

論壇七：	創新的長期照護實務與研究
作者：	桂世勛
機構：	華東師範大學中國老齡協會老齡科研基地
題目：	關於中國大陸“優化孤寡老人服務”的思考
摘要：	<p>在 2022 年 10 月中國共產黨第二十次代表大會通過的報告中首次明確要求優化孤寡老人服務”。我認為這是針對未來中國大陸“繼髮型孤寡老人(因配偶及子女均不幸去世)”和“原生型孤寡老人(因自願或非自願而終身無配偶及子女)將出現較大幅度增長的態勢提出來的。筆者建議中國大陸除了大力倡導和推進適齡婚育”，盡可能減少未來自願的“原生型孤寡老人”;積極貫徹和有效實施“健康中國”發展戰略，盡可能相對減少未來的“繼髮型孤寡老人”以外，應在現階段已實施的有關政策措施基礎上進一步采取以下“優化孤寡老人服務”措施:在設計中國大陸統一的“養老服務對象信息、服務保障信息庫”時，最好將“獨居老人”進一步分為“孤寡老人”和“非孤寡獨居老人”兩類對象;普遍建立與孤寡老人結對關愛的志願服務隊伍，精準關心孤寡老人的精神需求并及時反映他們的困難;精準構建 70 歲及以上或有需要的居家孤寡老人 24 小時的緊急救援網絡，將應急呼叫“120 救護車”與及時告知結對志願者或監護人密切結合;精準落實結對志願者定期探訪入住養老機構孤寡老人的關愛服務,增進養老機構護理人員對孤寡老人的悉心照護;政府部門精準審核批准孤寡老人的監護人和監護人的監督人，幫助孤寡老人立遺囑、處理符合本人意願和最佳利益的後事等。</p>

論壇七：	創新的長期照護實務與研究
作者：	許雅婷、王嘉偉、劉素卿、洪誌遠
機構：	臺北榮民總醫院員山分院
題目：	十年耕耘有成的復健之路
摘要：	<p>背景與目的：2013 年發現接受精神部服務的個案出院後，許多人雖身有回歸社區/職場的潛力，但缺乏「如何回歸」的途徑，讓其常在社區與住院中徘徊，重複的住院容易導致個案的功能逐步退化，於是成立庇護工場，取名為『愛工場』，代表以「愛」與「關懷」，強化自身的職業功能，期待個案成長，最終回歸社會。</p> <p>方法：「如何建構庇護工場」及「提供何種形式之服務」的理念下成立『愛工場』，希透過此途徑讓社會大眾更能瞭解身心障礙者的庇護性就業，及成功轉銜身心障礙者進入支持性職場；庇護員工可以透過日常熟悉的咖啡為媒介，提供游客直接的服務，降低機構式服務的負面影響(降低社會化歷程)。</p> <p>結果：1. 2019~2023 年總收(結)案人次合計為 31 人。 2. 2019~2023 年成功轉銜進入支持性職場合計有 7 名，占整體轉銜比例 33%，比其他調查報告的 2.8%成功轉銜率為高。 3. 庇護員工產能提升服務：從 2019 年平均發放薪資 5,262 元/月成長至 2023 年的 5,931 元/月，薪資成長為 4.2%/年，亦較同期公告基本工資(由 158 元調漲至 176 元)平均年調整幅度的 2.8%，高出 1.4 個百分比。 4. 庇護工場營運提升：2020 年營業總額為過去五年(2014~2018)年平均營業額(1,181,799 元)之 1.9 倍，後雖經歷 COVID-19 疫情影響，愛工場整體營業額仍維持 210 萬。</p> <p>結論及建議：回首 10 年來的足迹，我們從機構化走向社區化，更透過優化任務流程及輔具的設計架構促使個案回歸社區，邁向自立生活的服務模式，除了是所有庇護性就業之模範，更在我們提供的職業重建服務下，場內身心障礙者全日工作者(full-time worker)均能于接受服務後 3-6 個月成為全日工作者，比例高達 100%，優于 2001 年美國政府審計的統計資料中顯示，只有 86%的庇護性就業者只能接受非全日工作(part-time worker) (Alberto Migliorea, 2007)。 愛工場是一間「獨立運作的公司」，場內營運與專業人員需要高度的專業素養來協助身心障礙的就業服務，同時必須兼顧工場的經營與生存，因此工場的經營管理較一般職場或是身障機構更為困難。</p>

