Poster of the workshop (with the biography of the speakers):

「守望．同行」災後喪親家庭支援計劃

HKU ABC-RS (已驗證量表) 專業培訓

講者：周燕雯教授

周教授為香港大學社會工作及社會行政學系系主任、思源基金教授、「守望．同行」災後喪親家庭支援計劃總監。周教授擁有註冊社工的背景，專攻善別輔導。

講者：張鳳儀女士

張女士為資深認證心理輔導師、心理輔導督導、香港專業輔導協會副院士、「守望．同行」災後喪親家庭支援計劃副總監。

混合培訓模式：線上及實體課程

第一階段：線上課程 (約3小時)

自選學習時間，必須於面授課程前完成

第二階段：面授課程 (3小時)

面授課程日期及時間*(每班名額30位)：

- 第一班：5月21日下午2:00至下午5:00
- 第二班：6月10日上午9:30至下午12:30
- 第三班：6月17日下午2:00至下午5:00
- 第四班：7月14日上午9:30至下午12:30
- 第五班：7月22日下午2:00至下午5:00

*每班內容一致，參加者只須參與其中一班，請於報名時填寫閣下意欲參與之班次。

報名截止日期: 面授課程前一星期

地點：香港大學百周年校園賽馬會教學樓532室

對象：社福、醫護界及相關專業人士

語言：粵語

報名二維碼

費用全免，並可獲取風險篩查手冊一本

此培訓與賽馬會善別關懷同盟的風險篩查培訓內容一樣，若意欲再次參加，仍歡迎報名。

精神健康諮詢委員會

合作院校 Partner Institution

HKU SWSA Department of Social Work and Social Administration The University of Hong Kong 香港大學社會工作及社會行政學系

捐助機構 Funded By

香港賽馬會慈善信託基金 The Hong Kong Jockey Club Charities Trust

Objectives of the workshop:

By the end of the course, participants will be able to

1. Understand the rationale and preventive function of the HKU-ABC-RS
2. Administer and interpret the HKU – ABC- RS appropriately
3. Use HKU-ABC-RS to guide referral decisions
4. Apply the HKU-ABC-RS for caseload prioritization
5. Integrate the HKU-ABC-RS into routine care

Qualtrics Evaluation

Level of Understanding

1. Understanding the importance of risk screening in bereavement care.
2. Understanding bereavement risk factors related to death circumstances, personal characteristics, relationships, coping abilities, socio-cultural environment, and caregiving.
3. Knowing how to apply risk screening in clinical practice.

Level of Competency

1. Using risk screening tool to identify individuals in need.
2. Being able to identify key risk factors that require special attention.
3. Being able to formulate intervention suggestions or make referral decisions based on the screening results.

Handout of the workshop

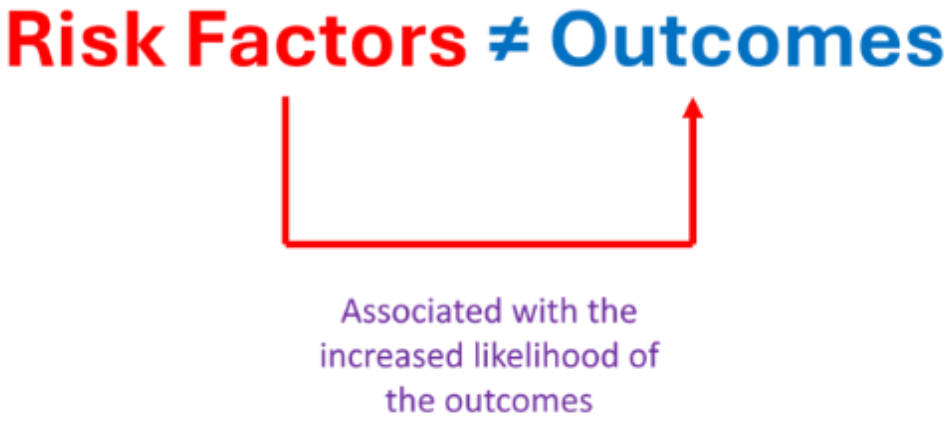
Training Series of Compassionate Support Programme for Bereaved Families

The Workshop on Risk Screening (HKU ABC-RS)

