

Background

Death is an inevitable part of life. When death occurs in a family, every individual member is affected psychologically, physically, spiritually and socially. Yet, we do not talk about death nor do we prepare for it. The lack of knowledge of as well as the preparation for our own death or the death of our loved ones inevitably adds more pain and sufferance to the death, dying and bereavement process to both the deceased as well as the bereaved. The Centre on Behavioral Health (CBH) of the University of Hong Kong has established the Empowerment Network for Adjustment to Bereavement and Loss in End-of-life (ENABLE), a 3.5-year project funded by the Hong Kong Jockey Club Charities Trust. Through a societal-wide campaign which serves to educate the general public on effective death preparation as well as to promote enhanced adjustment to bereavement and loss, we believe that life can become much more beautiful and fulfilling, while death can be peaceful and at the same time manifest a blissful sense of life completion.

Project Mission

The mission of the ENABLE is to:

- a) Promote public awareness on death, dying and bereavement;
- b) Facilitate the elderly population, people with chronic and terminal illnesses as well as their families members in preparing for death, dying and bereavement; and
- c) Develop overall competence of professionals in supporting dying patients and bereaved persons.



Project Content

The ENABLE project aims at promoting community competence at two levels:

- a) Primary Enabling Programme aims at providing a platform for the elderly population, people with chronic and terminal illnesses, and their family members, enabling them to plan in advance for the directives and decision making around death and dying. "ENABLER" will be recruited from the staff at existing health and elderly care units as well as healthcare professionals in hospitals. Through a "train-the-trainers" approach, the ENABLERs will then deliver life and death education workshops for over 73,200 terminally ill patients, elderly and their family members. Mass lectures, symposiums and different kinds of manuals will also be offered in order to deliver the relevant information on death, dying and bereavement to the general public.
- b) Secondary Enabling Programme aims at strengthening the professional support to the dying and the bereaved persons in Hong Kong. Through providing experiential workshops, as well as systematic, comprehensive and knowledgeable training programmes at different levels, the competence of the professionals in serving dying patients and the bereaved family members would be enhanced. People facing death and bereavement can then have the effective support so as to adapt to their grief while focusing on their transformation in life.



∞ ENABLE Alliance ∞

Background

ENABLE Alliance adopts a community networking model which is offered to organizations working with the elderly population, people with chronic and terminal illnesses as well as their family members in preparing for death, dying and bereavement. The purposes of establishing ENABLE Alliance are to build and strengthen communication among different organizations, and to develop strategic professional relations between the frontline healthcare professionals and academia.

Organizational Role

When you join the ENABLE Alliance, your organization becomes part of an empowerment network that is committed to promote public awareness on death, dying and bereavement, and to facilitate the elderly population, people with chronic and terminal illnesses as well as their family members in preparing for death, dying and bereavement.

The organizational role as an allied member involves collaborating with the Centre on Behavioral Health in relation to:

- 1. Assist the overall ENABLE project strategic delivery in your organization, bringing a new positive attitude towards death of service targets and staffs in your organization, and within the Hong Kong community upon the completion of the project,
- 2. Assigning suitable staffs from your organization to join our primary or secondary training related to life and death education as well as care of dying patients and their families,
- 3. Participating in selected media releases related to advocacy or professional conferences which facilitate exchange of experience through networking,
- 4. Enhance a tran-professional approach in further disseminate community education related to death and dying, and to pursue on changes of Government policies related to end-of life care of elderly or patients.





Support for Each Allied Member

In order to empower the community network and develop overall competence of professionals in supporting dying patients and bereaved persons, each allied member will enjoy access to a host of resources under the umbrella of ENABLE project, such as professional information, knowledge, services and training programmes:

- > Updated researches or news on death, dying and bereavement,
- Training programmes on death, dying and bereavement for professional development and advancement,
- > Systematic and comprehensive training kits, includes trainer's manual and participants' workbook,
- Audio-visual recourses library on life and death education.