論壇七：	創新的長期照護實務與研究
作者：	鍾仁耀
機構：	華東師範大學公共管理學院
題目：	上海市長期照護服務基礎情況研究
摘要：	<p>結合在上海市 16 個區的 169 家綜合為老服務中心關於機構養老、社區養老調研數據及圍繞家庭照老者照護能力、社會支持等信息設計的 435 份問卷調查數據以及已有研究對長期護理保險項目的調研、研究報告等多源數據，對長期照護服務的基礎情況進行綜合分析。對長期照護服務的基礎情況研究主要分為三部分。第一，關於服務資源配置情況的研究，主要包括對機構照護服務的服務資源配置情況和對社區居家照護服務的服務資源配置情況研究。第二，關於長期護理保險項目的實施情況研究，主要包括長期護理保險的開展情況、實施效果，成本核算、影響因素及失能群體對長期護理保險項目的滿意程度等。第三，對失能群體及家庭照護者的需求特徵的研究，主要包括服務對象的需求特徵、家庭照護者需求特徵等進行分析。</p>

論壇七：	創新的長期照護實務與研究
作者：	黃愛蓮
機構：	明愛聖方濟各安老院
題目：	自立支援在安老院舍照顧中實務經驗分享
摘要：	<p>自立支援是一套由日本的竹本孝仁教授創立，以人本的照顧模式，他主張透過 1.飲水 2.營養, 3,排便, 4 運動四個基本照顧原則，讓長者可以提升現有的身體功能，從而達到“三零”即零臥床，零尿片，零約束的目標，并延緩失智症發展及減少周邊症狀。報告內容主要介紹自立支援模式的推行過程中的困難及應對方法。主要從四個方面分享相關的經驗: 1. 照顧者觀念的改變；2. 照顧模式的改變；3. 團隊的協作如何推動實踐；4. 員工及長者對實施自立支援模式後的反饋，最後達到提升長者個人自主生活能力。結果展示今後實踐自立支援模式對長期照護模式的啓示，改變過程中需要克服的困難，以及改變對照顧團隊及被照顧長者生活質素提升帶來的影響。</p>

論壇七：	創新的長期照護實務與研究
作者：	On-Ron CHOW, Miranda NG, Samuel KAM, Shirley TAI, Helen CHAN
機構：	The Nethersole School of Nursing, The Chinese University of Hong Kong
題目：	Self-Supporting Care Model in Residential Care Home Setting: Perspectives of Healthcare Providers
摘要：	<p>Background: Upholding dignity is fundamental in good quality aged care. To this end, a Self-supporting Care Model which aims to promote autonomy and independence of older people emerged in Japan and Taiwan. It emphasises maintaining adequate hydration and avoiding restraints, diapers and bedridden. The purpose of this study is to explore healthcare providers' attitudes and views toward its implementation in residential care home settings in Hong Kong.</p> <p>Methods: This study was conducted in collaboration with two residential care homes in Hong Kong because the Care Model was introduced in 2019. Since then, the staff members have received a series of in-service training and some residents were encouraged to participate in self-care tasks, such as folding clothes, bathing and eating, with the assistance of healthcare providers. Focus group interviews were conducted with staff members involved in this Care Model implementation. Informed written consent was obtained, with anonymity and confidentiality assured. The interviews were transcribed for qualitative content analysis.</p> <p>Results: Two focus group interviews were conducted with 16 staff members, including nurses, allied health professionals, personal care workers and health workers. Three themes were identified from the qualitative findings, namely paradigm shift, potential effects on residents' well-being and concerns of liability. It was noted that the Care Model is revolutionary because residents and their family members initially were uncertain about the purposes behind their involvement in various care-related tasks. Based on the participants' observations, it appears that the residents' engagement in the tasks had positive impacts on both the physical and psychosocial well-being of the residents, such as improved fine motor skills, muscle strength, sleep quality, sense of belonging and confidence. However, many participants also expressed concerns about their liability if any adverse events arose, for example, fall injury, given the limited manpower and time constraints. They also suggested expanding the care to allow multidisciplinary collaboration and outdoor activities and for more residents with different levels of abilities.</p>

	<p>Implications for practice: The Self-supporting Care Model empowers older people by promoting their active participation in various activities. These not only provide opportunities for them to restore their functional abilities but also enhance their quality of life. The model, which places great emphasis on their strengths and abilities rather than limitations and weaknesses, aligns well with World Health Organization on promoting healthy ageing in long-term care settings.</p>
--	--

