early interventions through the multi-disciplinary approach of Occupational Medicine (OM) team members and the professionals included: Occupational Health Physician (OHP), Occupational Health Nurses (OHN), Occupational Medicine Physiotherapist (OMPT) and Occupational Medicine Occupational Therapist (OMOT).

Objectives

One of our major focuses is on the Return to Work (RTW) Management of staff with Injury On Duty (IOD) and chronic musculoskeletal diseases. Especially, the IOD with the Strike, Slip, Trip & Fall (SSTF) accidents and the Worked-Related Musculoskeletal Disorders (WMSDs) involving the nerves, tendons, muscles, supporting structures and bone fractures which can cause severe and debilitating symptoms such as pain, numbness, tingling and joints dysfunction. It can reduce work productivity, increase lost time from work with temporary or permanent disabilities. All stake-holders, injured workers, department head & Occupational Safety & Health (OSH) Personnel and (OM) Team members are actively involved in the whole process of the Disability Management & RTW coordination.

Methodology

In the period of 1 January to 31 December 2016, a total of 957 staff in 8 cluster hospitals (CMC, KCH, KWH, NLTH, OLMH, PMH, WTSH & YCH), 18 community-based GOPCs & 5 hospital-based SOPCs were recruited and screened by OMCS case managers, (OHNs) through various means, such as IOD cases by Advanced Incident Reporting System (AIRS), referrals by department head/ Human Resources or self-referred by staff, or other specialties such as A&E and O&T. Among 957 staff, 296 (30.9%) were referred to Occupational Medicine Clinic for medical consultation, injuries management and treatment from (OHP). Fast track Out-patient intensive Physiotherapy and Occupational therapy were referred and provided to facilitate optimal recovery & RTW management. A total 143 (48.3%) cases were referred to (OMPT) for Pain Relief Treatment; Mobilization & Strengthening and Exercise Prescription. Also, a total 106 (35.8%) cases were referred to (OMOT) for Splintage Therapy, Hand Function Assessment & Training, Work Rehabilitation & Ergonomic Consultation. Individual Counselling with psychosocial support & holistic care were provided and closely monitored by Case Managers (OHN).

Result

By the end of Dec 2016, total 791 (82.7%) staff could resume job with full principal duties. 91 (9.5%) staff could resume job with modified duties & 73 (7.6%) were granted with sick leave and 2 (0.2%) has resigned due to their personal reasons. The success of the RTW management depends on various factors, e.g. active participation of injured workers and supervisors, support from department head. Effective Communication channel is a crucial element to increase the success of RTW management