ENABLE Project Training Programme Details

Primary Level – Community Training	Secondary level – Professional Training					
 1. "ENABLER" Train-the-Trainer Programme Training on theories, skills and activities implementation related to life and death education For professionals who work in the elderly service 1-day training 45 participants per each class, 26 classes in total Free of charge Commencing mid-2007 ENABLER's Benefits 1 copy of training manual 1 copy of training VCD 	 1. Experiential Life-Rejuvenating Workshop To increase healthcare professionals' self awareness towards the topic of death and dying through sharing and rediscovery of bereavement and grieving experiences 3-day training 25 participants per each class, 15 classes in total Fee: HKD350 Commencing mid-2007 This workshop is a pre-requisite for the Empowerment Bereavement Training Workshops 					
 Training aids and materials (including bag, workbook, souvenir) HKD 1,200 programme subsidy for each workshop of more than 20 participants (a total of 3600 subsidy payout within a 3 year timeframe, first come first serve basis) 	 2. Empowering Bereavement Training Workshop on Anticipatory Grief Target participants: Professionals who offer basic counselling for individuals facing issues around death and dying 3-day training 25 participants per class, 10 classes in total Fee: HKD150 Commencing late-2007 					
 Mass Seminar for Different Population Healthcare and medical professionals Social work and helping professionals Carers and general populations Half-day Fee: Free of charge to HKD50 	 3. Empowering Bereavement Training Workshop on Bereavement Counselling Target participants: Professionals who offer counselling services to bereaved individuals and families 4-day training 25 participants per class, 3 classes in total Fee: HKD200 Commencing early-2008 					
 3. Symposium Target audiences include healthcare and medical professionals, social workers, nurses, researchers and scholars One-day Fee: HKD100 	 4. Empowering Bereavement Training Workshop on Complicated Grief Target participants: Professionals who offer bereavement and crisis counselling foe people who suffer from complicated grief such as sudden or traumatic death 8-day training 25 people per class, 2 classes in total Fee: HKD300 Commencing mid-2008 					





ENABLE Project Training Programme Terms and Conditions

For Primary Level - Community Training:

A. Procedures for Application:

- 1 The applicants should fill in and submit the application form (P-ET FORM).
- 2 Successful applicants will be notified individually via email.
- 3 An ENABLER membership card will be issued to participants with full attendances.

B. Responsibilities of ENABLERS:

- 1 ENABLER will attend a one-day train-the trainer programme conducted by Centre on Behavioral Health, HKU.
- 2 ENABLER will have to conduct a minimum of ONE workshop with no less than 20 participants in their own agency. The participants are the agency's service users and/or their family members.
- 3 ENABLER can conduct more than one workshop but the first workshop must be conducted within 3 months after the one-day training.
- 4 ENABLER will have to inform Centre on Behavioral Health by email (bhealth@hku.hk) one week before the workshop is being conducted and the Centre reserves the right to send a team member to monitor the workshop.
- 5 ENABLER will have to execute all research activities relevant to the efficacy studies of the ENABLE project. This may include but not limited to pre-and-post workshop questionnaire administration, collection and submission, as well as identifying, recruiting and tracking of potential subjects of possible longitudinal efficacy studies.
- 6 ENABLER and/ or the Agency will have the responsibility in collecting and returning the workshop materials from the Centre on Behavioral Health.



C. Procedures of Claiming for Programme Subsidy

- 1 ENABLER must submit the followings to the Centre on Behavioral Health within 2 weeks after the workshop conducted:
 - 1.1 ENABLE project programme subsidy claim form (CF form).
 - 1.2 Pre and Post questionnaires filled in by the participants.
 - 1.3 Receipts of the claimed items
- Within ONE week upon receiving the cheque, the agency/organization **must** sign and return the receipt of acknowledgement to Centre on Behavioral Health, HKU.
- 3 The last claim date of programme fee (CF Form arrive at the Centre on Behavioral Health) is 31st December 2009.
- 4 Each workshop conducted can claim up to HKD1,200, of which the cost of man-power cannot exceed HKD800.
- 5 All claims are on a 'first come first serve' basis, claims will not be granted once the funding is exhausted.

For Secondary Level - Professional Training

- 1 The applicants should fulfill the Centre's "Programme Requirement" for admission.
- 2 The Centre will begin the selection process immediately after the application deadline. Successful applicants will be notified individually via email.
- To apply the Empowering Bereavement Training Workshop (Anticipatory Grief/ Bereavement Counselling/ Complicated Grief), applicants will be required to complete the Experiential Life-Rejuvenating Workshop offered by the Centre on Behavioral Health.
- 4 A "Certificate of Attendance" will be issued to participants with 90% attendance.
- Participants will have to execute all research activities relevant to the efficacy studies of the ENABLE project. This may include but not limited to pre-and-post workshop questionnaire administration, collection and submission, as well as identifying, recruiting and tracking of potential subjects of possible longitudinal efficacy studies.





