

Examining the effectiveness of improving Tungs' Taichung MetroHarbor Hospital employee self-health awareness and behaviour to improve body weight and body fat control

Post hospital :
Tungs' Taichung MetroHarbor Hospital
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IMPORTANT

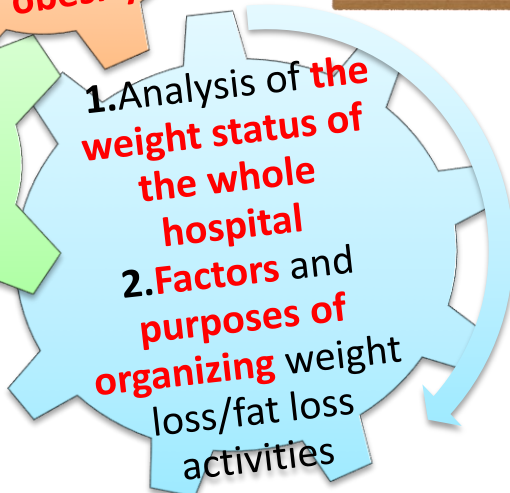
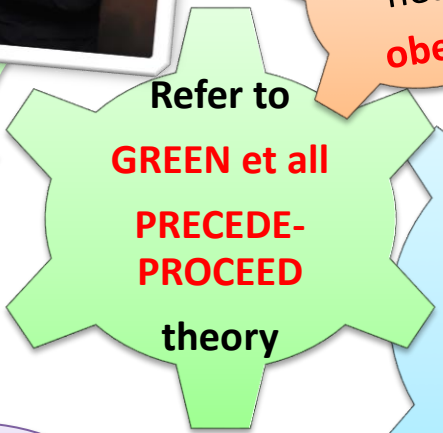
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BACKGROUND AND AIMS



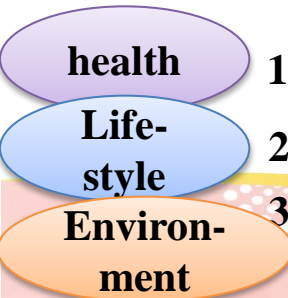


High calorie diet + Convenient transportation = Obesity



Our hospital **2020-2021** abnormally high BMI

- Reason 1: Less movement, diet high in sugar, high in calories, and high in oil
- Reason 2: Young, ignoring health concerns



Policy, Regulation, Resources, Organisation



Organize relevant activities to encourage employees to pay attention to their health, pay attention to their own obesity problems.

2

METHODS/INTERVENTIONS



Activities & Plans

- **Target:** all hospital



Participation conditions:

1. BMI greater than 20kg/m²
2. Body fat percentage:
men greater than 15%
Women greater than 20%

Or

- **Program:** 6 months



Introduction to Design Methods



Predisposing factors



Reinforcement factors



Enabling factors

Publish weight loss and fat loss texts in the competition group every week.

The Google form will be opened in July, August, September and October, and the final report prevent unhealthy weight and fat loss.

The first class of exercise class is Pilates, monitoring stretching and demonstration.

Dietitians teach about diets for weight loss and fat loss.

Successful people share their own journeys, and participants support each other.

hospital gym available.

Incorporate sports step counting competition to implement sports in daily life.

3

RESULTS



The effect of each activity 1

- Weight loss and fat loss comparison:

Compared with before the game number of drops	July	August	September	October (final return)
Number of people reporting	105people	99people	110people	120people
Weight (Kilogram)	238.8kg	421.5kg	505.2kg	514.65kg
body fat (%)	No statistics due to the small number of returnees	197.2%	173.31%	170.5%



Results:

During the event, the Google form was regularly published in the group. **The total number of participants was 279**, but the number of monthly reports gradually **increased from July to October**, and **the weight and body fat also gradually decreased**.

The average weight loss was 3.34 kg. The fat is 1.2%, **and the effect is remarkable**.

The effect of each activity 2&3



Results:

Gym usage **increased to 23%**.

- 111/9/26 Diabetes Diet Therapy

Participation rate : 77.9%

Satisfaction: A+

- 111/10/5 Pilates Class (Mat Yoga)

Participation rate : 80%

Satisfaction: A+

- 111/10/20 Weight loss and fat loss exercise classes

Participation rate : 88.8%

Satisfaction: A+

Results:

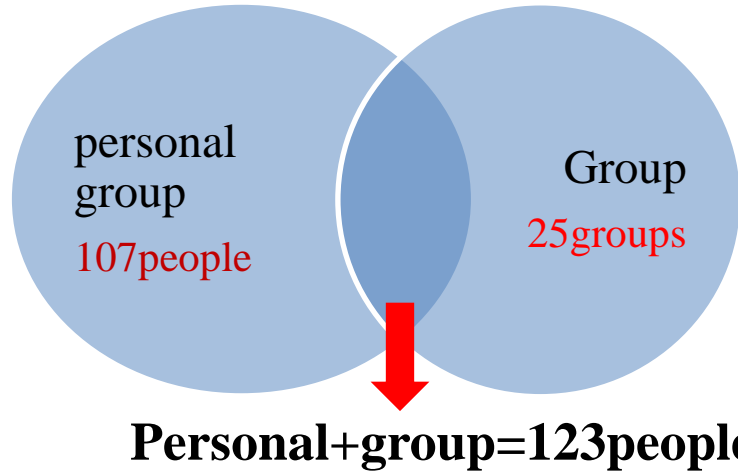
The participation rate of weight loss, fat loss nutrition and exercise classes **is as high as 80%**, and the satisfaction **is close to full marks**. After the course, there is a mini quiz.





The effect of each activity 4

Number of applicants:



Final finishers:



Results:

The individual group participation rate is over 57%, and the group participation rate is over 95%, which has **a slight impact on the number of steps**, but through this activity, **employees' awareness and habit of autonomous exercise have been virtually established.**

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CONCLUSION/EXPERIENCE LESSONS



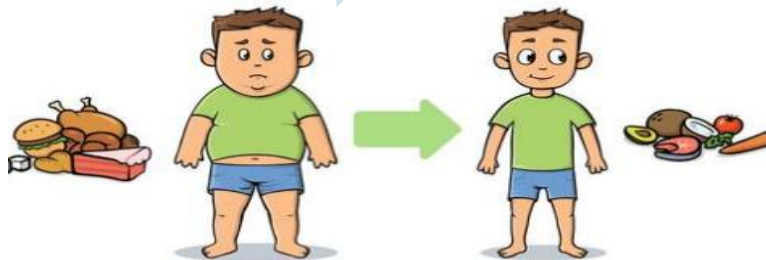
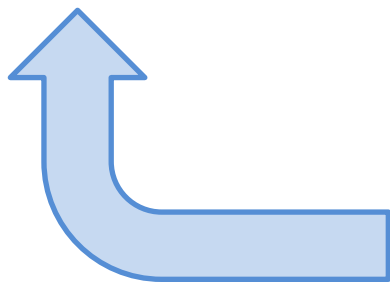


Activity Planning Basis

Predisposing factors

Reinforcement factors

Enabling factors



Weight and body fat loss



Participating employees with **high compliance** can get **better weight loss effect**. Increase the **effectiveness of workplace health promotion programs.**

5

CORRELATION WITH HPH





The Ottawa Charter for Health Promotion

mentioned :



The contents of medical service systems should be oriented towards health promotion and not only stop at disease diagnosis and treatment. Everybody should work together to promote health-promoting hospitals, promote the health of patients, staff, and Service populations, and create a safety

And healthy workplace.

**Primary
Healthcare**

**Disease
Treatment**



**Public health
Promotion**





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