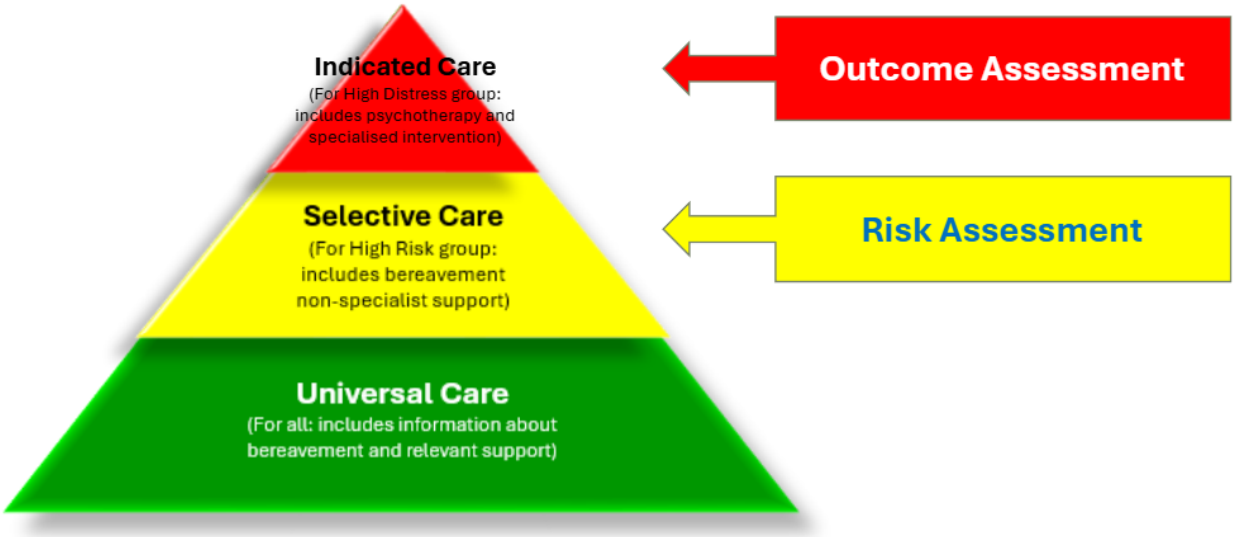
Professor Amy Y.M. Chow, Ph.D., R.S.W., F.T.
Si Yuan Professor in Health and Social Work,
Head, Department of Social Work & Social Administration,
The University of Hong Kong

Bereavement Risk

- The probability of harmful outcomes in bereavement, not a definite outcome
- Involves multiple domains



Bereavement Care Based on Assessment



Purpose of Risk Screening: Personalized Care

- Bridging Professional (refer for outcome assessment)

- Prevention (modifiable risk factors before death)
- Prioritization (timely and matched intervention and expertise)

The HKU ABC-RS Domains

Death-related Factors

- Child/Spouse
- Traumatic (e.g. suicide, violent death, natural disasters, witnessing traumatic scene, circumstances that perceived to be traumatic)
- Sudden
- Multiple deaths within a year
- Perceived accountable
- Lack of reality for the death
- Occurred on a special date (e.g. New Year, family member's birthday, anniversary)
- Disenfranchised grief (loss cannot be disclosed publicly)
- Uncommon (die at a young age, death by rare accident)

Individual-related Factors

- History of receiving psychiatric treatment
- Concurrent stressors (e.g. health problems, financial hardship, work-related, family-related)
- Major life changes after (e.g. caregiving role, financial status, living status, family structure)

Relationship-related Factors

- Close relationship (e.g. perceived closeness, living with before loss, dependency, centrality, twins)
- Ambivalent relationship
- Family conflict in grieving
- Unmet social needs (emotional, informational, instrumental)
- Unfinished business of the deceased
- Loneliness

Coping-related Factors

- Coping difficulty (emotional avoidance, lack of restoration-oriented coping, difficulty in meaning-making, resistance to the reality of death)

Environmental-related Factors

- Stigmatized
- Ritual did not meet the norms
- Did not meet cultural norm of good death

Caregiving-related Factors (applicable only for those with caregiving and healthcare services)

- Sole caregiver
- Dissatisfied with the care given
- Patient is not being respected
- Disagreement over patient's end-of-life decision
- Dissatisfaction communication with healthcare professionals

Scoring and Cutoff

- Rationale: Low tolerance for false negative, risk screening
- Mode: Use natural conversation rather than check box
- Score: Yes and Unknown as '1'
- Cutoff score for 5 domains (without caregiving experience): 9
- Cutoff score for 6 domains: 11
- Clinical intuition is important
- Components are not necessarily having equal impact