Fax to: 2816 6710 Attention: Ms Tonia Chan



(P-ET Form)

One-day ENABLER Train-the-Trainer Application Form

For Internal Use Only											
ENABLER membership number:					Handled by:						
Date received:	/D /M /Y			Full atte	endance:			Yes			
Date of training:	/D	/M	/Y	Membe	rship card	d issued:		Yes			
Workshop date:	/D	/M	/Y	CF form	n received	d:	/D	/M	/Y		
Sent to finance:	/D	/M	/Y	Cheque	received	:	/D	/M	/Y		
Acknowledge receipt:	/D	/M	/Y	Remark	s:						
Part A. Personal Informatio	n										
Surname:	First na	me:			(Chinese name:					
Agency name:											
Title/ position:				Email a	ddress:						
Office number:	Mobile	number:				Fax number:					
Part B. Training Date											
Please input the course code in orde	er of pref	erence:									
1. P-ET-				4.	P-ET-						
2. P-ET-				5.	P-ET-						
3. P-ET-				6.	P-ET-						
I read and understand the terms	s and co	nditions o	utline	d in 'Ha	ndbook fo	or ENABLE A	lliance'	'and I	will		
fulfill the responsibilities of an E						01 21 11 22 11			******		
Signature of applicant:						Date:	/D	/M	/Y		
Name and signature of superviso	or:					_ Date: /	/D .	/ M	/Y		
(with company chop)						_					
<u> </u>											







(CF Form)

ENABLER Workshop Subsidy Claim Form

For In	ternal Use Only			
Claim	number:			Handled by:
Date re	eceived:	/D	/M /	Reimbursement approved: Yes No
Approv	val date:	/D	/M /	Reimbursement date: /D /M /Y
	e number:			
•				
_				
Par	t A. Agency & Tr	rainer Informat	ion	
Agency	y name:			
ENAB	LER name:			ENABLER membership number:
Date of	f ENABLER training	received:	/	D /M /Y
Par	t B. Details of Wo	orkshop & Atte	ndees	
Date of	f workshop conducted	l: /D	/M	/Y Number of attendees:
	ses conducted during			
	· ·	the workshop e.g.	LAUI, LA	·
	of the workshop:			
#	Name of Attendees	Contact Number	er HKID N e.g.A123	1
1.			C.g.A123	(1), Outers (please specify)
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11. 12.				
13.				
14.				
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21.				
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Part C. Breakdown of Programme Subsidy:

Description	HKD
Man-power (not more than HKD800)	
Snacks and drinks*	
Stationary, printing photocopying*	
Transportation and traveling*	
Programme materials*	
Others (please specify)*	
TOTAL (not more than HKD1,200)	

P	art	D.	Pay	ment	De	tails
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Address:				
Attention to:				
Signature of applicant:	Date:	/D	/M	/Y
Signature of supervisor (with company chop):	Date:	/D	/M	/Y
Name of supervisor:				

Please submit this form, together with receipts, and the completed pre and post questionnaires filled in by the participants and mail to, or in person to:

Centre on Behavioral Health The University of Hong Kong G/F Pauline Chan Building, 10 Sassoon Road, Pokfulam, Hong Kong. Attention: Ms. Tonia Chan.

(For enquiry, please contact Ms. Chan at 2589-0519)



^{*} Please attach receipts where appropriate



(S-EW Form)

Three-Day Experiential Life-Rejuvenating Workshop Training Application Form

For Internal Use Only				II.					
ENABLER number (if any): TR-EXP number:				<u> </u> на	ndled by:				
Date received	/D	/M	/Y	<u>—</u>					
Date of training:	/D	/M	/ Y	Ful	ll attendan	ce:		☐ Yes	☐ No
Part A. Personal Inform	ation								
Surname:	First na	ıme:			(Chinese nam	e:		
A gency name:							-		
				Email a	address:				
	Mobile					Fax numbe	r:		
Part B. Training Date									
Please input the course code in o	rder of pref	erence:			~				
 S-EW- S-EW- 				3.4.	S-EW- S-EW-				
Signature of applicant: Signature of supervisor: (with company chop) Name of supervisor:					-	Date:	/D /D	/M /M	/Y /Y
Please return this application at Hong Kong" by mail, or in per Centre on Behavioral Health The University of Hong Kong G/F Pauline Chan Building, 10 Sassoon Road, Pokfulam, Hong Kong. Attention: Ms. Tonia Chan. (For enquiry, please contact Material Chan and Chan.)	erson to:			mount	of HK\$3 5	5 <u>0</u> payable to	"The	Universi	ty of