論壇七：	創新的長期照護實務與研究
作者：	An TAO
機構：	The Nethersole School of Nursing, The Chinese University of Hong Kong
題目：	Experiential Learning about Self-supporting Care in Residential Care Home
摘要：	<p>Background: The care provided in long-term care is traditionally professionally driven, with priority given to the safety of care recipients. However, personal autonomy and subjective well-being of the care recipients might be overlooked in such care approach. The Self-supporting Care Model which originated in Japan highlights the importance of supporting older adults to maintain their physical and psychosocial independence through participation in daily activities. Since the philosophy of this Care Model is revolutionary, this paper reports the training provided to care home staff.</p> <p>Methods: This study was conducted in collaboration with two residential care homes in Hong Kong. Staff members who newly joined the care homes and attended a series of in-service training conducted in March 2023 were recruited to the study. Apart from theoretical knowledge about aged care, there were experiential learning activities that allowed participants to experience the impacts on individual well-being due to physical change and nursing care. Participants were invited to self-administer a questionnaire about their views towards aged care anonymously and voluntarily.</p> <p>Results: The 15 participants included nurses, health workers and personal care workers. Their mean clinical experience in aged care was 4.7 years, ranging from 8 months to 18 years. They generally have mixed feelings about the purpose of nasogastric tube feeding. The participants were more likely to appreciate the residents' right to choices based on personal values and that physical restraint is not the right strategy for preventing inappropriate behaviours or injuries among residents. The type of care being perceived as undignified was applying physical restraint (86.7%), followed by using diapers (66.7%). More</p>

	<p>participants considered feeding by staff (33.3%) as humiliating than nasogastric tube feeding (26.7%).</p> <p>Implications for practice: The focus of long-term care has expanded from physical care to holistic person-centred care. However, such a movement involves changes in the care attitudes of healthcare providers. Our project revealed the discrepancies between staff attitudes and the philosophy of the new care approach, and that staff training in the format of experiential learning is effective for introducing cultural change.</p>
--	--



論壇七：	創新的長期照護實務與研究
作者：	錢英，葉安琪，周禕禕、楊民君
機構：	杭州師範大學護理學院
題目：	心理資本幹預聯合手部觸摸對居家失能老人抑鬱和主觀幸福感的影響
摘要：	<p>背景：我國失能老人的抑鬱發生率高達48.6%，這不僅會削弱個體應對疾病的能力，還會導致其主觀幸福感降低。據報道，手部觸摸可從身體層面緩解失能老人的抑鬱症狀，而基于積極心理學的心理資本幹預模型（PCI）可減輕抑鬱，并對主觀幸福感有促進作用。但目前PCI還未被用于失能老人，且手部觸摸聯合PCI對緩解抑鬱的作用是否優于單用仍未知。目的：探討心理資本幹預聯合手部觸摸對居家失能老人抑鬱和主觀幸福感的影響。方法：隨機抽取浙江省某縣享受長期護理保險居家照護的失能老人90名，分為對照組、手部觸摸組和綜合幹預組。對照組實施常規居家長期照護服務；手部觸摸組在對照組的基礎上實施手部觸摸技術；綜合幹預組在對照組的基礎上實施手部觸摸聯合PCI。采用簡版老年抑鬱量表（GDS-15）、紐芬蘭紀念大學幸福度量表（MUNSH）分別在第0、6、12周比較三組的得分。結果：第12周，綜合幹預組抑鬱得分為（6.40±1.79）分，低于手部觸摸組（8.00±1.44）分和對照組（9.37±1.61）分（P&lt;0.01）；主觀幸福感得分為（32.13±5.29）分，高于手部觸摸組（27.90±7.00）分和對照組（25.20±6.58）分（P&lt;0.05）。三組時間和組別交互作用顯著（P&lt;0.05）。結論：PCI聯合手部觸摸能有效減輕失能老人的抑鬱，提高主觀幸福感，效果優于單用手部觸摸。</p>

<b>論壇七：</b>	<b>創新的長期照護實務與研究</b>
作者：	邱柏豪、林曜聖、陳良娟、黃大維
機構：	菲特邦健康管理顧問有限公司
題目：	高齡運動指導專業人員多元化教育培訓模式成效之初探-以臺灣偏鄉長照醫療場域（臺東聖母醫院+臺東快樂運動館）為例
摘要：	<p>背景與目的：隨著高齡人口比例不斷攀升，對於高品質的健康照護需求也日益迫切，特別是在偏鄉地區，面臨著資源匱乏和專業人才不足的挑戰。本研究旨在初步探討高齡運動指導專業人員多元化教育培訓模式在臺灣偏鄉長照醫療場域中的成效，以財團法人臺東聖母醫院與臺東快樂運動館為研究對象。</p> <p>方法：本研究以混合方法為基礎，透過質性深度訪談和量化問卷調查，評估高齡運動指導專業人員多元化教育培訓模式的實施成效。</p> <p>結果：研究結果表明，多元化教育培訓模式能提升長照醫療專業人員的知識水平、技能素養和跨領域合作能力方面具有積極影響。透過嚴謹的受訓流程與考核機制，使得受訓專業人員在運用多元知識背景的基礎上，能夠更加有彈性地設計適應個體需求的運動計畫，進而激發高齡受眾的運動參與動機，提升其生活品質。</p> <p>結論及建議：本研究建議中央及地方政府相關健康照護部門在政策層面上加強對高齡運動指導專業人員的支持，提供更多培訓資源和專業發展機會，同時改善基礎設施，以確保多元化教育培訓能夠充分發揮效益。</p>