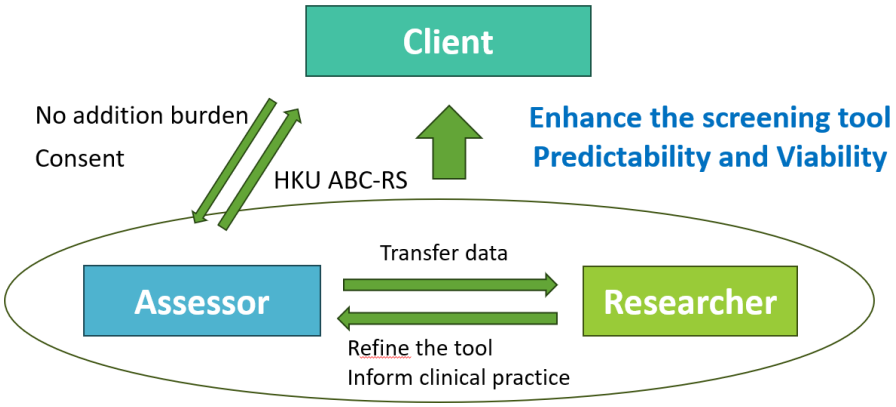
Time points and assessors

Completed HKU ABC-RS training

1. **Healthcare Professionals:** identify 'modifiable factors' and reduce risk factors
2. **Professional Personnels:** rationalize need for referral, tool to communicate, facilitate the bereaved for data transfer and referral
3. **Bereavement Care Professionals:** prioritization when many at one time, match expertise

Practitioner-Researcher Collaboration

- Can strengthen the predictability of the tool
- Enhance the tool (including no. of items)



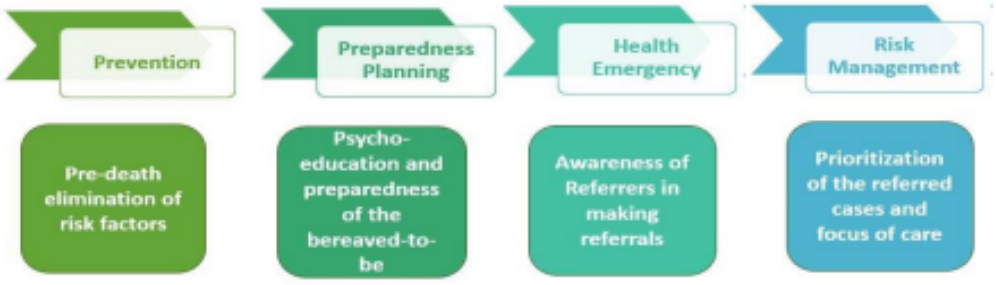
Understanding Limitation and Timeliness

- Know what you can offer and what you cannot. Refer to appropriate care if needed.
- If the need is urgent, assess and refer timely as an ethical act

Application of the HKU ABC-RS

- Check available information first
    - Existing files (e.g. demographic background), observations by formal or informal carer, previous communications with the bereaved persons
- Go with the flow
    - Not a check-list but based on the clinical encounters with the persons

Different Functions of HKU ABC-RS



- Prevention (healthcare professional)
    - Timely intervention of the modifiable risk factors in the pre-death moments
- Preparedness planning (general healthcare and social care professional)
    - Early intervention on potential distressing areas
    - Psycho-social education to increase competence in facing the challenges
- Bridging service (referrer)
    - Framework to identify the risk factors
    - Effective referral with common language for communications
- Prioritisation (bereavement care professional)
    - Directly proceed to outcome assessment, as risk is about probability and outcome is about actual situation
    - Prioritise only when too many referrals at one time
    - A mechanism to decide on the sequence of intake
    - A reference for assignment of case to appropriate worker

Schedule of the F2F workshop

Compassionate Support Programme for Bereaved Families
Risk Assessment Training

Date: May, 2026
Time: 14:00 – 18:00
Venue: On-line and CJT 5.33
Target: Health and Social Care Professionals.
Teacher: Professor Amy Chow

Objectives:
By the end of the course, participants will be able to

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Time	Content	Materials
13:45 – 14:00	Registration	Name list
14:00 – 14:05	Introduction - speaker, training programme, and this session	PPT, Computer, Projector
14:05 – 14:35	Recap of core points from the online course	
14:35 – 15:00	Modifiable Risk Factors Exercise 1: Menti Exercise 2: Discussion	Notes with the HKU-ABC-RS
15:00 – 15:20	Unmodifying Risk Factors Exercise 3: Discussion	
15:20 – 15:35	Tea Break	
15:35 – 16:00	Referral Exercise 4: Discussion Exercise 5: Discussion	2 cases videos
16:00 – 16:40	Prioritization Exercise 6: Discussion Exercise 7: Discussion	Notes with the the case background
16:40 – 16:50	Reminders and Conclusion	Notes of Slides 38-43
16:50 – 17:00	Q & A and evaluation	