(S-AG Form)

Three-Day Empowering Bereavement Training Workshop on Anticipatory Grief **Training Application Form**

For Internal Use Only									
ENABLER number (if any):		Handled by:							
TR-EXP number:				_ TR	-ANT Nu	mber:			
Date received	/D	/M	/Y						
Date of training:	/D	/M	/Y	Ful	ll attendan	ce:		Yes	☐ No
Part A. Personal Inform	ation								
Surname:	First na	ıme:			(Chinese nam	ıe:		
Agency name:									
Title/ position:			т	Email a	address:				
Office number:	Mobile	number:				Fax number	er:		
Part B. Training Date									
Please input the course code in o	rder of pref	erence:							
1. S-AG-				3.	S-AG-				
2. S-AG-				4.	S-AG-				
Signature of applicant:						Date:	/D	/M	/Y
Signature of supervisor:					-	Date:	/D	/M	/Y
(with company chop)									
Name of supervisor:									
Please return this application and thong Kong" by mail, or in positive Centre on Behavioral Health The University of Hong Kong G/F Pauline Chan Building, 10 Sassoon Road, Pokfulam, Hong Kong. Attention: Ms. Tonia Chan. (For enquiry, please contact M	erson to:	·		mount	of <u>HK\$1</u>	<u>50</u> payable t	o "The	e Univers	ity of





(S-BC Form)

Four-Day Empowering Bereavement Training Workshop on Bereavement Counselling Training Application Form

For Internal Use Only											
ENABLER number (if any):		Handled by:									
TR-EXP number:				TR	-BER Nu	umber:					
Date received	/D	/M	/Y								
Date of training:	/D	/M	/Y	Ful	l attendar	ice:		☐ Yes	☐ No		
Part A. Personal Inform	ation										
Surname:	First na	ıme:				Chinese nam	e:				
Agency name:											
Title/ position:			I	Email a	address:						
Office number:	Mobile	number:				Fax number	er:				
Part B. Training Date											
Please input the course code in o	order of pref	erence:									
1. S-BC-				3.	S-BC-						
2. S-BC-				4.	S-BC-						
Signature of applicant:						Date:	/D	/M	/Y		
Signature of supervisor:					-	Date:	/D	/M	/Y		
(with company chop)											
Name of supervisor:											
Please return this application Hong Kong " by mail, or in p Centre on Behavioral Health The University of Hong Kong G/F Pauline Chan Building, 10 Sassoon Road, Pokfulam, Hong Kong. Attention: Ms. Tonia Chan. (For enquiry, please contact M	erson to:			mount	of <u>HK\$2</u>	<u>00</u> payable t	······································	e Univers	 ity of		



(S-CG Form)

Eight-Day Empowering Bereavement Training Workshop on Complicated Grief Training Application Form

For Internal Use Only									
ENABLER number (if any):				Ha	ndled by:				
TR-EXP number:				_	-COM Nu	ımber:			
Date received	/D	/M	/Y			_			
Date of training:	/D	/M	/Y	Ful	l attendan	ce:		☐ Yes	☐ No
Part A. Personal Inform	ation								
Surname:	First na	me:			(Chinese name	e:		
Agency name:									
7D'.1 / '.'			т	lmail a	address:				
Office number:		number:				Fax numbe			
Part B. Training Date									
Please input the course code in c									
1. S-CG-				3.	S-CG-				
2. S-CG-				4.	S-CG-				
Signature of applicant:						Date:	/D	/M	/Y
Signature of supervisor:						Date:	/D	/M	/Y
(with company chop)									
Name of supervisor:									
_									
Please return this application Hong Kong " by mail, or in p Centre on Behavioral Health The University of Hong Kong G/F Pauline Chan Building,	erson to:	cheque v	vith an a	nount	of <u>HK\$3</u>	 <u>00</u> payable to	 o "The	e Univer	sity of
10 Sassoon Road, Pokfulam, Hong Kong. Attention: Ms. Tonia Chan.									
(For enquiry, please contact N	As. Chan at	2589-051	9)						