論壇七：	創新的長期照護實務與研究
作者：	Rita SH KONG
機構：	Hong Kong Association of Gerontology
題目：	Report on Developing a Flexible and Diversify Training Program for Staff of Private Residential Care Homes for Elderly in Hong Kong
摘要：	<p>Background: As of June 2023, there are over 600 private residential care homes for elderly in Hong Kong. Private nursing homes often have limited resources and staff with busy daily working schedules. Scheduling dedicated time for staff training is always a challenge. In addition, factors such as high staff turnover, diverse staff skill levels, language and cultural differences make it difficult to maintain the level of care. Addressing these difficulties requires careful planning, clear communication, and a commitment to continuous training and development.</p> <p>Aim: The program aimed to develop a flexible and diverse training model to meet the needs of staff training in private residential care homes for elderly.</p> <p>Method: The training program was conducted under the "Jockey Club Easy-to-Learn Program for Elderly Services" (August 2020 to July 2023). One of the goals of the project was to build the capacity of nursing home staff by establishing an e-learning platform. Home managers were invited to attend classroom training on how to use the e-learning platform. Six sets of skills demonstration videos were produced and published on dedicated e-learning platform, mobile application and HKAG YouTube channel. Training materials, including instructional videos and associated video clips on selected topics, were uploaded to the e-learning platform - Learning Management System. Home managers educated and guided staff to use the learning platform for group training or individual study during work or in their free time. As another part of the program, nursing homes were encouraged to participate in on-site coaching provided by nurses and social workers to refine staff clinical skills.</p> <p>Result and Conclusion: Scheduled online learning programs supported by e-learning platform was new to staff of private care homes before 2020. In the past two years, a total of 83 care homes participated in the online learning training program and 163 homes</p>

	<p>participated in the onsite coaching. They chose the engagement method that suit their needs. Over 95% of nursing home managerial staff and frontline workers were satisfied with the training and on-site coaching. Feedback showed that the combination of online training and on-site coaching could well meet the different training needs of nursing homes at different time.</p>
--	--

論壇七：	創新的長期照護實務與研究
作者：	柯筠、詹豐澤、林志忠、陳嘉慧、簡暉倫、董侑淳、張瑛瑛
機構：	臺中榮民總醫院埔里分院
題目：	運用跨領域團隊合作照護降低高齡長者潜在不適當用藥問題比例-以地區醫院為例
摘要：	<p>背景與目的：在高齡長者常見的多重用藥、視力/聽力不良、排便/解尿問題、生活功能、跌倒、殘弱、營養不良與疼痛等問題中，具有多重用藥問題之長者在本院針對高齡長者所提供之服務範疇內占有一定的比例。因此，本文以跨領域團隊合作照護(Interprofessional Practice, IPP)方式，評估本院高齡長者處方用藥并持續追蹤及修正，以降低潜在不適當用藥(Potentially Inappropriate Medication, PIM)之比例。</p> <p>方法：首先，個案管理師透過老年周全性評估(Comprehensive Geriatric Assessment, CGA)篩選出具有多重用藥之個案并呈報予藥師，藥師則是透過藥品資料查詢系統與門診系統取得個案目前所使用的藥品名稱、數量、頻率等相關資訊後，根據 Beers Criteria 高齡長者用藥指引擬定出 PIM 個案之「藥物使用建議事項」并用于醫師開立醫囑時參考用，最後由個管師針對個案進行後續追蹤及諮詢。</p> <p>結果：本文將以 2022 年度接受 CGA 評估之個案為對象共 216 位，其中 140 位長者符合多重用藥，具有 PIM 問題之個案數為 84 位，占 60%。透過調整用藥指引及醫囑後，PIM 品項由 148 類降至 120 項，數量由 158 減少至 135，分別降低 18.9% 與 14.6%。</p> <p>結論及建議：由於受到疫情影響，大幅減少長者至醫療機構諮詢專業人員之機會，因此，透過資訊科技同時整合長者用藥資訊，以淺顯易懂方式適時傳達至相關醫事人員、高齡長者及家屬之流程，將是未來減少長者多重用藥問題上重要考量之一。</p>